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Assignment:

maxillofacial —
Surgery.

Submitted to:

Dr. Natasha Kamran

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Date: ___/___/20

Tue Wed Thu Fri Sat

Q5: Management of root displacement =>

-> The Surgeon should assess: ->

1) Size of root into the Sinus.

2) Assess whether there has been any infection of the tooth or periapical tissues.

3) Assess the preoperative condition of the maxillary Sinus.

-> Small tooth fragment (2-3mm)

-> Tooth and Sinus have no pre existing infection.

-> If this technique fails

no additional surgical procedure should be

performed.

⇒ There are Three steps:-

Step 1 :-

⇒ on the first step
 Shoot a radiograph at
 Show the position and
 size of root.

* Step 2 :-

⇒ The irrigate through
 the small opening in the
 socket apex.

Step 3 :-

⇒ Suction the irrigating
 solution from the sinus
 via the socket.

⇒ If swallowed the root
 So no coughing or respiratory
 distress.

⇒ It travel down the GI
 and then out

⇒ If aspiration the rot so
start the episodes of coughing
and dyspnea.

⇒ the chest and abdominal
radiographs and maintain
air way.

⇒ & tooth removed through
bronchoscopy.

(Q2) Local anesthetic agents

⇒ The lignocaine hydrochloride 2% is most commonly used in local anesthetic agent.

⇒ The name of local anesthetic agent is lignocaine.

⇒ It is used for conduction block.

⇒ Vasopressors ⇒

⇒ The adrenaline is most common used for vasoconstriction in local anesthesia.

⇒ The adrenaline delays the absorption of local anesthesia from the site.

⇒ It provide blood less field and prolong the action.

⇒ It reduces the systemic toxicity

Q1 ⇒

Ans: The wisdom tooth is most commonly involved in impaction because it is the last tooth and grows last

⇒ It typically erupts between the age of 18 to 25.

⇒ It is mostly impacted

⇒ It is also called third molar.

⇒ It comes in the jaw has often stopped growing

⇒ The mouth and jaw may be too small to

accommodate them

→ There is no enough —
space for proper eruption
so it is cause —
impaction