

Dental Practices Examine Why Diagnosed Endodontic Cases Are Not Always Completed

MCKINNEY, TX, UNITED STATES, April 6, 2026 /EINPresswire.com/ -- Dental practices are increasingly examining what happens after endodontic conditions are diagnosed, as some cases do not consistently move forward to treatment. While referral relationships and clinical decision-making remain central, some practices are finding that patient follow-through becomes less predictable once care requires coordination outside the originating office.



In many practices, cases aren't lost after referral. Some never get that far. If nothing is scheduled before the patient leaves, follow-through becomes much less predictable."

*Randy Middleton, D.D.S.,
Founder of EndoConnect*

Rather than being tied to a single factor, this appears to be influenced by patient preference, scheduling dynamics, and the number of steps between diagnosis and treatment.

This has led some to reevaluate not only referral performance, but the broader process between diagnosis and treatment, particularly as patient preference and scheduling dynamics influence whether care is ultimately

completed.

Why Endodontic Cases Slip Away Even in Well-Run GP Practices

Most practices don't set out to change how they handle endodontics. It usually starts with something more practical. They're not happy with their referral setup, they feel like too much production is leaving the practice, or they've noticed that some of the cases they diagnose just don't get treated. A lot of the time, it comes down to something simple.

Patients would prefer not to go somewhere else.

Even when the referral is appropriate, you can see the hesitation. Some patients say they'll call, others ask if it can wait, and some agree in the moment but don't follow through. It's not that the need isn't there. It's that once care requires another step outside the practice, follow-through becomes less consistent.

Where Things Actually Break Down

Most practices assume they lose endo when they refer it out. That does happen, but a meaningful portion of cases never even make it that far. You diagnose the tooth. You explain what's going on. But nothing gets scheduled before the patient leaves. After that, what happens next is less predictable. Some patients follow through. Others wait and never get treated. Some end up getting treatment elsewhere and don't return. What's consistent across all of these situations isn't the patient. It's the lack of control between diagnosis and treatment.

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