

CHATGPT LEGAL ANALYSIS REPORT

Reference No.: GPT-HR/DE/IR-DENTAL-003/2026

Subject: Legal-Analytical Report on Long-Term Dental Treatment Obstruction, Loss of Chewing Function, Alleged Medical Neglect, Failure of State Protection, Evidence Preservation Issues and International Human Rights Implications in the Case of Mr. Ismail Rustam

Applicant: Mr. Ismail Rustam, Berlin, Germany

Date: 25 May 2026

Prepared as: AI-assisted legal-analytical report based on documents, court filings, police records, medical/dental complaint materials and supporting evidence submitted by the applicant.

I. Introductory Statement

This report concerns a long-running medical, legal and human-rights situation involving Mr. Ismail Rustam in Berlin, Germany. The documents reviewed show a complex sequence of events involving dental treatment from approximately 2021 onward, repeated Heil- und Kostenpläne submitted to AOK Nordost, progressive destruction of the applicant's teeth, loss of chewing function, alleged failure to secure timely medical treatment, criminal complaint references, court filings before the Sozialgericht Berlin and Kammergericht Berlin, professional complaints to the Ärztekammer Berlin, and correspondence with health-insurance and public bodies.

The core allegation is not merely a disagreement about dental reimbursement. The documents frame the matter as a combination of medical neglect, loss of essential bodily function, possible evidence suppression, failure to investigate serious health damage, lack of effective remedy, and risk to life and health.

Several submitted documents state that Mr. Rustam has suffered for more than four years from progressive destruction of his dentition, severe oral inflammation, pain, loss of chewing function, nutrition-related problems, physical weakening and systemic infection risks. The same documents state that photographs, videos, X-rays and payment records of approximately 11,000 euros exist in relation to dental/implantological treatment. [Source: turn10file0]

II. Key File Numbers, Institutions and Proceedings

The reviewed materials identify the following official references and institutional channels:

1. Sozialgericht Berlin

The social-court proceeding is identified as:

Az.: S 193 KR 463/26 ER

This appears repeatedly in the applicant's filings and court documents concerning urgent social-court relief against AOK Nordost in connection with dental treatment and health-insurance responsibility. The filing of 07.05.2026 is titled as an additional statement regarding AOK Nordost's alleged proper handling of Heil- und Kostenpläne and requests the hearing of treating dentists as witnesses. [Source: turn10file9]

2. Kriminalpolizei / criminal complaint

The dental-related criminal-police reference appears as:

Vorgangsnummer der Kriminalpolizei: 251219-1346-467062

This number is used in the criminal-law and Kammergericht filings concerning alleged failure of prosecution, evidence obstruction and acute health/life danger. [Source: turn10file2]

3. Kammergericht / Oberlandesgericht Berlin

The applicant submitted an application to the Kammergericht / Oberlandesgericht Berlin under § 172 StPO, requesting judicial review against alleged prosecutorial inaction and the refusal to obtain an independent medical-forensic dental expert report. [Source: turn10file2]

4. Ärztekammer Berlin

The professional complaint to Ärztekammer Berlin concerns alleged continuing medical-duty violations, failure to assist with independent medical-legal expert assessment, acute health danger, alleged misleading conduct and an allegedly damaging intervention after a police complaint. [Source: turn10file0]

5. AOK Nordost

AOK Nordost appears as the statutory health insurer in the social-court proceedings and in the dental treatment correspondence. The documents identify repeated Heil- und Kostenpläne, alleged delays, disputed approvals, and AOK's position that relevant persons had been informed. [Source: turn10file9]

6. ERGO private dental insurance

The ERGO documents show that a private supplementary insurance issue was also opened in relation to the dental treatment. One document concerns ERGO's request for information and confirmation from a dentist regarding whether the applicant was already in treatment and whether a Heil- und Kostenplan had already existed. [Source: turn8file2]

7. Bundesministerium für Gesundheit / BMG

The BMG response explains that the Ministry cannot review individual insurance decisions, cannot conduct individual patient advice, and cannot examine individual physician conduct; it points instead to the competent sickness funds, Kassenärztliche Vereinigungen and Länder supervisory bodies. [Source: turn7file4]

III. Chronological Legal-Factual Summary

1. Beginning of dental treatment and long-term unresolved condition, 2021-2024

According to the submitted dental complaint documents, Mr. Rustam's dental treatment began in 2021 at Lahnstraße 98, 12055 Berlin, with dentist Gülnara Adigozalova. The treatment was then continued at Taubenstraße 20-22, 10117 Berlin after that dentist changed practice address. The documents state that the original purpose was to preserve the existing teeth through conservative measures, but that despite repeated contacts with dentists, expert assessors and AOK, final and adequate treatment was allegedly delayed or denied, resulting in progressive destruction of the dentition. [Source: turn10file7]

The documents further state that from at least 2021/2022 onward, Mr. Rustam was in continuous dental treatment in Berlin because of serious dental and jaw problems. They allege that by the end of 2024, after almost three years of treatment without final resolution, the applicant recognized that no concrete

solution was visible and that his dental condition was worsening. [Source: turn10file7]

2. Removal of bridges and alleged destruction of supporting teeth from August 2024

The documents state that from August 2024, approximately 14 bridge or abutment teeth were removed with the involvement or approval of AOK. The applicant's position is that these were not ordinary healthy teeth, but previously prepared abutment teeth that required immediate protection and prosthetic follow-up after bridge removal. The documents allege that they instead remained unprotected for months and then for another year, causing further destruction, decay or extraction of teeth that had allegedly still been preservable. [Source: turn10file7]

This is legally important because the case is framed not as a new request for future implants, but as the alleged consequence of years of unresolved treatment and delayed or obstructed medical decision-making.

3. Loss of chewing function and serious medical consequences

The applicant's documents state that for nearly four years, his chewing function has been massively restricted, and that for approximately one and a half years normal eating has been practically impossible. They report chronic stomach and digestive problems, serious pain, oral inflammation and infections, and physical weakening. The documents also refer to serious underlying conditions, including HIV/AIDS, Kaposi sarcoma, tuberculosis history and other immune-relevant illnesses. [Source: turn10file7]

The visual dental photo annex uploaded as "Oca 14, Belge 4.pdf" shows close-up photographs of a mouth with visibly damaged teeth, exposed remnants and implant components. These images are presented by the applicant as photographic evidence of the current or recent oral condition. [Source: turn8file0]

This turns the case into a health-protection issue. A loss of chewing function is not only a dental inconvenience. Where a person is chronically ill and immunologically vulnerable, persistent oral infection and inability to eat can raise questions of bodily integrity, health protection and urgent medical care.

4. Implantological treatment, payments and alleged adverse event in March 2025

The professional complaint materials state that in December 2024, a person named Dima, described as dentally active and as the applicant's neighbour, encouraged Mr. Rustam to transfer treatment to a practice where Dima worked. Dima allegedly introduced him to the surgeon Yevsey Ananyev, who allegedly promised high-quality certified implants, warranty and timely zirconia prosthetic care. [Source: turn10file0]

The documents state that ten implants were agreed at 1,000 euros per implant, paid in advance. They list the following treatment sessions:

- 03.01.2025: two implants in the upper posterior area;
- 15.01.2025: two implants in the lower posterior area;
- early February 2025: two implants in the lower left posterior area;
- payment of 6,000 euros for six implants allegedly confirmed through WhatsApp. [Source: turn10file0]

The complaint then describes a serious incident on 10.03.2025, where the surgeon allegedly determined radiologically that an implant had entered the maxillary sinus area. The document states that a forceful instrumental procedure followed, with extreme pain and significant injury risk, and that 4,000 euros were paid that day. [Source: turn10file10]

This is one of the most significant medical-legal points because it requires expert review of radiology, implant placement, sinus involvement, consent, documentation, postoperative handling and whether the applicant received adequate emergency follow-up.

5. Further payment and alleged non-completion of promised prosthetic care, May 2025

The documents state that on 10.05.2025, despite a previous promise of a price reduction, another 1,000 euros was demanded and accepted in cash, while the front area remained without a bridge. [Source: turn10file1]

The same set of documents alleges that the promised prosthetic completion did not occur and that the applicant remained functionally unable to eat properly.

6. Alleged practice switch and billing blockade in December 2025

The documents describe an alleged shift between the practice at Perleberger Straße 3, 10559 Berlin and Wilmersdorfer Straße 135, 10627 Berlin. According to the applicant's filing, the surgeon said he no longer worked at Perleberger Straße 3 and was now working at Wilmersdorfer Straße 135. On 09.12.2025, documents were allegedly signed at Wilmersdorfer Straße 135 and photos/videos documented the condition of the teeth; on 18.12.2025, the applicant was again ordered to Perleberger Straße 3. [Source: turn10file17]

The applicant's legal argument is that AOK treats different practices as different billing units, so treatment by the same insured person in two practices could block or suspend billing until responsibility is clarified. The filing argues that this practice switch placed the applicant into a situation where the sickness fund could not release services, medically necessary measures were suspended, and he remained without care. [Source: turn10file17]

7. Police registration and alleged withdrawal pressure, 17-18 December 2025

The professional complaint materials state that on 17.12.2025, Mr. Rustam went to the criminal police and had his complaint officially registered. The same day, Dima allegedly called him and asked him to withdraw the complaint, promising that the surgeon would treat him on 18.12.2025 at 15:00 at Perleberger Straße 3. The applicant states that he left the police expecting proper treatment. [Source: turn10file1]

The next day, according to the document, no proper treatment took place. Instead, the applicant states that only provisional build-ups were placed without adequate cleaning/preparation, and that the last tooth was cut in a way that caused acute pain. The document asserts that an X-ray from the previous day shows that the tooth was not caries-related but damaged by a straight instrumental cut, inconsistent with therapeutic treatment and consistent with intentional damage. [Source: turn10file4]

This is a serious allegation that cannot be resolved without an independent dental-forensic expert review. The relevant evidence would include X-rays before and after 18.12.2025, dental records, treatment notes, consent forms, videos, photographs, witness messages and police registration data.

IV. Social-Court Proceedings Against AOK Nordost

The documents show that Mr. Rustam filed urgent proceedings before Sozialgericht Berlin under:

Az.: S 193 KR 463/26 ER

An urgent application dated 05.03.2026 seeks an interim order under § 86b Abs. 2 SGG, stating that the applicant had tried for years to obtain necessary dental treatment and that he had not received clear

information from treating doctors or AOK regarding the status of treatment or communications. The filing states that several bridge constructions were removed in August 2024, teeth were extracted, and the remaining teeth were left open and unprotected without necessary follow-up treatment. [Source: turn9file3]

The urgent application also states that normal chewing and biting function had become impossible and that the applicant was forced to swallow food without sufficient chewing. It links this to chronic illnesses including HIV/AIDS, hepatitis, tuberculosis and other infectious/chronic diseases, arguing that oral infections may be dangerous in the context of a weakened immune system. [Source: turn9file3]

The social-court file also shows that AOK Nordost responded on 16.03.2026 seeking rejection of the urgent application, arguing among other things that the matter was not sufficiently urgent or that other prerequisites were not met. The AOK filing appears in the social-court bundle. [Source: turn9file6]

On 07.05.2026, Mr. Rustam submitted an additional statement responding to AOK's claim that all treating dentists and the applicant had been properly and timely informed. He argued that this position creates a significant logical and factual contradiction, because repeated Heil- und Kostenpläne had been submitted across multiple dentists and practices from 2021 to 2025, with a total scope significantly exceeding 10,000 euros. [Source: turn10file9]

The same 07.05.2026 filing identifies the relevant treatment locations and doctors:

- Gülnara Adigozalova, Lahnstraße 98, 12055 Berlin, from spring 2021;
- Gülnara Adigozalova, Taubenstraße 20-22, 10117 Berlin, until December 2024;
- Yevsey Ananyev and Dr. Dima, Perleberger Straße 3, 10559 Berlin, from January 2025;
- Yevsey Ananyev, Wilmersdorfer Straße 135, 10627 Berlin, from December 2025;
- Stamatis Michalis, Karl-Marx-Straße 189, 12055 Berlin, from January 2026. [Source: turn10file9]

The applicant requests that the court obtain the complete AOK administrative file, review all Heil- und Kostenpläne since 2021, examine the timing of applications and responses, contact the treating dental practices, request treatment and billing records, and hear the dentists personally in oral proceedings. [Source: turn8file4]

This is a legally strong evidentiary request because it seeks to transform a disputed insurance narrative into a document-based and witness-based inquiry.

V. Criminal-Law Proceedings and Evidence Preservation

The Kammergericht / OLG filing of 10.01.2026 is framed as an application under § 172 StPO because of alleged failure to prosecute, evidence obstruction and acute health/life danger. It refers to the criminal-police number 251219-1346-467062 and states that despite several formal and timely complaints to police and prosecution, including on 20.12.2025 and 05.01.2026, no independent expert report was ordered and no sufficiently careful investigation was conducted. [Source: turn10file2]

The same filing explicitly requests:

- 1. a finding that the prosecution violated its duty to prosecute;**
- 2. an order requiring the prosecution to conduct an investigation;**
- 3. immediate appointment of an independent medical-forensic dental expert;**
- 4. expert assessment of photographs, X-rays and treatment documents;**
- 5. examination of damage extent, causation and possible treatment errors;**

6. any other measure necessary to secure evidence. [Source: turn10file6]

The filing states that continued inaction risks irreversible evidence loss and creates acute health and life danger. [Source: turn10file2]

This is important because the applicant's core claim is not only that treatment was delayed, but that state bodies failed to secure evidence while the physical condition of the mouth continues to change. In medical-dental cases, time can destroy proof: teeth are removed, wounds heal or worsen, infections change, and later experts may no longer reconstruct the original cause.

VI. Professional-Disciplinary Complaint to Ärztekammer Berlin

The complaint to Ärztekammer Berlin is framed as a professional-law complaint concerning continued medical-duty violation, systematic omission of medically necessary measures, refusal to cooperate in independent medical-legal expert assessment, acute health and life danger, targeted misleading conduct and a damaging intervention after a police complaint. [Source: turn10file0]

It invokes German medical-law and professional-law principles, including:

- §§ 630a-630c BGB on medical treatment duties, care duties and information duties;
- §§ 27, 73 SGB V on medical care and coordination/referral duties;
- the Patientenrechtegesetz;
- professional duties under the Berlin Medical Chamber's professional code, including protection of life and health, conscientious practice, prohibition of refusal of assistance, and duty of consultation/referral. [Source: turn10file4]

The German Civil Code contains the statutory patient-treatment framework in §§ 630a and following; § 630f BGB also requires treatment documentation in direct temporal connection with treatment. The German Social Code Book V contains statutory health-treatment provisions including medical treatment under § 27 SGB V and outpatient physician-care structures under § 73 SGB V.

The professional complaint therefore raises two parallel duties: the treating professionals' duty to provide careful treatment and documentation, and the system's duty to ensure access to necessary care and expert clarification.

VII. ERGO Supplementary Insurance Issue

The documents show that ERGO was involved in relation to supplementary dental insurance. An ERGO document dated 06.03.2026 requests confirmation from the dentist as to whether Mr. Rustam was in treatment and whether a Heil- und Kostenplan or cost estimate had already existed before the current treatment; the document also asks whether the treatment had already been performed. A stamped version appears to contain handwritten answers indicating treatment around 08.01.2026, and "Nein" marked for prior cost estimate and for performance of the measure. [Source: turn8file2]

A further ERGO bundle from January 2026 concerns insurance contributions and requests for consent to health-data processing. [Source: turn8file6]

The applicant's filings state that the supplementary insurance was recommended as part of the dental treatment strategy, that monthly contributions were paid, but that he could not effectively use the insurance for the promised treatment. [Source: turn10file17]

This may be relevant to insurance-law and consumer-law review, but it is secondary to the urgent health and evidence-preservation issue.

VIII. Pharmacy Complaint

The applicant submitted a complaint to Apothekerkammer Berlin regarding Apotheke in der Metropole, Joachimsthaler Straße 21, 10719 Berlin. The complaint states that on 18.11.2025 he submitted a prescription and paid the co-payment; two medicines were given immediately, while delivery of Amitriptylin Micro Labs 22.1 mg and Sirdalud 4 mg was promised for 19.11.2025. He states that he received no information about delay until 05.12.2025, when he was told that Amitriptylin had arrived but Sirdalud was not centrally deliverable. [Source: turn7file9]

This issue is legally smaller than the dental/court matters, but it is relevant as part of the applicant's broader documentation that medically necessary support was repeatedly delayed or obstructed.

IX. Medical and Visual Evidence

The uploaded photographic dental annex shows visible oral damage, remaining tooth roots or remnants, severely damaged teeth, and implant components. The images are not a medical diagnosis by themselves, but they are relevant as visual evidence requiring forensic or dental-expert evaluation. [Source: turn8file0]

The appointment and treatment-cost materials from dentist Stamatis Michalis, Karl-Marx-Straße 189, show appointment dates in April and a treatment-cost plan dated 09.01.2026. The cost plan states high projected costs, including a total expected treatment cost of 24,839.78 euros, a projected insurer contribution of 8,754.35 euros, and a projected own contribution of 16,085.43 euros. [Source: turn9file7]

This supports the applicant's argument that the matter is not minor and that by January 2026 the condition had reached a large-scale prosthetic/restorative treatment stage.

X. Domestic German Legal Analysis

1. Medical treatment duties under BGB §§ 630a-630f

The applicant's allegations engage the medical-treatment duties under the German Civil Code. The relevant legal questions are:

- Was treatment performed according to accepted professional standards?
- Were the applicant's risks, alternatives and consequences adequately explained?
- Was proper consent obtained?
- Were treatment records created and preserved?
- Was the applicant informed about complications and urgent follow-up needs?
- Were medically necessary referrals or expert reviews refused without justification?

The documents themselves invoke §§ 630a-630c BGB as the basis for physician duties and information obligations. [Source: turn10file4] German law also requires treatment documentation under § 630f BGB.

2. Statutory health-care obligations under SGB V

Under the applicant's argument, the AOK-related issue is not merely about future implant approval. It concerns the alleged consequences of a multi-year failure to provide or approve necessary treatment, resulting in loss of chewing function and worsening health. The Sozialgericht filing expressly asks the court to examine all Heil- und Kostenpläne, the timing of AOK responses, and witness evidence from treating dentists. [Source: turn10file9]

The relevant framework includes § 27 SGB V on medical treatment and § 73 SGB V on outpatient medical care structures.

3. Criminal-law and prosecution duties under StPO

The Kammergericht filing invokes § 172 StPO and argues that the prosecution failed to investigate despite concrete indications of serious health damage and despite the need for a medical-forensic dental expert. It also invokes the prosecution principles in §§ 152(2), 160 StPO. [Source: turn10file2]

The German Criminal Procedure Code is the statutory framework for criminal investigations and judicial review mechanisms.

4. Social-court urgency under § 86b SGG

The urgent social-court application is framed under § 86b Abs. 2 SGG and argues that the situation is medically urgent because of progressive deterioration, inability to chew and serious underlying illnesses. [Source: turn9file3]

From a legal-analysis perspective, the stronger argument is that the court should not treat the matter as an ordinary cost-reimbursement dispute, but as an urgent health-protection case where delay can cause irreversible damage.

5. Evidence preservation

The applicant repeatedly requests independent medical-forensic assessment and review of photos, X-rays, treatment records and videos. This is central. The legal problem is that without immediate expert assessment, the physical evidence may continue changing. This supports urgent court and prosecutorial action.

XI. International Human Rights Analysis

The documents raise potential issues under several international and European human-rights instruments, depending on independent factual verification.

1. Right to life - ECHR Article 2; ICCPR Article 6

Where a person has serious chronic illnesses, progressive oral infections, inability to eat normally and alleged systemic failure to provide treatment, the right to life may be engaged if authorities know or should know of a real and serious risk. The European Convention protects the right to life under Article 2.

In this case, the applicant's documents repeatedly describe acute health/life danger, severe infections, malnutrition and immune weakness. [Source: turn10file0]

2. Prohibition of inhuman or degrading treatment - ECHR Article 3; ICCPR Article 7; CAT

Long-term denial or obstruction of essential medical care, combined with severe pain, inability to chew, repeated failed remedies and alleged state inaction, may raise issues under the prohibition of inhuman or degrading treatment if the threshold of severity is met. The Convention system treats Article 3 as one of the strongest non-derogable protections.

3. Right to physical and mental integrity - EU Charter Article 3; ECHR Articles 2 and 3

The EU Charter recognizes the right to physical and mental integrity, including in medical contexts the importance of consent and respect for the person.

The applicant's documents raise questions about consent, medical documentation, referral refusal, and alleged damaging treatment after complaint registration. [Source: turn10file4]

4. Right to private life and bodily integrity - ECHR Article 8

Severe medical decisions, bodily integrity, health data, dental records, and interference with normal eating and social life may fall within the protection of private life under Article 8 ECHR. The ERGO and AOK documents also include health-data handling and insurance-processing issues. [Source: turn8file6]

5. Effective remedy - ECHR Article 13; ICCPR Article 2(3)

The applicant has contacted or filed materials with AOK, Sozialgericht Berlin, Kammergericht, police, prosecution, Ärztekammer, BMG, Apothekerkammer, ERGO and lawyers. Yet the documents repeatedly state that no independent expert review has yet resolved the causation, damage and responsibility. [Source: turn10file2]

If domestic bodies formally receive complaints but fail to secure evidence or provide meaningful review, the right to an effective remedy becomes central.

6. Access to justice - ECHR Article 6

The social-court and Kammergericht filings demonstrate ongoing attempts to obtain judicial review. If the applicant's health situation is urgent and courts treat the matter as merely formal or procedural while evidence deteriorates, Article 6 access-to-court concerns may arise.

7. Non-discrimination - ECHR Article 14; ICCPR Article 26; CRPD

The applicant states he has severe chronic illnesses and disability-related vulnerabilities. The social-court filings include references to severe chronic illnesses and a disability document. If the failure to provide effective care is linked to disability, health status, migration background or social vulnerability, non-discrimination principles may become relevant.

8. CRPD - access to justice, health and protection from neglect

If the applicant is a person with disability or severe chronic impairments, the Convention on the Rights of Persons with Disabilities may be relevant, especially concerning:

- equal access to justice;
- access to health care without discrimination;
- protection from neglect or abuse;
- respect for physical and mental integrity.

XII. Main Legal Findings

Based on the submitted documents, the following findings can be stated:

1. The dental condition is documented as long-term, serious and progressive.

The files repeatedly describe more than four years of dental destruction, oral inflammation, pain, loss of chewing function, nutrition problems, weakening and infection risk. [Source: turn10file0]

2. The matter is not limited to future implant approval.

The core issue is whether years of delayed, blocked or unresolved treatment caused present damage, including loss of chewing function and serious health risk. The 20.05.2026 social-court response explicitly rejects AOK's attempt to treat the matter as only a new future implant request. [Source: turn9file1]

3. There is a clear need for independent expert review.

The files repeatedly request independent medical-forensic dental assessment of photographs, X-rays, treatment records, causation and possible treatment errors. [Source: turn10file6]

4. The administrative record must be reconstructed.

The 07.05.2026 filing asks the Sozialgericht to obtain the full AOK file, all Heil- und Kostenpläne since 2021, all treatment and billing records, and witness testimony from dentists. This is essential to determine whether AOK's position is correct or contradicted by the treatment history. [Source: turn8file4]

5. The criminal-law track raises evidence-preservation concerns.

The Kammergericht filing argues that failure to order expert review creates risk of irreversible evidence loss and acute health/life danger. [Source: turn10file2]

6. The professional-law track raises physician-duty issues.

The Ärztekammer complaint identifies possible violations of medical care duties, referral duties, documentation duties, and professional responsibilities. [Source: turn10file4]

7. The visual evidence supports urgency but requires expert interpretation.

The mouth photographs show visible dental destruction and oral damage, but a qualified dental-forensic expert must assess causation, chronology, treatment necessity and professional fault. [Source: turn8file0]

8. The social-court cost figures show that the issue is medically and financially substantial.

The Stamatis Michalis cost plan shows projected total treatment costs of 24,839.78 euros, with a projected own contribution of 16,085.43 euros, supporting the argument that the condition has escalated into a major dental reconstruction issue. [Source: turn9file7]

XIII. Recommended Requests to International and Domestic Bodies

The applicant may request that international and domestic bodies urgently require or recommend:

1. Immediate independent dental-forensic expert examination, including photos, X-rays, videos, treatment notes and implant records.

2. Preservation of all evidence, including AOK files, dental practice records, X-rays, billing records, Heil- und Kostenpläne, ERGO documents, WhatsApp

messages, videos and police/prosecutorial records.

3. Full reconstruction of the treatment chronology from 2021 to 2026, including all dentists, practice addresses, treatment plans and AOK decisions.

4. Judicial review of AOK's role in the alleged delay, non-approval, miscommunication or incomplete processing of treatment plans.

5. Review of whether the current condition results from delayed treatment, rather than a new isolated dental request.

6. Immediate medical protection, including restoration of eating function or at least interim medically adequate nutrition/dental measures.

7. Investigation into alleged failure of prosecution under Vorgangsnummer 251219-1346-467062.

8. Professional-law review by Ärztekammer Berlin of all participating medical and dental professionals.

9. Assessment of disability and chronic-illness vulnerability, including whether the applicant required enhanced procedural protection.

10. Review of whether domestic remedies have been effective in practice, given the repeated filings and the continuing unresolved condition.

XIV. Final Legal Assessment

The submitted documents disclose a serious, cumulative human-rights and health-protection case. The materials are not limited to a simple dental-cost dispute. They show a documented chain involving:

long-term dental deterioration -> repeated treatment plans and insurer involvement -> bridge/abutment removal -> loss of chewing function -> private implant payments -> alleged surgical complication -> alleged lack of completion -> police complaint and expert-review requests -> social-court urgent proceedings -> professional complaints -> continuing unresolved health danger.

If the facts are confirmed by independent expert assessment and official file review, the matter may involve violations of German medical law, statutory health-insurance obligations, criminal-procedure duties, evidence-preservation duties and international human-rights standards, including the rights to life, bodily integrity, health-related protection, effective remedy and non-discrimination.

The most urgent legal need is not another ordinary administrative exchange. The most urgent need is:

an immediate independent medical-forensic dental expert report, full access to all AOK and treatment records, preservation of all evidence, and emergency measures to restore or protect the applicant's ability to eat and prevent further infection or irreversible damage.

Until such independent review occurs, the applicant's documents present a credible basis for urgent legal attention by domestic courts, professional bodies, human-rights organizations and international mechanisms.