Conclusion:
On the basis of the current best available evidence, we concluded that cast posts had higher fracture resistance than fiber posts.
Conclusions
Results suggest that human dentin can serve as post material under static and fatigue loading. Although at an early stage in research, the use of dentin posts in root-filled teeth looks promising.

It can be concluded that endodontic treatment of teeth represents a feasible, practical, and economical way to preserve function in a vast array of cases and that dental implants serve as a good alternative in selected indications in which prognosis is poor.

Post Operative Care
- Share Radiographs With Patient “This is the hardest endo I have done (today)”
- Non Steroidal Anti Inflammatory (NSAID)
- Pain Medications
- Antibiotics
- Telephone Call To Patient Next Day

Non Steroidal Anti Inflammatory (NSAID)
Ibuprofen-200, 400, 600, 800
600 milligrams per dose or 3200 mg per day (5 maximum doses).

Steroids
Prednisone-5mgs
Disp:21 tabs XXI
Sig: 6, 5, 4, 3, 2, 1
Prednisone-5mgs
Disp:1dose pack
Sig: as directed

Conclusions
Patients who received bupivacaine as the anesthetic agent for single-visit endodontic treatment of irreversible pulpitis in mandibular molars had significantly less early postoperative pain and used fewer analgesics than those who had lidocaine as the anesthetic.
### Pain Medications

#### Acetaminophen

**Tylenol Maximum Daily Dosage**

Extra Strength Tylenol 500mg tablets has gone down from 8 per day to 6 per day, i.e. from 4,000mg per day to 3,000mg per day.

### Pain Medications

#### Some Common Prescription Drugs That Contain Acetaminophen

- Darvocet®
- Endocet®
- Fioricet®
- Hycotab
- Hydrocodone Bitartrate
- Lortab®
- Percocet®
- Phenaphen®
- Sedapap®
- Tapanol®
- Ultracet®
- Vicodin®
- Zydone®

### Pain Medications

#### Some Common Over-the-Counter Drugs That Contain Acetaminophen

- Actifed®
- Anacin®
- Benadryl®
- Cepacol®
- Contac®
- Coricidin®
- Dayquil®
- Dimetapp®
- Dristan®
- Elixir®
- Excedrin®
- Feverall®
- Formula 44®
- Goody’s® Powders
- Liquiprin®
- Midol®
- Nyquil®
- Panadol®
- Robitussin®
- Saint Joseph® Aspirin-Free
- Sinus®
- Sinutab®
- Sudafed®
- Theraflu®
- Triaminic®
- TYLENOL® Brand Products
- Vanquish®
- Vicks®
- Zicam®

### Antibiotics

**PenVK-500mgs**

Disp: 25 tabs XXV  
Sig: 2 stat, 1q6h

**Amoxicillin-500mgs**

Disp: 25 tabs XXV  
Sig: 2 stat, 1q6h
<table>
<thead>
<tr>
<th><strong>Antibiotics</strong></th>
<th><strong>Antibiotics</strong></th>
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<tbody>
<tr>
<td><strong>Augmentin-500mgs</strong> (amoxicillin + clavulanate)</td>
<td><strong>Cleocin (clindamycin)-150mgs</strong></td>
</tr>
<tr>
<td>Disp:25 tabs XXV</td>
<td>Disp:25 tabs XXV</td>
</tr>
<tr>
<td>Sig: 2 stat, 1q6h</td>
<td>Sig: 2 stat, 1q6h</td>
</tr>
<tr>
<td><strong>Keflex (cephalexin)-500mgs</strong></td>
<td><strong>Cipro (ciprofloxacin)- 250mgs</strong></td>
</tr>
<tr>
<td>Disp:12 tabs XII</td>
<td>Disp:12 tabs XII</td>
</tr>
<tr>
<td>Sig: 1q12h</td>
<td>Sig: 1 q12h</td>
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<tr>
<th><strong>Antibiotics</strong></th>
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<tbody>
<tr>
<td><strong>Flagyl (metronidazole)-250 mgs</strong></td>
<td><strong>Minocin (tetracycline)- 100mgs</strong></td>
</tr>
<tr>
<td>Disp: 21 Tabs XXI</td>
<td>Disp:25 tabs XXV</td>
</tr>
<tr>
<td>Sig: 1 tab q8h</td>
<td>Sig: 1 q12h</td>
</tr>
<tr>
<td><strong>Z-Pak (azithromycin)- 250mgs</strong></td>
<td></td>
</tr>
<tr>
<td>Disp:1 dose pack</td>
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<tr>
<td>Sig: 2 stat, 1 daily next 4 days</td>
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<tr>
<th><strong>Prosthetic Joint Implants</strong></th>
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<tr>
<td><strong>In patients with prosthetic joint implants, a January 2015 ADA clinical practice guideline, based on a 2014 systematic review states, “In general, for patients with prosthetic joint implants, prophylactic antibiotics are not recommended prior to dental procedures to prevent prosthetic joint infection.”</strong></td>
<td><strong>According to the ADA Chairside Guide, for patients with a history of complications associated with their joint replacement surgery who are undergoing dental procedures that include gingival manipulation or mucosal incision, prophylactic antibiotics should only be considered after consultation with the patient and orthopedic surgeon; in cases where antibiotics are deemed necessary, it is most appropriate that the orthopedic surgeon recommend the appropriate antibiotic regimen and, when reasonable, write the prescription.</strong></td>
</tr>
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</table>
For infective endocarditis prophylaxis, current guidelines support premedication for a relatively small subset of patients. This is based on a review of scientific evidence, which showed that the risk of adverse reactions to antibiotics generally outweigh the benefits of prophylaxis for many patients who would have been considered eligible for prophylaxis in previous versions of the guidelines. Concern about the development of drug-resistant bacteria also was a factor.

The current infective endocarditis/valvular heart disease guidelines state that use of preventive antibiotics before certain dental procedures is reasonable for patients with:
- prosthetic cardiac valves, including transcatheter-implanted prostheses and homografts;
- prosthetic material used for cardiac valve repair, such as annuloplasty rings and chords;
- a history of infective endocarditis;
- a cardiac transplant with valve regurgitation due to a structurally abnormal valve;
- the following congenital (present from birth) heart disease:
  - unrepaired cyanotic congenital heart disease, including palliative shunts and conduits
  - any repaired congenital heart defect with residual shunts or valvular regurgitation at the site or adjacent to the site of a prosthetic patch or a prosthetic device.