

01 HOME PAGE

Dexter Endodontics - Root Canal Specialists

Welcome, and thank you for taking the time to visit our website. In these pages I hope you will get a feel for our practice, and begin to have your questions about root canal treatment answered. I want you to anticipate a stress-free experience in our office. My team and I look forward to meeting you personally.

- Matthew G. Healy DDS MS

Getting Your First Root Canal?

Read our guide on what to expect when receiving root canal therapy, and learn how to prepare for it.

Local Care

Bringing Advanced Specialty Care to Dexter and the Local Communities.

02 ABOUT PAGE

THE MISSION OF DEXTER ENDODONTICS IS QUITE SIMPLE:

After meeting Dr. Healy and his team,

- Patients will not be fearful of getting a root canal.
- Patients will feel comfortable about having root canal treatment.
- Patients will be glad they had their root canal performed by Dr. Healy.

MEET DR. HEALY & THE TEAM:

RENE A. EISEMAN
Office Manager

DR. HEALY

ASHLEE REESE
Assistant

02A RENE'S BIO PAGE

RENE A. EISEMAN, Front Office Manager

02B DR. HEALY'S BIO PAGE

MATTHEW G. HEALY DDS, MS

Hello! I am a native and life-long Michigianian, growing up in southeast Michigan. Actually, before dentistry was ever on the radar for me, I was an automotive engineer...graduating from University of Michigan's College of Engineering. I toiled in the automotive plants and loved it—I loved getting my hands dirty, I loved the teamwork and the problem solving to keep the line running, and I even loved the 80-hour weeks and getting up at 5am everyday. But the great recession in the mid-2000s put a damper on that, and in three years time I survived five rounds of layoffs. I knew one day my number would be up.

I decided to follow a bit in my father's footsteps; he was also a dentist. Dental school was one of the toughest things I have ever done, but I truly loved it and knew I found what I was meant to do. In 2009, I finally made it through and earned my Doctor of Dental Surgery (DDS) degree from the University of Detroit, Mercy.

After a one year tour as a general dentist for the Detroit VA Hospital, I decided to limit his scope to endodontics. I came back to the University of Michigan and honed my skills, earning a Masters of Science and my endodontic certificate in 2013.

For several years I did root canals with a group practice on the east side, and loved it. But things weren't quite perfect yet, and so I decided to hang my own shingle...and chose the community of Dexter as the place to call home for my practice. It truly has been the right decision, and I am so proud of how my career has evolved. I am so happy to be a part of the Dexter community, and I am grateful for how the community has welcomed me with open arms.

02C ASHLEE'S BIO PAGE

ASHLEE REESE, RDA, Back Office Coordinator and Your Chairside Assistant

I am a graduate of Washtenaw Community College Dental Assisting program and I am a Certified and Registered Dental Assistant. I have been with Dexter Endodontics since its inception in January 2017.

I love meeting new patients, and I take pride in the fact that I make sure every person who walks through our front door feels comfortable from start to finish....even if they are coming in with pain.

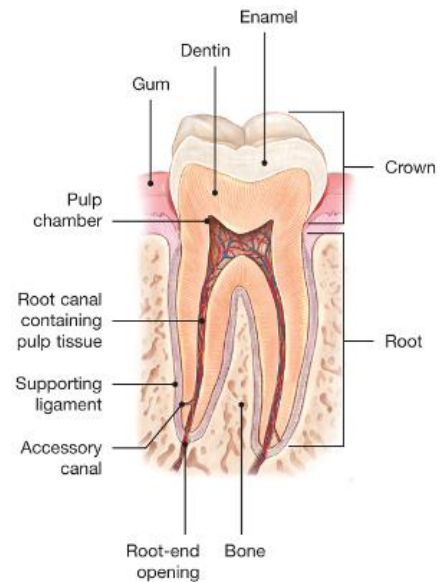
Outside of the office, my husband Jonathon and I have one little boy named Hunter who keeps us very busy with his activities. Whenever I do find the chance to do something that aren't my son's activities, I enjoy reading, gardening, and spending time with my large extended family.

03 ENDODONTIC CARE PAGE

ENDODONTICS

Endodontics is the branch of dentistry that focuses on the nerve tissue *inside* the roots of teeth. The word Endo•donto•ics—like most things in medicine—stems from greek etymology. 'Endo' is latin for *inside* and 'donto' is latin for *tooth*. (And 'ic' is latin for *the study of*.)

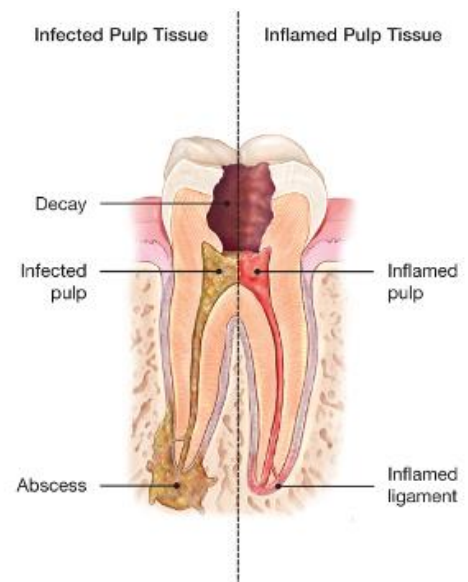
The tooth is very complex organ of the body. Besides nerve tissue, there are also blood vessels and lymph vessels (for drainage of infection). The nerves and blood vessels are called the dental pulp, and they extend from the pulp chamber in the crown, down the canals to the tip of each root. Enamel is what covers the visible part of the tooth, which is very hard, non-porous, and resistant to cavities. Dentin is what makes up the bulk of the tooth structure, including the roots. Dentin is still hard like bone, but is much more porous, and much more susceptible to cavities.



■ ROOT CANAL TREATMENT

Root canal treatment is performed for essentially two reasons. Either the nerve tissue (also known as the dental pulp) of the tooth is dying, or the nerve tissue is dead. This can be caused by many factors, such as a deep cavity, a crack or fracture in the tooth, or traumatic injury to the tooth (from a slip-and-fall or a skateboard accident).

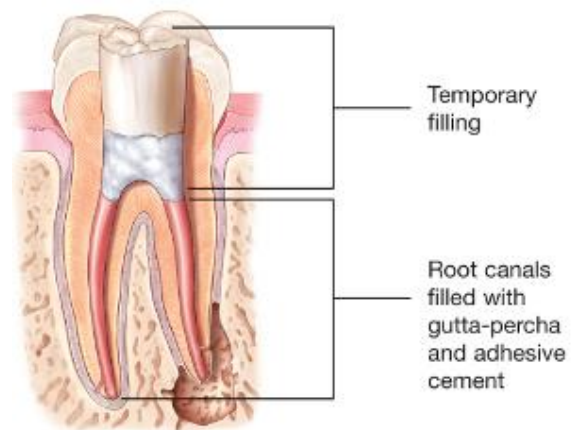
The process can be extremely painful, or have no symptoms at all with the patient being completely unaware that there is a problem—everyone and every tooth is different.

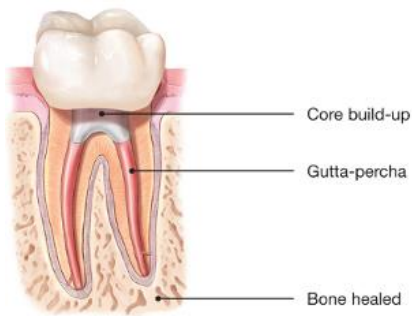


In either case, the diseased or dying nerve tissue is removed from the canal space of each root. First, the tooth is numbed with dental anesthetic. Dr. Healy will make sure that the tooth is completely numb BEFORE any treatment begins. Once the tooth is numb, a conventional dental drill is used to make an access opening into the dental pulp chamber. The nerve tissue is painlessly removed, and the canals in each root are completely disinfected to kill bacteria.

Sometimes root canals can be completed in a single visit. However, other times two visits are required, with Dr. Healy placing an antimicrobial medication in the canals to further cure infection. Rarely, three or more visits could be needed to heal the tooth. Dr. Healy will discuss with you which type of treatment he anticipates your tooth will need.

When ready, the canal space is sealed tight using a pink filling material called gutta percha, a biocompatible synthetic rubber. This prevents re-infection by bacteria. In most cases Dr. Healy will place a temporary filling in the tooth to protect the root canal. You will then return to your dentist for a permanent filling that bonds to and strengthens the tooth (called a core build-up). In most cases Dr. Healy recommends a crown in addition to the core filling, especially in back teeth, to further strengthen the tooth and prevent catastrophic fracture of the roots down the road.





When properly performed, restored, and maintained by the patient, root canal treatment has an extremely high degree of success. In most cases Dr. Healy will invite you back after several months for a checkup on the tooth, to ensure that the bone surrounding the roots is healing as expected.

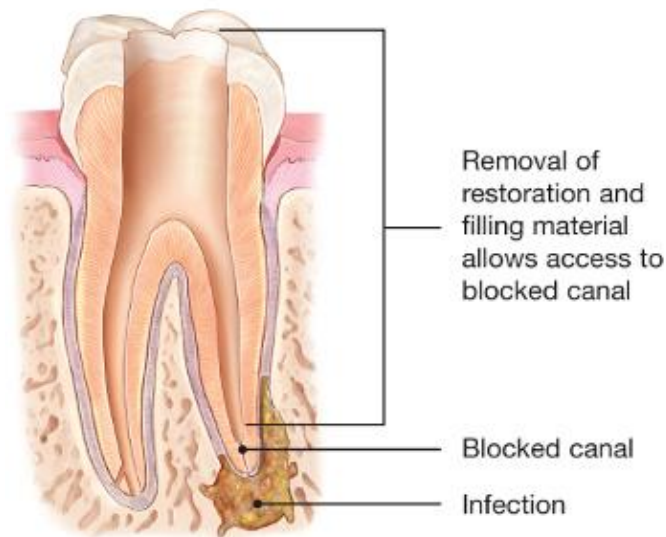
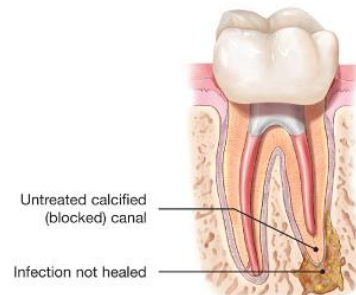
<http://www.aae.org/practice-management/practice-promotion/patient-and-professional-videos.aspx#RCT>

■ RE-TREATMENT

The success of root canal treatment, when properly done, is usually exceptionally high. However, nothing in science and medicine are certain. Rarely, root canal treatment does not result in healing, and the reasons can vary:

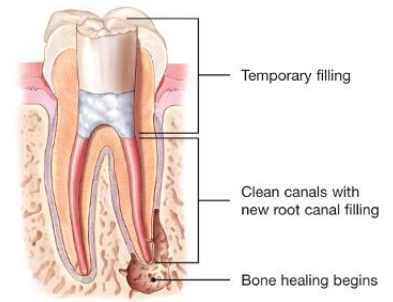
- resistant bacteria that are able to survive the original root canal procedure
- reinfection via a cavity/tooth decay after the fact
- extra nerve canals that were not found or treated during the original root canal procedure
- cracks or fractures of the tooth

If the root canal is contaminated with bacteria, there is likely a dental abscess or infection at the tip of the root. This can be extremely painful, or have no symptoms at all with the patient being completely unaware that there is a problem—everyone and every tooth is different.



Whatever the case, in order to heal the abscess at the tip of the root, the root canal needs to be re-done, and the canal space of the tooth re-disinfected. Dr. Healy will completely numb the tooth. He will then make a hole in the tooth or the crown to gain access to the old root canal filling. After the old root filling material is removed, the nerve

canals disinfected. Dr. Healy will usually place an antimicrobial medication in the tooth, which will continue to disinfect and kill bacteria over several days. At a second visit, the medication is rinsed from the canals, and new gutta percha filling material is packed into each canal to seal the roots.



In most cases Dr. Healy will place a temporary filling in the tooth to protect the root canal. You will then return to your dentist for a permanent filling that bonds to and strengthens the tooth (called a core build-up).

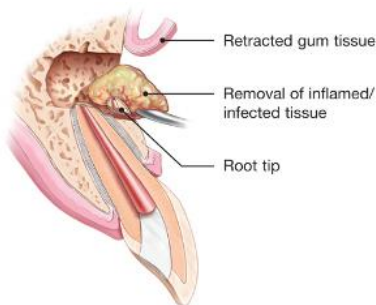
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■ ENDODONTIC SURGERY (APICOECTOMY)

In certain cases, a surgical procedure may be required to have the tooth heal from infection. This may be because:

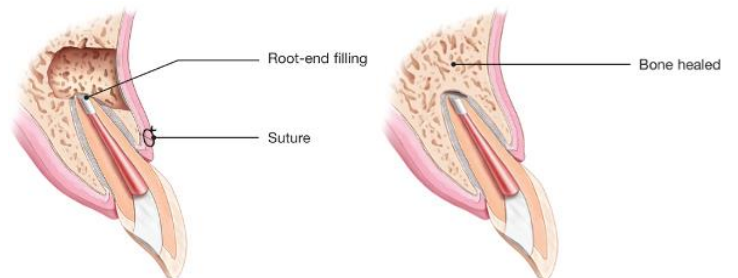
- The nerve canals are too calcified for conventional root canal treatment
- An instrument or file has been broken off in the tooth, and cannot be removed
- The infection is persistent, and does not respond to conventional root canal treatment

Endodontic surgery is usually painless, and in most cases patients return to work the next day, or even the same day.



Dr. Healy will completely numb the teeth and gum tissue. A small incision is made on the gum tissue, and the jaw bone and roots of the tooth are exposed. The infection is cleaned out and the tips of the roots are also treated and cleaned.

The tips of the roots are sealed with a filling material and stitches are placed to help the wound heal.



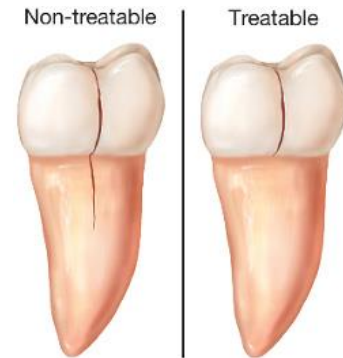
■ CRACKED TEETH

Cracked teeth can cause significant pain, but can be very difficult to diagnose and treat. Symptoms will vary, but common symptoms include:

- Pain that comes and goes without reason
- Pain to air or extreme temperatures
- Pain to biting or chewing, or pain caused by the tongue pushing on the tooth.

If there is a crack or fracture in the tooth, then there is direct exposure to the nerve tissue of the tooth through that crack. The severity of the crack has everything to do with what treatment is needed to receive the pain. The ultimate prognosis of the tooth, however, hinges on the extent of the fracture.

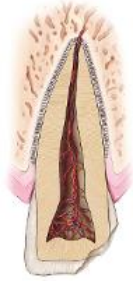
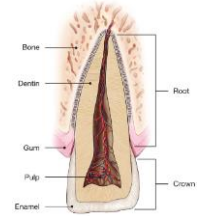
- Cracks that are confined to the crown of the tooth, or limited to enamel can be treated simply by sealing the crack. While root canal treatment is rarely needed, Dr. Healy will almost always recommend a crown be placed to prevent the crack from growing or propagating.
- If a crack extends beyond the enamel, and leads to the nerve (pulp) tissue, then root canal treatment will be needed to relieve the pain. Again, a permanent crown should be placed as soon as possible.
- If the crack extends down onto the root surface, below the gum-line, then treatment can become very complicated. In most cases, extraction of the tooth is recommended.



Dr. Healy is an expert in tooth cracks and fractures. If a cracked tooth is suspected, Dr. Healy will determine the extent of the crack, and review the prognosis of the tooth and all treatment options.

■ DENTAL TRAUMA

Dental Trauma occurs when teeth or jaws are physically injured, but a slip-and-fall, a bicycle accident, or basket ball or elbow to the face. Trauma to teeth is especially common with children and adolescents. Timing of treatment is usually urgent, but that depends on the type of traumatic injury. Treatment following a traumatic injury will be closely monitored by Dr. Healy. Examples of dental trauma include:



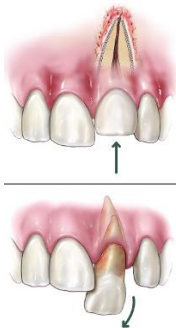
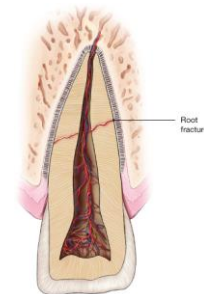
■ CHIPPED TEETH

Treatment for a chipped tooth varies, and has everything to do with how severe or extensive the chip/fracture is. As long as the nerve is not exposed, root canal treatment is usually not needed, and a simple filling will fix the problem.

If the chip extends to the dental pulp and exposes the nerve, then further treatment is needed. Dr. Healy may elect to place a medication over the exposed nerve and seal the tooth, or he may recommend conventional root canal treatment.

■ Fractured Teeth

Sometimes trauma to the tooth will result in the root or the jaw bone being fractured, much like a broken bone in your arm or leg. Often Dr. Healy will place a splint on the the tooth which acts like a cast to encourage healing. If the nerve tissue is damaged by the crack, root canal treatment might be needed.



■ Dislocated Teeth

A blow to the tooth can be strong enough that it actually displaces the tooth, extruding it from the socket, pushing it backward into the jaw bone, or even crushing it inward and upward. Tooth dislocations are very complicated, but at the same time very treatable. Dr. Healy will reposition and splint the teeth. The need for root canal treatment is more likely for dislocated teeth.

- Avulsed (Knocked Out) Teeth

Sometimes a tooth is knocked clear out of the socket. This is the most urgent of all dental traumatic injuries. The tooth should be located immediately. If it cannot be replanted into the tooth socket immediately, then it should be stored in milk, saliva, or a special solution called Save-A-Tooth. Never store the tooth in water. If your tooth is knocked out, proceed immediately to your dentist or Dr. Healy.



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04 WHAT TO EXPECT

Heard Nothing But Horror Stories From People Who've Had A Root Canal?

Don't be afraid. While its true that some people do have a lot of pain after a root canal, this is the exception and not the rule. Most patients have very little discomfort following treatment...and *no* pain during treatment.

When you arrive, you will be greeted by Rene (and maybe one of her dogs) who will get you all checked in. She will also go over fees and help you navigate your dental benefits and co-pay, if you have insurance.

Once you are ready, Ashlee will bring you back, and Dr. Healy will provide a thorough consultation. He will first make sure that a root canal needs to be done, and if so, will go over every aspect of treatment with you, in plain English. We don't start treatment until all of your questions have been answered, and you have complete understanding of what the treatment process will be.

Again, the expectation is that you will not feel pain during treatment. And after treatment, while we expect you to be a bit sore, most patients will not have anything more than soreness after the procedure. Of course, this is influenced by the amount of pain you have before the procedure. If your tooth has been quite painful for a few days, expect a few more days for the pain to completely subside.

Some procedures are done in a single visit; others are performed over multiple visits. Dr. Healy will advise you which is the case that he anticipates for your situation. It has everything to do with what's best for the long-term prognosis of your tooth, and never affects the fee.

Once the root canal is completed, you will need to return to your dentist for a final restoration of the tooth. This might be a filling, a crown, or repair of your existing crown if you already have one. This step is crucial, since the root canal must be sealed and protected if it is to last a lifetime.

05 CONTACT PAGE

Dexter Endodontics - Root Canal Specialists

The easiest way to schedule an appointment is to call our office during normal business hours. However, we are happy to communicate with you in what ever form is most convenient for you.

Completing the form below will generate an email to our office. Rest assured all messages are sent over a secured network. We value and will protect your privacy.

- Name
- Email
- Number
- Best Time To Return Your Call
- Message

- Replace map on right with pic of Rene
- Driving Directions below, with clickable google map.

06 REFERRING OFFICES

07 TOUR OUR OFFICE PAGE

TOUR OUR OFFICE

Welcome to Dexter Endodontics. We have worked really hard to create an office that is comforting, warm, and inviting. We invite you to look around!

THE HIGHEST STANDARD OF CARE, AND THE LATEST TECHNOLOGY

■ 3D CONE-BEAM TOMOGRAPHY (CBCT)

At our disposal is our 3D cone-beam unit, which has become the standard of care with endodontics. The problem with x-rays is that you get a 2D image of a three dimensional space...many x-ray exposures are needed to get a diagnostic understanding of what's going on, and if you don't get just the right angle you might be missing a lot. With the CBCT, Dr. Healy sees in real-time, an accurate three-dimensional picture of your tooth and all of the surrounding tissues. It has become an absolute game-changer with respect to the quality of care that can be delivered in endodontics.

■ LOW-RADIATION DIGITAL IMAGES

Because we use digital imaging, the amount of radiation you will be exposed to during treatment is lower than ever...less than you would be exposed to while spending a day at the beach, or while on a cross-country flight in an airplane.

■ DIGITAL APEX LOCATOR

The NRG apex locator allows Dr. Healy to precisely measure the length of the roots of your teeth, *without the need for additional x-rays.*

■ MICROSCOPIC ACCURACY

All procedures are done under an endodontic microscope, which is the standard of care. The microscope allows Dr. Healy to work under extremely high magnification, which means he

can see all of the minute details of the root canal spaces. It also helps him to discover if there are cracks or fractures in the tooth, and allows him to be extremely conservative in the amount of drilling that needs to happen to access the nerve (dental pulp) and roots.

medemaendo.com

We understand that for some patients getting a root canal is no big deal, and for others, it can be a terrifying prospect filled with questions and anxiety. Whichever applies to you, we want you to know that we understand you well, and want you to feel as at ease as possible.

[3 years of training beyond dentists](#)