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Programme: BS (DT)

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Module: 6th semester

Date : 21/4/2020

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Q:1 Differentiate: ^①

- ① Three quarter crown
- ② Metal ceramic crown
- ③ Seven eight crown.

⇒ Crown:

Crown is defined as a cap or cover for a damaged tooth. It restore the tooth to its normal shape, size, and function.

- Crown make the tooth stronger
- They are always made of cast material like metal porcelain, ceramic, or composite resin.

① THREE QUARTER CROWN:

The three quarter crown was introduced by Leemichal in 1901. A Three quarter crown is a restoration covering of two or more surfaces of a

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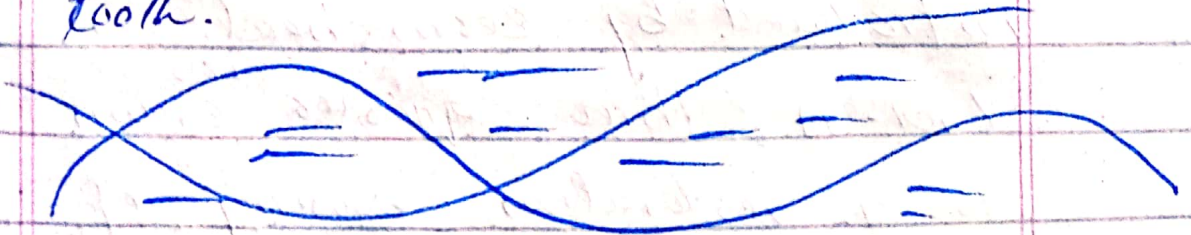
tooth. The surface which is covered are occlusal, incisal, lingual, proximal.

③ Metal Ceramic Crown:

It is a type of crown which is defined as a metal fused to porcelain crown. Such as Gold, silver, nickel etc.

④ Seven Eight crown:

Seven eight crown is defined as it is used in maxillary molars and premolars. It covered seven eight the gingival action of the tooth.



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Q:2 Indication:

- Diastema closure
- Correction of occlusion
- Large restoration
- Teeth at risk for fracture
- Cracked teeth.

⇒ Contraindication:

- Esthetic
- Young patient
- Severe tooth aches
- Micro leakage
- Tooth mobility
- Strong discoloration

Q:3

VENEER:

A veneer is a layer of material placed over a tooth veneers can improve the esthetics of smile and protect the tooth's surface

from damage.

⇒ Direct Methods: Indirect methods.

- In the first appointment we examine which is called preparation procedure. and then we select the shade clean the teeth with water and select a perfect shade for the patient.
- And then we prepare tooth about 0.5mm intraenamel reduction is sufficient, for incisor edge 0.7mm, for labial 1mm
- For impression we use a polysiloxane or polyether material
- For a trial we use a temporary veneers placed when necessary.

* In the second appointment we remove the temporary veneers with care not to damage margins areas of preparation

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Contact need to be ^{carefully} assessed

- ~~Some~~ proximal contacts can be adjusted.

⇒ Indirect technique:-

⇒ Direct technique:-

- Anesthetization and tooth isolation.
- Shade of composite are tried on.
- Assessment on a central incisor.
- Any existing decay is removed.
- Tooth is roughened and slight finish line is created.
- Tooth is then etched and dentin bonding agent is applied.
- Basic shape is formed with a finishing diamond bur.
- Interproximal areas are shaped with abrasive strips.
- Additional polishing and shaping are completed three days later.

⑥

Q:4 Ans Type of Crown

The crown is ceramic crown advantages disadvantages and indications are given below

⇒ Indications:

- High esthetic
- implant abutments
- Considerable proximal carries incisal edge reasonably intact
- Favorable distribution of occlusal load
- The tooth should be relatively intact with sufficient coronal structure to support the restoration.

⇒ Advantages:

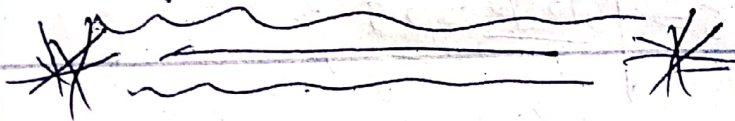
- * Esthetic
- * Stronger than porcelain crown.

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- * High wear resistance
- * Biocompatible
- * Brittle nature of material
- * High hardness and compressive strength.

⇒ Disadvantages:

- * More tooth preparation is required.
- * Low fracture toughness
- * Proper preparation extremely critical.
- * Can be used single restoration only



Q.5 Veneers:

Veneers is a layer of placed over tooth. Veneers can improve the aesthetics of a smile and protect

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The tooth surface from damage.

→ There are two main types of material used to make a veneer composite and dental porcelain.

⇒ Porcelain veneer advantages

- * They provide natural tooth appearance
- * Gum tissue tolerates porcelain well
- * porcelain veneers are stain resistant
- * the color of porcelain veneers can be selected such that it makes dark teeth appear white

⇒ Disadvantages:-

- * The process is not reversible
- * Veneers are more costly than composite resin bonding.
- * not repairable when they chip or crack

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* Teeth with veneers can still decay.

⇒ Composit Veneers:

A composite veneer may be directly or indirectly placed made by dental practitioner in dental lab, and bonded to the tooth typically using a resin cement

⇒ Advantages:

- * One visit procedure
- * less expensive
- * Repair potential
- * Chair side control of the anatomy minimal irreversible less tooth structure.

⇒ Disadvantages:

- * Tend to discolor
- * Wear out quickly
- * Marginal staining

* Shade making difficulty
* often require repair and
replacement.

The End

