

ROOT WORDS

Promoting just a little bit of knowledge...and a whole lot of Healthy Smiles

Mission Statement

To provide excellent endodontic care in a professional, friendly environment by a highly trained and motivated team!

We work to fulfill our mission by making patient care our #1 goal.

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When You Have a Separated Instrument

Nothing makes a bad day worse than separating the tip of an endodontic instrument.

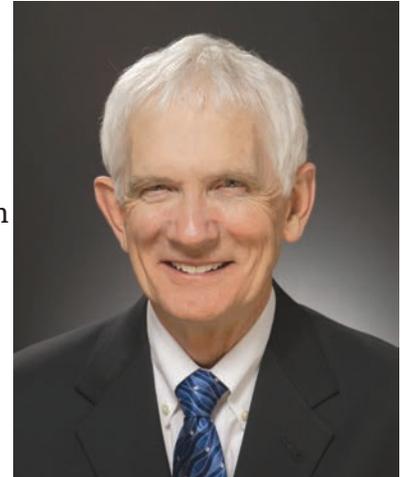
“Premature obturation” of the root canal happens to everyone at one time or another during the course of endodontic treatment. The fact that an instrument breaks is not the problem...the problem is that the broken instrument keeps you from cleaning, shaping and obturating the canal. These suggestions may help handle the situation.

With magnification and perseverance, some of the instruments can be removed. As a general rule, if the canal is straight the odds are good of retrieval. If the separated piece is around a curve, retrieval can be very difficult. The torque on the instrument in a curve is usually too much to overcome and allow the instrument to be unwound out of the canal.

Stainless steel files are easier to remove. The material can be vibrated with ultrasonics, and with a little good fortune they will back out of the canal. Nickel-Titanium instruments are another story. They generally will not vibrate out because the ultrasonic action will disintegrate the file instead of vibrating it. This is especially true in the smaller instruments sizes. To remove these, it is usually necessary to be able to get a mechanical hold on the instrument to unwind it.

The good news about a separation is that they are not always a problem. I believe the status of the pulp tissue will

give you an indication of the success potential. If the tooth you are treating is vital, inflamed with no lesion apically, odds are



Dr. Leslie B. Hardy, Jr., D.D.S.

good it will not be a problem. If the tooth is purulent, necrotic and has an apical lesion, odds are there will be a problem. On the vital cases, I recommend a more conservative approach in trying to retrieve the instrument or doing surgery. I believe it is usually better to observe and treat if it becomes symptomatic. The purulent cases are in need of aggressive instrument retrieval efforts or surgery.

As always, we are always glad to assist you and your patients with endodontic problems or questions. Call or email us any time. Your patients' endodontic health is our number one priority!

Dr. Leslie B. Hardy, Jr., earned his D.D.S. degree from Virginia Commonwealth University and his master's degree in endodontics from George Washington University in conjunction with Walter Reed Army Medical Center. He has been associated with EA since 1981, and has been a partner since 1984.

Quality Patient Care in a Comfortable Environment

Oklahoma City Memorial Marathon

Endodontic Associates entered three teams into the five-person relay category for the OKC Memorial Marathon on April 24. The relay teams completed two 3.1-mile-legs, two 6.2-mile-legs and one 7.5-mile-leg. Great job everyone!



Congratulations...April Lottery Winners

Our April drawing was a one-year family membership to the Oklahoma City Zoo!



Brandi Baker
Dr. Jennifer Jenkins' Office, South OKC



Jennifer DeJonge
Dr. Laura Ousley's Office, North OKC



Ashley Vargas
Dr. Courtney Housley's Office, Yukon