## **AAE Endodontic Case Difficulty Assessment Form**

CRITERIA AND SUBCRITERIA	MINIMAL DIFFICULTY	Moderate Difficulty	HIGH DIFFICULTY
	A. PATIEN	IT CONSIDERATIONS	
MEDICAL HISTORY	☐ No medical problem (ASA Class 1*)	☐ One or more medical problems (ASA Class 2*)	☐ Complex medical history/serious illness/disability (ASA Classes 3-5*)
ANESTHESIA	☐ No history of anesthesia problems	☐ Vasoconstrictor intolerance	☐ Difficulty achieving anesthesia
PATIENT DISPOSITION	☐ Cooperative and compliant	☐ Anxious but cooperative	☐ Uncooperative
ABILITY TO OPEN MOUTH	☐ No limitation	☐ Slight limitation in opening	☐ Significant limitation in opening
GAG REFLEX	□ None	☐ Gags occasionally with radiographs/treatment	☐ Extreme gag reflex which has compromised past dental care
EMERGENCY CONDITION	☐ Minimum pain or swelling	☐ Moderate pain or swelling	Severe pain or swelling
B. DIAGNOSTIC AND TREATMENT CONSIDERATIONS			
DIAGNOSIS	☐ Signs and symptoms consistent with	☐ Extensive differential diagnosis of	☐ Confusing and complex signs and
	recognized pulpal and periapical conditions	usual signs and symptoms required	symptoms: difficult diagnosis  History of chronic oral/facial pain
RADIOGRAPHIC	☐ Minimal difficulty	☐ Moderate difficulty	☐ Extreme difficulty
DIFFICULTIES	obtaining/interpreting radiographs	obtaining/interpreting radiographs (e.g., high floor of mouth, narrow or low palatal vault, presence of tori)	obtaining/interpreting radiographs (e.g., superimposed anatomical structures)
POSITION IN THE ARCH	<ul><li>☐ Anterior/premolar</li><li>☐ Slight inclination (&lt;10°)</li></ul>	☐ 1st molar ☐ Moderate inclination (10-30°)	☐ 2nd or 3rd molar ☐ Extreme inclination (>30°)
	☐ Slight rotation (<10°)	☐ Moderate rotation (10-30°)	☐ Extreme rotation (>30°)
TOOTH ISOLATION	☐ Routine rubber dam placement	<ul> <li>Simple pretreatment modification required for rubber dam isolation</li> </ul>	<ul> <li>Extensive pretreatment modification required for rubber dam isolation</li> </ul>
MORPHOLOGIC	☐ Normal original crown morphology	☐ Full coverage restoration	☐ Restoration does not reflect
ABERRATIONS OF CROWN		☐ Porcelain restoration	original anatomy/alignment
		☐ Bridge abutment	<ul> <li>Significant deviation from normal</li> </ul>
		<ul> <li>☐ Moderate deviation from normal tooth/root form (e.g., taurodontism, microdens)</li> <li>☐ Teeth with extensive coronal</li> </ul>	tooth/root form (e.g., fusion, dens in dente)
		destruction	
CANAL AND ROOT	☐ Slight or no curvature (<10°)	☐ Moderate curvature (10-30°)	☐ Extreme curvature (>30°) or
MORPHOLOGY	☐ Closed apex (<1 mm in diameter)	☐ Crown axis differs moderately from root axis. Apical opening 1-1.5 mm in diameter	S-shaped curve  Mandibular premolar or anterior with 2 roots
			<ul> <li>Maxillary premolar with 3 roots</li> <li>Canal divides in the middle or apical third</li> </ul>
			☐ Very long tooth (>25 mm) ☐ Open apex (>1.5 mm in diameter)
RADIOGRAPHIC APPEARANCE OF CANAL(S)	☐ Canal(s) visible and not reduced in size	☐ Canal(s) and chamber visible but reduced in size ☐ Pulp stones	☐ Indistinct canal path ☐ Canal(s) not visible
RESORPTION	☐ No resorption evident	☐ Minimal apical resorption	☐ Extensive apical resorption
	— No resorption evident	- William apical resorption	☐ Internal resorption ☐ External resorption
	C. ADDITION	NAL CONSIDERATIONS	
TRAUMA HISTORY	☐ Uncomplicated crown fracture of	☐ Complicated crown fracture	☐ Complicated crown fracture
	mature or immature teeth	of mature teeth	of immature teeth
		☐ Subluxation	☐ Horizontal root fracture
			☐ Alveolar fracture
			Intrusive, extrusive or lateral luxation
ENDODONTIC	☐ No previous treatment	☐ Previous access without complications	Avulsion
TREATMENT HISTORY	INO previous treatment	- Frevious access without complications	Previous access with complications (e.g., perforation, non-negotiated
			canal, ledge, separated instrument)
			<ul> <li>Previous surgical or nonsurgical endodontic treatment completed</li> </ul>
	☐ None or mild periodontal disease	☐ Concurrent moderate periodontal	☐ Concurrent severe periodontal
CONDITION		disease	disease
			☐ Cracked teeth with periodontal
			complications
			<ul> <li>Combined endodontic/periodontic lesion</li> </ul>
			Root amputation prior to
			endodontic treatment
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Class 1: No systemic illness. Patient healthy.
Class 2: Patient with mild degree of systemic illness, but without functional restrictions, e.g., well-controlled hypertension.
Class 3: Patient with severe degree of systemic illness which limits activities, but does not immobilize the patient.

Class 5: Patient will not survive more than 24 hours whether or not surgical intervention takes place.

www.asahq.org/clinical/physicalstatus.htm

<sup>\*</sup>American Society of Anesthesiologists (ASA) Classification System

Patient with severe systemic illness that immobilizes and is sometimes life threatening.