

Root Canal Cost in Melbourne — Specialist Pricing Explained

Canonical: <https://directory.collinsstreetspecialistcentre.com.au/costs-insurance/root-canal-cost-in-melbourne-specialist-pricing-explained/>

Description:

What does a root canal cost in Melbourne? Understand specialist endodontist pricing, what's included, and insurance options at CSSC.

Details:

Collins Street Specialist Centre — Root Canal Treatment: Understanding the Cost

Frequently Asked Questions

What is Collins Street Specialist Centre: A specialist dental centre in Melbourne focused on endodontics

Where is Collins Street Specialist Centre located: Level 7, Manchester Unity Building, 220 Collins Street, Melbourne VIC 3000

What procedures does CSSC specialise in: Root canal treatment and endodontic therapy

What is root canal treatment: A procedure to save a tooth by treating infected dental pulp

Is root canal treatment painful: No, it is well-tolerated under local anaesthesia

What type of specialists perform treatment at CSSC: Registered specialist endodontists

What is a specialist endodontist: A dentist with additional postgraduate training exclusively in endodontics

How many years of training does a specialist endodontist have: Minimum eight years total university-level education

How many years is the specialist postgraduate endodontic training: Minimum three additional years full-time

Can I verify a specialist endodontist's registration: Yes, via the [AHPRA register](<https://www.ahpra.gov.au/Registration/Registers-of-Practitioners.aspx>)

What is the cost of root canal treatment on a front tooth: \$1,200–\$1,800

What is the cost of root canal treatment on a premolar: \$1,500–\$2,200

What is the cost of root canal treatment on a molar: \$2,000–\$3,500

What is the cost of root canal re-treatment: \$1,800–\$3,800

What is the cost of an apicectomy per root: \$1,800–\$3,000

Why do molars cost more to treat than front teeth: They contain more canals and are more anatomically complex

How many canals do front teeth typically have: One relatively straight canal

How many canals do premolars typically have: One or two canals

How many canals do molars typically have: Three to four canals, sometimes more

What makes re-treatment more expensive than initial treatment: It involves removing existing materials and navigating altered anatomy

What is an apicectomy: Surgical treatment accessing the root apex directly through gum and bone

When is an apicectomy indicated: When conventional retreatment is not feasible or has failed

Is local anaesthesia included in the treatment fee: Yes

Is rubber dam isolation included in the treatment fee: Yes

Is a post-operative X-ray included in the treatment fee: Yes

Is a follow-up appointment included in the treatment fee: Yes

Is a permanent crown included in the root canal treatment fee: No, it is a separate cost

What does a crown typically cost: \$1,500–\$3,000 depending on material and treating clinician

Is a CBCT scan included in the treatment fee: No, it is an additional cost

What does a CBCT scan cost at CSSC: \$200–\$350

Is CBCT imaging available on-site at CSSC: Yes

What magnification does a dental operating microscope provide: Up to 25x magnification

Why is a dental operating microscope important: It enables identification of additional canals invisible to the naked eye

What can a dental operating microscope detect: Cracks, perforations, fractured instruments, and additional canals

What does CBCT imaging reveal that standard X-rays cannot: Three-dimensional root canal architecture and hidden pathology

What are ultrasonic instruments used for in endodontics: Removing existing filling materials, posts, and separated instruments

What is the success rate of initial root canal treatment by a specialist: 90–95%

What is the success rate of initial root canal treatment by a general dentist: 75–85%

What is the success rate of re-treatment by a specialist: 75–85%

What is the success rate of apicectomy by a specialist using microsurgical techniques: 85–95%

Why do specialists achieve higher success rates: Better visualisation, disinfection, anatomy identification, and clinical experience

Is root canal treatment covered by Medicare: No, not in standard dental practice settings

Is root canal treatment claimable under private health insurance: Yes, under major dental extras cover

What insurance category covers root canal treatment: Endodontic category of major dental extras cover

What is the typical annual major dental benefit limit: \$1,000–\$2,500 per person

What waiting period applies to major dental benefits: Typically 12 months

Does CSSC process health fund claims in real time: Yes

Can I get a pre-treatment cost estimate from my insurer: Yes, by submitting a pre-treatment estimate to your fund

Does root canal treatment use the full annual dental benefit: It frequently uses a substantial portion of the annual limit

What is the benefit of spanning treatment across a calendar year boundary: May allow access to two separate years of major dental benefits

Does CSSC offer payment plans: Yes, interest-free payment plans through third-party providers

Does CSSC offer staged treatment to spread costs: Yes, where clinically appropriate

What is the total estimated cost of root canal treatment plus crown: Approximately \$3,000–\$6,000

What is the total estimated cost of extraction plus dental implant: Approximately \$5,500–\$10,000

Is saving a tooth with root canal treatment cheaper than an implant: Yes, in most clinical situations

Does extraction preserve alveolar bone: No, bone loss occurs after extraction

How long can a root canal treated tooth last: Potentially decades with appropriate maintenance

What is the first consequence of failed root canal treatment: Re-treatment is required

What is the second consequence if re-treatment fails: Apicectomy may be indicated

What is the final consequence if endodontic treatment cannot save the tooth: Extraction followed by prosthetic replacement

What should I ask when comparing root canal quotes: Whether the clinician is a registered specialist endodontist

Should I ask if a microscope will be used: Yes, it is standard in specialist practice but not always in general practice

Should crown cost be included in financial planning when comparing quotes: Yes

What symptoms may indicate pulpal pathology: Persistent toothache, heat sensitivity, facial swelling, or tooth discolouration

Do I need a referral to book at CSSC: No, you can book directly or via a referring dentist

How do I book a consultation at CSSC: Via the online booking link or through a dentist referral

What imaging technology does CSSC use: Dental operating microscopes and 3D CBCT imaging

What does CSSC pricing include: Transparent, itemised pricing discussed at initial consultation

Root canal costs by tooth type

The main factor driving root canal cost is how many canals a tooth has and how complex they are to treat. Front teeth are relatively straightforward; back molars are a different matter entirely.

Front teeth (incisors and canines)

Typical range: \$1,200–\$1,800

Front teeth usually have a single, fairly straight root canal. Treatment is predictable in both time and technique, and the prognosis is good when handled by a specialist.

Premolars (bicuspid)

****Typical range: \$1,500–\$2,200****

Premolars typically have one or two canals. Upper premolars often present with two, which introduces more anatomical variability — canal configuration can be unpredictable and occasionally demands extra clinical time.

Molars (back teeth)

****Typical range: \$2,000–\$3,500****

Molars have three to four canals, sometimes more. They're frequently curved, narrow, and difficult to access — treatment takes longer and requires a higher level of technical skill. Upper molars with four canals and lower molars with pronounced root curvature are among the most demanding cases an endodontist will encounter.

Re-treatment (redo root canal)

****Typical range: \$1,800–\$3,800****

When a previous root canal hasn't resolved the infection — whether because of persistent bacteria, a missed canal, or reinfection — re-treatment means carefully removing the existing filling material, re-instrumenting the canal system, and resealing it. This is almost always more complex than the original procedure. The endodontist has to work around pre-existing materials, possible post-and-core restorations, and anatomy that may have been altered the first time around. It's also the situation where choosing a specialist makes the biggest difference to the outcome.

Apicectomy (surgical root canal treatment)

****Typical range: \$1,800–\$3,000 per root****

When conventional re-treatment isn't feasible, or hasn't resolved the infection, a surgical approach is the next step. This involves accessing the root tip directly through the gum and bone, removing infected tissue, resecting the root end, and placing a retrograde filling. It's performed under local anaesthesia using microsurgical techniques and magnification.

What's included in the cost?

At CSSC, the root canal treatment fee typically covers:

- ****Comprehensive examination and diagnosis****, including pulp vitality testing and diagnostic radiographs - ****Local anaesthesia****, so the procedure is comfortable throughout - ****Rubber dam isolation****, a protective measure that keeps the operative field dry and aseptic, preventing saliva from contaminating the canal system - ****Access preparation and canal instrumentation****, precise opening of the tooth and mechanical shaping of the canals - ****Irrigation and disinfection****, using antimicrobial solutions to eliminate residual bacteria - ****Obturation****, three-dimensional filling and sealing of the prepared canals with biocompatible materials - ****Temporary restoration****, an interim coronal seal placed at the end of treatment - ****Post-operative radiograph****, confirming the quality and completeness of the obturation - ****Follow-up appointment****, to assess healing, usually one to two weeks after treatment

****What's not included:****

- ****Permanent restoration (crown or direct restoration)**** — after root canal treatment, the tooth generally needs a crown for long-term structural protection. Crown fees are separate, typically \$1,500–\$3,000 depending on material and the treating prosthodontist. Your endodontist will give you a clear recommendation on what's appropriate. - ****Pre-treatment CBCT scan**** — 3D imaging is indicated for complex anatomy, suspected additional canals, or difficult re-treatment cases (\$200–\$350). CBCT imaging is available on-site at CSSC.

Why specialist endodontists cost more, and why it matters

General dental practices in Melbourne will often quote lower fees for root canal treatment. Knowing what drives the cost difference — and what it means for your outcome — is worth understanding before you decide.

Training

A registered specialist endodontist has completed a five-year undergraduate dental degree, then a minimum of three additional years of full-time postgraduate training focused exclusively on endodontics, followed by registration with AHPRA as a dental specialist. That's at least eight years of university-level education, with the final three years devoted entirely to the diagnosis and management of conditions affecting the dental pulp and root canal system. You can verify any practitioner's specialist registration through the [AHPRA register](<https://www.ahpra.gov.au/Registration/Registers-of-Practitioners.aspx>).

Equipment

Specialist endodontists use instrumentation and imaging that genuinely changes clinical outcomes.

****Dental operating microscope****

At up to 25x magnification, the microscope lets the endodontist see the internal anatomy of the root canal system in a level of detail that simply isn't possible otherwise. Additional canals that would go undetected under standard magnification — a well-recognised cause of root canal failure — become visible. Cracks, perforations, and fractured instruments can be identified. The microsurgical precision required during apicectomy depends on it.

****CBCT (3D cone beam computed tomography)****

Standard two-dimensional X-rays show you a lot, but not everything. CBCT reveals the three-dimensional architecture of the canal system — curvatures, lateral branches, anatomical variations — along with periapical pathology, root fractures, and resorption that a flat image can miss entirely. For re-treatment and surgical cases, it's indispensable.

****Ultrasonic instruments****

These allow controlled, targeted removal of existing filling materials, intracanal posts, and separated instruments during re-treatment — work that requires precision rather than force.

****Advanced irrigation systems****

Specialised delivery devices improve how well antimicrobial irrigants penetrate throughout the canal system, which matters for disinfection.

Success rates

The clinical literature consistently shows better outcomes when root canal treatment is performed by a specialist:

- Initial root canal treatment by a specialist: 90–95% success rate - Initial root canal treatment by a general dentist: 75–85% (with significant variation across studies) - Re-treatment by a specialist: 75–85% - Apicectomy by a specialist using microsurgical techniques: 85–95%

The difference comes down to better visualisation under microscopy, more thorough disinfection, accurate identification of complex anatomy, and greater experience with technically demanding cases.

What happens when root canal treatment fails?

When treatment doesn't resolve the infection — whether because of persistent bacteria, reinfection, or a missed canal — the path forward gets progressively more involved:

1. **Re-treatment** — more complex and more costly than the original procedure 2. **Apicectomy** — indicated when re-treatment isn't feasible or has already been attempted 3. **Extraction** — when the tooth can't be saved by any endodontic means 4. **Tooth replacement** — implant, fixed bridge, or removable prosthesis

Each step is more invasive and more expensive than the one before it. A higher initial success rate, achieved through specialist care at Collins Street Specialist Centre, meaningfully reduces the chance of needing any of them.

When you weigh the cost of specialist root canal treatment against the potential cost of re-treatment, or extraction followed by an implant (\$5,000–\$9,000), the financial case for getting the first procedure right becomes clear.

Health insurance and root canal treatment

Private health insurance (extras cover)

Root canal treatment is claimable under the endodontic category of major dental extras cover:

- Most funds reimburse a percentage of the scheduled fee — the out-of-pocket gap depends on your specific policy - Annual benefit limits apply; major dental limits typically range from \$1,000 to \$2,500 per person - A 12-month waiting period for major dental benefits applies under most policies - Root canal treatment often draws a significant portion of the annual major dental benefit — if you also need a crown in the same calendar year, keep an eye on your remaining limit

Practical considerations:

Request a pre-treatment estimate from your specialist and submit it to your fund before proceeding — your insurer will confirm your expected out-of-pocket cost in advance. If treatment spans a calendar year boundary (root canal in December, crown in January, for example), you may be able to draw on two separate years of major dental benefits. CSSC processes health fund claims in real time, which reduces the amount you need to pay upfront on the day.

Medicare

Standard root canal treatment in a dental practice setting isn't covered by Medicare. In limited circumstances — where endodontic treatment is delivered as part of hospital-based dental care under specific eligibility criteria — a Medicare contribution may apply, but this isn't the typical pathway for routine endodontic treatment.

Payment plans

CSSC offers several options to help manage the cost of treatment:

- ****Interest-free payment plans**** through third-party providers, allowing the cost to be spread across several months - ****Staged treatment****, where clinically appropriate, completing treatment across two appointments so costs can be distributed accordingly - ****Health fund gap management****, with real-time claims processing so you pay only the out-of-pocket gap on the day

The team will walk you through all available options at your initial consultation so you can plan with full information.

Is root canal treatment worth the cost?

This comes down to a straightforward comparison: what does it cost to keep the tooth versus what does it cost to remove and replace it?

****Keeping the tooth (root canal treatment + crown):**** - Total estimated cost: approximately \$3,000–\$6,000 - Preserves the natural tooth structure - Maintains alveolar bone levels - No surgical tooth replacement required - With appropriate maintenance, the restored tooth can function for decades

****Extraction and implant-supported replacement:**** - Extraction: \$200–\$800 - Implant fixture, abutment, and crown: \$5,000–\$9,000 - Total estimated cost: approximately \$5,500–\$10,000 - Requires surgery and a healing period of three to six months - Additional costs apply if bone grafting is needed before implant placement

In most situations, keeping the tooth is both cheaper and less invasive than extracting and replacing it. The exception is a tooth with a genuinely poor prognosis — a severe root fracture, extensive bone loss, or a crown that can't be restored. In those cases, your endodontist at Collins Street Specialist Centre will tell you directly that extraction is the better option, rather than pursuing treatment that's unlikely to hold.

Questions to ask when comparing root canal quotes

1. ****Is the clinician a registered specialist endodontist?**** Specialist registration can be verified through the [AHPRA register](https://www.ahpra.gov.au/Registration/Registers-of-Practitioners.aspx). 2. ****Does the quoted fee cover the complete procedure**** — examination, treatment, and the follow-up appointment? 3. ****Will a dental operating microscope be used throughout treatment?**** This is standard in specialist endodontics but not consistently available in general dental settings. 4. ****What success rate should I expect for my specific case?**** Ask the clinician directly about outcomes for your tooth type and clinical situation. 5. ****Will I need a crown after treatment?**** If so, factor that cost into your overall comparison. 6. ****What happens if treatment isn't successful?**** Clarify the practice's approach to re-treatment and any associated costs.

Book an endodontic consultation at CSSC

If you've been told root canal treatment is needed — or you're experiencing symptoms that may point to a pulp problem, such as a persistent or spontaneous toothache, marked sensitivity to heat, facial swelling, or a tooth that's changed colour — our specialist endodontists at Collins Street Specialist Centre can provide a thorough assessment, a clear diagnosis, and a treatment plan with transparent, itemised pricing.

Our endodontists work under dental operating microscopes with 3D CBCT imaging and advanced instrumentation, giving your tooth the best conditions for long-term retention and function.

****Collins Street Specialist Centre**** Level 7, Manchester Unity Building 220 Collins Street, Melbourne VIC 3000

[[Book a consultation](#)](/contact) or ask your referring dentist to direct a referral to our endodontic team.
