PREOPERATIVE DIAGNOSIS: , Carious teeth and periodontal disease affecting all remaining teeth., POSTOPERATIVE DIAGNOSIS:, Carious teeth and periodontal disease affecting all remaining teeth and partial bony impacted tooth #32., PROCEDURE: , Extraction of remaining teeth numbers 2, 3, 4, 5, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, and 32., ANESTHESIA:, General, oral endotracheal., COMPLICATIONS:, None., CONDITION:, Stable to PACU., PROCEDURE: Patient was brought to the operating room, placed on the table in the supine position and after demonstration of an adequate plane of general anesthesia, the patient was prepped and draped in the usual fashion for an intraoral procedure. Gauze throat pack was placed and local anesthetic was administered in the upper and lower left quadrants and extraction of teeth was begun on the upper left quadrant teeth numbers 9, 10, 11, 12, 13, 14, 15, and 16 were removed with elevators and forceps extraction. Moving to the lower quadrant on the left side, tooth numbers 17, 18, 19, 20, 21, 22, 23, and 24 were removed with elevators and routine forceps extraction. The flaps were then closed with 3-0 gut sutures and upon completion of the two quadrants on the left side, the endotracheal tube was then relocated from the right side to the left side for access to the quadrants on the right. Teeth numbers 2, 3, 4, 5, 7, and 8 were then removed with elevators and routine forceps extraction. It was noted that tooth #6 was missing, could not be seen whether tooth #6 was palately impacted, but the tooth was not encountered. On the lower right quadrant, teeth numbers 25, 26, 27, 28, 29, 30, and 31 were removed with elevators and routine forceps extraction. Tooth #32 was partially bony impacted, but exposed, so it was removed by removing bone on buccal aspect with high-speed drill with a round bur. Tooth was then luxated from the socket. The flaps were then closed on both quadrants with 3-0 gut sutures. The area was irrigated thoroughly with normal saline solution and a total of 8.5 mL of lidocaine 2% with 1:100, 000 epinephrine and 3.6 mL of bupivacaine 0.5% with epinephrine 1:200, 000. Upon completion of the procedure, the throat pack was removed. The pharynx was suctioned. An oral gastric tube was passed and small amount of stomach contents were suctioned. The patient was then extubated and taken to PACU in stable condition.