



### WHAT ARE WISDOM TEETH?

Third molars are commonly referred to as wisdom teeth. They are usually the last teeth to develop in the back of the jaws behind the second molars. Their development is usually completed between the late teens and early twenties, a time traditionally associated with the onset of maturity and the attainment of wisdom.

### WHAT IS AN IMPACTED TOOTH?

While people develop and grow wisdom teeth naturally, many times their jaws are too small to allow all of their wisdom teeth to erupt into functional and healthy positions.



A special x-ray of the mouth and jaws called a Panorex will be taken to determine if your wisdom teeth are impacted, if

there is room for them to erupt into a healthy position, and to identify critical anatomy that may be involved in their removal.

In some cases, a CT scan may be recommended to obtain more detailed information. We use 3D Cone Beam CT Scan in our office that provides highly detailed 3-dimensional images that can show the differences between tooth, bone, sinuses, nerves, and other soft tissues. This provides our surgeons with valuable information that they will share with you at your consultation visit.



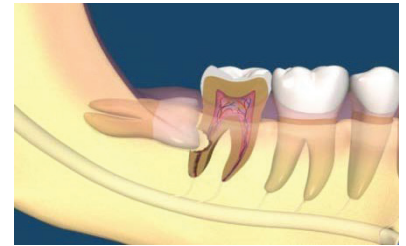
Wisdom teeth are classified by the degree they are impacted under the gums and how deep they are within the jawbones. They can be erupted, soft tissue impacted, partial bony impacted and full bony impacted. Your surgeon will explain what kind of wisdom teeth you have and whether it will be beneficial to have them removed.

### WHAT PROBLEMS CAN WISDOM TEETH CAUSE?

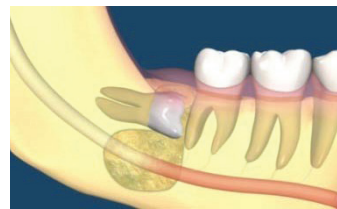
Pain is the most frequent complaint patients have with their wisdom teeth. The pain can be in many forms such as headache, facial pain, difficulty eating and localized tooth pain. Pressure forms as the wisdom tooth tries to erupt and there is not enough room. This can lead to pain in the jaws and teeth areas.

**THE ABSENCE OF PAIN DOES NOT ALWAYS EQUAL THE ABSENCE OF DISEASE** – meaning you

can be having serious problems related to your teeth without experiencing any pain. Pain is often a late sign of a serious tooth and jaw problem.



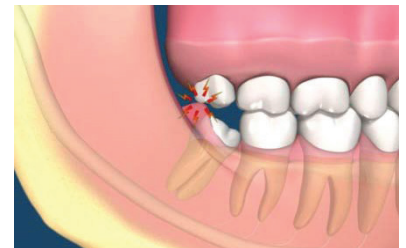
Cavities can form on the teeth in front of the wisdom teeth as the wisdom teeth push into the roots of the 2nd molars and prevent toothbrush or floss from properly cleaning the 2nd molars. This 2nd molar may then require root canal treatment or extraction.



We commonly see infections in the jaw as a result of the wisdom teeth. Cysts form around impacted teeth that get infected with bacteria. In some cases the untreated infection

may spread to adjacent areas such as the neck, sinuses and brain resulting in emergency surgery, hospitalization, and long term antibiotic therapy.

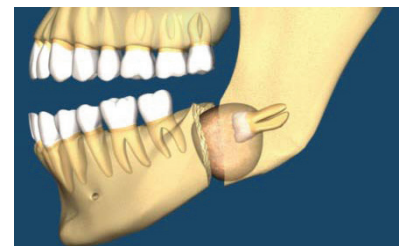
Periodontal disease, often called “gum disease” has been found to start in the space between the wisdom tooth and 2nd molar. Once periodontal disease starts it is often difficult, if not impossible to cure. Research has now shown that early removal of the wisdom teeth can prevent periodontal disease.



Premature births and low birth weight babies have been linked to impacted wisdom teeth in women of child bearing ages. This is believed to be a result of cellular inflammation around the impacted tooth that has a negative impact on the developing baby in the womb.

Crowding and shifting of teeth is the long term consequence of an impacted tooth pushing against the neighboring teeth. This can lead to bite problems and gum disease.

While rare, jaw fracture is a devastating consequence of an untreated impacted wisdom tooth. This can lead to permanent numbness to the lower lip, chin, gums and teeth, as well as malocclusion and temporomandibular joint problems.



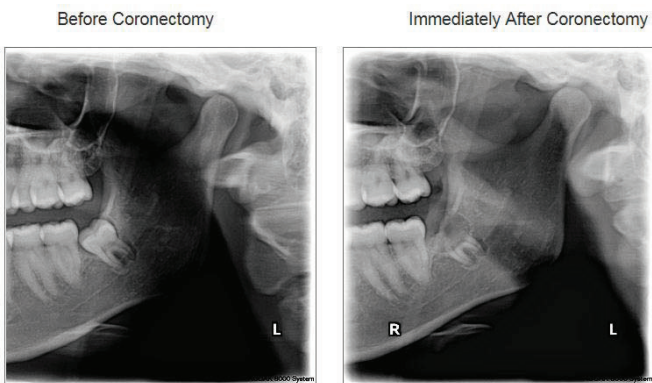
## WHEN SHOULD I HAVE MY WISDOM TEETH REMOVED?

The simple answer is the sooner the better if your surgeon has recommended removal. For some patients it is as early as 12 or 13, whereas most will be in their late teens or early twenties before the roots are fully developed. In general, younger patients heal faster and with fewer complications.

Clinical studies have shown that complications are more likely to occur as the roots become longer, the jawbone becomes denser, and you become older. When it is necessary to remove the teeth later in life (thirties, forties or beyond), the post-operative course can be prolonged and there is a higher complication rate. Treating these complications is often more difficult and less predictable than in younger patients. Healing in the older patient is slower and the risk of infection is higher.

Unless you have an active problem when you come to see us, the reason for removal is primarily to prevent future problems and long-term damage to your teeth, gums, and jawbone.

Damage to the inferior alveolar nerve, (this nerve provides sensation to the lower lip, chin, gums and teeth) when extracting lower wisdom teeth, is often caused by the close relationship between the nerve and the roots of the teeth. The technique of Coronectomy may reduce the risks. Coronectomy is the deliberate removal of the crown of a vital tooth while avoiding movement of the roots.



If you choose not to have your wisdom teeth removed, you should continue to see your dentist at least twice a year and have radiographs taken on a routine basis to make sure you are not developing any problems.

## WHAT HAPPENS ON THE DAY THEY ARE REMOVED?

Most patients prefer to be unaware when they are having their wisdom teeth removed. Your surgeon will provide you with your anesthesia options during your consultation visit. In addition, you will be given written instructions so that you can prepare for surgery.

The removal of wisdom teeth typically takes about an hour with a period of time after to recover from the anesthesia.

Patients are usually discharged to home within 90 minutes from the start of their procedure. Patients are required to have a parent or other responsible adult over 18 accompany them to the office and to drive home afterwards.

After the procedure, a surgical assistant will review your post-operative instructions with you and your escort. You will be given medications for pain and others as deemed necessary by your doctor. If you were given IV anesthesia, you will be comfortable and drowsy when you leave the office. We recommend you go directly home, drink plenty of fluids and relax for the rest of the day.

With any medical procedure, there can be unexpected results. These can include delayed healing, infection and post-operative numbness or tingling in the lip, chin, gum or tongue. Should you have any problems after your procedure we ask that you immediately notify the doctor as we are here to help you.

## WHAT DOES IT COST AND DOES MY INSURANCE COVER IT?

The fee for your treatment is determined by a number of factors. These may include the anticipated level of difficulty, amount of time required in removing your teeth and the type of anesthesia being used. Each tooth is assigned a specific procedure code and this information is used to provide you with an estimate.

Every insurance company has a different policy regarding the extent of coverage for wisdom teeth. Upon your request, we will contact your insurance before your surgery and provide them with all the procedure codes. We offer this service even if you are using out-of-network benefits. We will then contact you with your benefit information as it was given to us by your insurance company. Our staff will help you obtain the maximum insurance coverage for your treatment.



*Our In-Office  
3D CT Scanner*

We encourage you to contact the office if you have any questions. Our doctors and patient care coordinators are here to help you.

For more information go to [WWW.NJCENTEROS.COM](http://WWW.NJCENTEROS.COM)

Online patient registration is encouraged as we are a HIPPA compliant electronic medical records office.