

WELCOME TO OUR OFFICE

Welcome to Victor Valley Endodontics! We are a specialty practice dedicated to providing the highest quality root canal and root end surgical procedures available today. Our doctors have both specialty certificates and advanced degrees in Endodontics and our office is equipped with the most modern technology available in order to provide a superior dental experience when receiving root canal therapy.

Endodontics therapy has changed radically over the past five years. Advances in magnification, illumination, instrumentation techniques, root canal filling materials and antimicrobial rinses are enhanced by our specialists' additional education in the various modalities of pulpal therapy.

Your dentist has referred you to our office because he/she believes you will benefit from the specialty services we offer. These may include the use of surgical microscopes for canals in your tooth that appear calcified or obstructed on the x-rays, teeth that require special instrumentation or filling techniques due to unusual canal anatomy, or repairs to the internal root structure. Additionally, we finish our treatment with a special antibiotic canal irrigation that may increase the long term success of your endodontic therapy.

At Victor Valley Endodontics, we believe it is important to have excellent communication with our patients. Our doctors will discuss your options and any special treatment needs prior to beginning root canal treatment, and our staff will go over potential fees, including charges that may not be included in the insurance plan you have chosen. In many cases, your insurance plan does not provide for all of the needed or beneficial procedures involved in your treatment under a single, basic "root canal" code. Where applicable, these procedures will be coded separately and charged accordingly. Please remember that you have been referred to this office because your dentist believes the specialized services we provide may be important to the success of your dental treatment.

Signature
(parent or guardian if patient is a minor)

Date