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**Paper Prosthodontics**

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Q. 1

Uses of articulator:

* To diagnosis the state of occlusion in both the nature and artificial dentition.
* To plan dental procedures based on the relationships between opposing natural and artificial teeth e.g. evaluation of the possibility of balanced occlusion.
* To aid in fabrication of restoration and Prosthodontics replacement.
* To correct and modify complete restoration.
* To arrange artificial teeth.

Why we use articulator:

* A temporomandibular joint-like device used to hold models of teeth in the same alignment as a patient’s jaw.
* Allowing an orthodontist to simulate the relationships of the bite in restorative and diagnostic procedures.
* An articulator assists in the accurate fabrication of the biting surfaces of removable prosthodontic appliances (dentures),
* Fixed prosthodontic restorations (implants, crowns, bridges, inlays and onlays) and orthodon.
* Used with skill it ensures correct interdigitation of the teeth and an anatomically functional biting plane.
* Articulators are used mainly by dental technicians in fabrication of prostheses and information regarding bite can be communicated from the prescribing dentist via a facebow alone.

Q. 2

Finishing :

Finishing of complete denture is the process of perfecting the final Form of the denture by removing any flash, stone remaining arprocessin Teeth, and any nodules of acrylic resin on the surfaces of the denture base Resulting from processing.

It is the excess of acrylic resin at the denture border, the acrylic Resin that was forced out between the two halves of the flask by the Pressure applied during the processing procedure.

Procedure of finishing:

* Carefully remove remaining stone around the Neck of teeth with a small sharp knife.
* To remove the flash of acrylic resin from the denture border, press the Denture base lightly against a slowly revolving arbor band mounted on The dental lathe. An alternate but less satisfactory to use a large acrylic Bur or stone bur mounted in a straight hand piece to remove the flash. Take care not to change the form of the denture border but only remove The excess resin on the border of denture.
* Remove nodules of acrylic with small stone or acrylic carbide burs.
* The posterior area of the palate has been thinned to its proper thickness.

Polishing:

Is a process of removing scratches. Polishing consists of Making the dentures smooth and glossy without changing the contours.

Principles of polishing:

* The tissue surface of a denture is never polished as a polishing destroys The details necessary for good fit and retention.
* The polished surface extends just over the border, but the borders are not Reduced in height and width during polishing.
* Care must be taken when using pumice (it should be used as wet slurry) As this material is very abrasive and may obliterate the details placed on The denture when they were waxes (festooned).
* Resin teeth have approximately the same hardness as the denture base, so Polishing a denture with resin teeth requires some precautions not Necessary with porcelain teeth.
* When polishing, only the denture base and not the teeth are polished.
* During the finishing and polishing we should minimize the reduction of bulk because this cause warpage.

Q. 3

Following can use immediate dentures:

* Not everyone can get immediate denture
* Most obviously, people who’ve already had all their teeth extracted Can’t get “immediate” dentures, as their teeth are already gone.
* For the immediate denture procedure to work, the patient must have Enough teeth left in their mouth to make:
* A suitable impression of the teeth.
* A suitable registration of their bite.
* If they don’t have enough teeth, or their teeth are in the wrong place To create a proper bite, or if their jaws have already changed shape Due to loss of teeth, they won’t be suitable for the procedure
* So long as you meet those criteria, you’re a suitable candidate for Immediate dentures.
* Since they can be used as temporary fixtures, immediate dentures are Ideally suited for those looking for implant-supported dentures. They Can sit over the gum after the implants have been placed and are Healing over.

Q. 4

Part a.

Types of partial bridge:

Cast Metal Removable Partial Denture. The most common type of removable partial denture consists of high-quality replacement teeth on a rigid cast metal frame.

* Acrylic Removable Partial Denture (Flipper).
* Flexible Partial Denture.
* Fixed Bridge.
* Implant-Supported Fixed Bridge.

Flexible Partial Denture:

Fixed Bridge:

Implant-Supported Fixed Bridge:

A removable partial denture or bridge usually consists of replacement teeth attached to a pink or gumcolored plastic base, which is sometimes connected by metal framework that holds the denture in place in the mouth. Partial dentures are used when one or more natural teeth remain in the upper or lower jaw.

Part B:

Survey:>

Survey is defined as the method of collection of facts o information about the status

OR

Dental survey means collection of facts&analysing & evaluating them&comparing that data to previous data collected with that of different place.

Basic oral health surveys are defined as surveys to collect the basic information about oral disease status&treatment needs that is needed for planning or monitoring oral health care programs.

Surveying :>

The procedure of locating or delineating the contour and position of the abutment teeth and associ structures before designing or removable partial denture.

OR

An analysis and comparison of the prominence of intra oral contours associated with the fabrication of a dental prothesis.

Q. 5

Enlist the role of major connector:

Following are the role of major connector which are given below:

* Be rigid.
* Protect the associated soft tissue.
* Provide means for obtained indirect retention.
* Provide a means of placement of denture base.
* Promote patients comfort.
* Self cleansing.

Rigidity:

Permits broads distribution of forces.

Protect soft tissue:

Maxillary connector: 6mm from marginal gingiva.

Mandibular connector: 3mm from marginal gingiva.

Provide means of indirect retention:

By using of indirect retainers, rotation around the fulcrum lined can be prevented.

Promoted patients comfort:

Edge should be contoured.