

Additional Polishing and Shaping are Completed three day a letter.

Q5.: Briefly explain Composite and Porcelain veneer?

Composite veneer:-

Composite veneers are engineered resin affixed to the outer-surface. Both are made to match your teeth and improve your overall smile.

Porcelain veneer:-

Porcelain veneers are thin shells of the tooth porcelain adhered to the outer-surface of the tooth.

Q4.: Suppose you have a crown - - - - - advantages and disadvantages and indication.

Its ceramic crown.

Advantages

Reasonable to use with a post and core.

Better appearance than a metal ceramic crown.

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Q1 Differentiate

Three quarter crown

Metal ceramic crown

Seven eighth crown.

Three quarter crowns

The three-quarter crown on a posterior teeth probably one of the most demanding of all tooth preparations. As with such preparation on other teeth, on a posterior molar it involves the proximal and lingual surface and leaves the facial surface intact. They are always made of cast metal.

Seven Eighth Crowns:-

It includes in addition to the surfaces covered by the three-quarter crown the distal half of the buccal surface. Therefore the mesial aspect of this preparation resembles that for a three

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resembles crown. The distal aspect resembles that for a complete crown.

Metal ceramic crown:-

Dental Porcelain can be bonded to a variety of metal alloys such as Gold, Silver, nickel.

Q3:- In which conditions inlays and onlay are indicated and contraindicated?

Inlay indication:-

- Extensively restored or weakened teeth.
- Repeated fracture or failure of previous direct restoration.
- Restorations within body of tooth which do not require cuspal coverage.
- Difficulty achieving good contour, contact point or occlusion using direct restorations.

Onlay Indication:-

A common indication for an onlay would be a root-filled posterior tooth where cuspal protection is required. RCT in posterior teeth is usually the result of caries and restorative procedures and as such:

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these teeth are extensively broken down and have weakened cusps.

Inlay and onlay Contraindication:-

Inlay and onlay are contraindicated in Patient with Parafunctional habits and heavy occlusal forces.

A Parafunctional habit refers to abnormal functioning of oral structures and associated who clench or grind their teeth. occlusal forces are greater on molars when compared to premolars.

3: Define veneer, explain direct and indirect veneer technique?

Veneer:-

A crown in which the restoration is placed over the prepared surface of a natural crown.

Indirect veneer technique:-

Porcelain veneer technique:-

First Appointment (veneer preparation procedure).

Shade selection :- Clean teeth with pumice

and water

- select a tentative shade with your patient participating.
- Tooth Preparation:- A uniform 0.5 mm intraenamel reduction is sufficient. Incisor edge 0.7 mm labial 1 mm.
- Impression. Use a Polysiloxane material for the impression.
- Second Appointment (veneer cementation Procedure).
- Remove temporary:- care must be taken not to damage margin areas of preparation.
- proximal contacts can be adjusted.

Direct Composite veneer technique:-

Anesthetization and tooth isolation.

Shades of composite are tried on

Assessment on a central incisor.

Any existing decay is removed.

Tooth is roughened and a slight finish line is created.

Tooth is then etched and a dentin bonding agent is applied.

Basic shape is formed with a finishing diamond bar. Interproximal areas are shaped with abrasive strips

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