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Date: _____

S M T W T F S

Q NO: 1 Enumerate the instruments used during extraction process?

Ans:-

(1) Dental elevators

(A) upper straight forceps

(B) upper premolar forceps

(C) upper molar forceps

(D) Bayonet forcep upper 3rd molar

(E) Bayonet forcep upper retained roots.

⇒ Lower forceps

Premolar forceps

Molar forceps

(2) Dental Elevators

(A) Straight elevators

(B) Couplands Chisel elevator

(C) Apexo elevators

(D) Cyren's elevators

(E) Cross bar handle elevator

(F) Wey-Wick James elevator

(3) Bite block

(4) Suction tips

(5) Tissue retractors

(6) Periosteal elevators

(7) Needle holder

(8) Suture

Q No. 1 - Define local anesthesia.

Also write in detail about the six constituents of local anesthesia?

Ans. - Define -

Transient loss of sensation in a circumscribed area of the body caused by a depression of excitation in nerve ending or an inhibition of the conduction process in peripheral nerves.

=> Constituents.

- ① local anesthetic agent.
- ② vasoconstrictors
- ③ Reducing agents
- ④ Preservatives
- ⑤ Fungicide
- ⑥ Vehicle

2nd

- Reducing agent -> Sodium metabisulfite is used to prevent the oxidation of the vasoconstrictor.

- Preservatives -> Methylparaben It increase the shelf life of the anesthetic solution Acts as a bacteriostatic agent.

and

→ Fungicide → Thymol is used as fungicide.

→ Vehicle → Modified ringers solution or distilled water is used as vehicle.

H₂O produces the volume of the solution and act as diluent.

⇒ 1st

Local anesthetic agent.

Lignocaine hydrochloride 2%.

is most commonly used local anesthetic agent.

⇒ Uses:- Conduction block.

⇒ Vasoconstrictors:-

Adrenaline is used for vasoconstriction in local anesthesia.

⇒ Uses:- Delays absorption of

~~LA~~ LA from the site.

Provides blood less field.

Prolongs the action.

Reduces the systemic toxicity.

Q No: 3 Enumerate all extraction complications.
Write about soft tissue injuries in detail.

Ans: ⇒ Extraction, Complication:-

- ① soft tissue injuries
- ② problem with the tooth being extracted.
- ③ Injuries to the adjacent tooth.
- ④ Injuries to the osseous structure.
- ⑤ Oroantral Communication
- ⑥ Post operative bleeding
- ⑦ Delayed healing and infection
- ⑧ Injuries of the mandible.

⇒ Soft Tissue injuries:-

(i) Causes:-

- Surgeon's lack of adequate attention to the delicate nature of the mucosa.
- Attempts to do surgery with inadequate access.
- Rushing during surgery.
- use of excess and uncontrolled forces.

Soft tissue injuries occurs in the form of:

- (A) Tear of a mucosal flap
- (B) puncture wounds.
- (C) stretch or abrasion.

⇒ A. Tear of a Flap

- The most common soft tissue injury during oral surgery.

• Cause:-

Inadequately sized envelop flap



Forcibly retraction beyond the ability of the tissue to stretch (to gain needed surgical access)



Tearing

⇒ Prevention:-

- ① Creating adequately sized flap to prevent excess tension on the flap.
- ② Using controlled amounts of retraction forces on the flap.
- ③ Creating releasing incisions when indicated.

⇒ Management:-

- Carefully repositioned once the surgery is completed.
- Excise the edges of torn flap to create a smooth flap margin.

Q No 4:- Define an impacted tooth.
What are the cause of tooth impaction?

Ans:- Define:-
An impacted tooth is one that fails to erupt into the dental arch within the expected time.

They are retained for the patient's life time unless surgically removed.

=> Cause and tooth impaction:-

=> Pathological theory.

① Chronic infections affecting an individual may bring the condensation of osseous tissue further preventing the growth and development of the jaw.

② Endocrinal theory.

Increase or decrease in growth hormone secretion may affect the size of the jaws.

① Obstruction for eruption.

② Lack of space

③ Ankylosis of primary

or permanent tooth ④ Nonabsorbing, over retained tooth

⑤ Nonabsorbing alveolar bone ⑥ Ectopic position of tooth

bud ⑦ Dilaceration of roots ⑧ Soft tissue or bony

lesions - fibrosis ⑨ Habits

Q No-5
7

Write in detail about 3 techniques of administration of local anesthesia.

Ans:-
7

Techniques of administration:-

(1) Local Infiltration:-

- Small terminal nerve ending in the area of surgery are flooded with LA solution rendering them insensitive to pain. In this method insertion is made through the same area in which the solution has been deposited.

- This technique is usually successful for treatment of mandibular deciduous canines, incisors and even in molars.

(2) Field Block:-

- Here the LA solution is deposited in proximity to the large terminal nerve branches so that the area to be anesthetized is circumscribed to prevent the central passage of afferent impulse.

- Maxillary injections administered above the apex of the tooth can be termed field blocks.

③ → Nerve blocks -

① Method of securing local analgesia in which suitable local anesthetic solution is deposited within close proximity to main nerve trunk, thus preventing nerve impulse from travelling centrally beyond the point.