

With a disc in the engine cut a groove across the labial and palatal or lingual surfaces of the tooth to be decrowned, at the desired point.

Have prepared a few points of orange wood or hickory about two or three inches long. The ordinary wedgewood rods answer well. Make the points about the length, shape and size of the canal in the tooth to be operated upon.

Saturate them with some strong disinfectant. I have found pure carbolic acid very satisfactory. Have on hand a light mallet, also have the engine in position charged with a long pointed cone-shaped bur. Everything being ready, with a pair of excising forceps, one blade of which is placed in each groove previously made, the crown is removed. If the canal be found to have been exposed at or near its greatest diameter, one of the prepared points should be immediately inserted, and while held in position given a sharp, quick blow with the mallet. An additional light blow or two may be given to insure its advance to the apex of the canal.

If the plug be withdrawn, such of the pulp as may not have been forced out of the canal will be found adhering to the sides of the plug. The preparation of the canal for the post may be proceeded with at once. Indeed, some cut or twist off the plug and proceed to drill the post hole, leaving the plug as a filling for the apex. I have done this. An advantage of withdrawing the plug is, that if it has failed to reach the apex a broach or drill may be advanced.

If it be found when the crown is snapped off that the canal be not exposed at its greatest diameter it may be enlarged with the pointed engine bur and the extirpation proceeded with.

Whatever is to be done, however, must be done without delay. The shock to the nerve when the tooth is decrowned is so sudden, that the injury is not perceived at the seat of sensation. It frequently occurs in cases of accidents that severe injuries are sustained, as loss of fingers or toes, or wounds inflicted, without the victim being aware of the injury. Sensation soon returns, however, hence the necessity of haste in the removal of pulps in the case of immediate extirpation. This operation is only practicable in teeth having regularly shaped single root canals: as the six anterior superior teeth and second bicuspid and the ten anterior lower teeth.

I can conceive of cases even among the teeth named where this operation could not be successfully performed—for instance, in case of crooked and irregularly-shaped roots, or in very small flat-shaped lower incisors where the nerve canal may be very fine and ribbon shaped; or where a tooth may be largely decayed exposing the pulp above the point at which it is desired to decrown, or where the pulp had receded beyond the point at which it is decided to decrown.