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Department

Bos (Dental)

Subject

Maxillofacial
Surgery.

Q no (1)

Instrument used during extractions -

The following instrument used during extraction -

Examination Instrument :-

- Mouth Mirror
- Dental Explorer
- Cotton plier or tweezers

Local Anesthesia Instruments :-

- Anesthetic Syringe
- Needle
- Cartridge

Extraction Instruments :-

- Saliva ejector
- Lip
- Sterile gauze
- Elevators
- Straight elevators
- Cross bar
- Periosteal elevators

- Surgical Curette.
- Hemostate.
- Extraction Forceps.
- Maxillary extraction Forceps.
- Maxillary Anterior Forceps.
- Mandibular Anterior Forceps.
- Small elevator and large elevator.

Q no (2)

Define local anesthesia. Also write in details about the six constituents of local anesthesia.

Local Anesthesia:-

Local anesthesia is the temporary loss of sensation or pain in one part of the body produced by a topically applied or injected agent without depressing the level of consciousness.

Dental anesthetics fall into two groups esters (procaine, benzocain) and amides (lidocaine, mepivacine, procaine and articaine)

Six Constituents of local anesthesia-

- Local anesthetic agent
- vasoconstrictor
- Reducing agent
- preservative
- Fungicide
- vehicle

1) Local anesthetic agent. lignocaine hydrochloride 2% most commonly used local anesthetic agent, uses of conduction block.

2) vasoconstrictor:- adrenaline is used for vasoconstriction in local anesthesia.

uses. -

delay absorption
provide blood less field
prolong the action
reduce the systemic toxicity

3) Reducing agent.

Sodium metabisulphite is used to prevent the oxidation of the vasoconstrictor.

4) preservative

Methylparaben it increase the shelf life of anesthetic solution act as a bacterial agents.

6) vehicle. Modified ringer solution or distilled water is used as vehicle it provide the volume of the solution and act as diluent.

5) fungicide

Thymol is used as fungicide

Q no (5)

Write in details about 3 techniques of administration of local anaesthesia

Local Infiltration:-

- Small terminal nerve endings 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.

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 injection administered above the apex of the tooth can be termed field blocks.

Nerve block:

Method of securing local analgesia in which suitable local anesthetic solution is deposited within close proximity to the main nerve trunk,

thus preventing nerve impulses from travelling centrally beyond that point.

Q no (3)

Enumerate all extraction complications write about soft tissue injuries in details.

Complication after tooth extraction.

- Bleeding after tooth extraction
- Infection after tooth extraction
- Dry socket
- Sinus perforation after tooth extraction
- Osteonecrosis
- Swelling
- Redness
- discomfort or pain
- Difficulty chewing.
- Delayed healing and infection

Soft tissue injury.

The soft tissue in the mouth are delicate and sensitive, and when they are injured, it can be very painful. Soft tissues, which include the tongue, cheeks, gums and lips can be injured when you accidentally bite down on them, if you fall, are in an accident or if you put food in your mouth that is too hot. Chewing on hard objects also can damage soft tissue.

Symptoms:- The main symptom is persistent, throbbing pain. At first the tooth will be sensitive to heat and pressure while chewing, later you may develop a fever. Swollen lymph nodes under the jaw or in the neck can be tender, and you feel pain in the sinus area. If the abscess ruptures, a sudden rush of foul-smelling and foul-tasting fluid will spill into the mouth.

Soft tissue injuries usually do not bleed a lot, but when they do the injury can seem worse than it really is when the blood mixes with saliva. It may look like you are bleeding a lot, in most cases the bleeding should stop within a few minutes in the following meantime, here's what

what you should do.

- Rinse your mouth thoroughly with a mild saltwater solution (1/2 teaspoon of salt in 8 ounces of water)
- If the bleeding continues, press a damp piece of gauze against the injured area for 10 to 15 minutes. If you don't have gauze, you can use a sanitary napkin tampon or a clean piece of material that will soak up blood and saliva.
- To relieve pain, stop the bleeding and reduce swelling, hold ice to the area for five or 10 minutes.

- if the bleeding doesn't stop within a few minutes the injury may be serious and you will need to a doctor preferably an oral and maxillofacial surgeon, ~~at~~ right away maintain pressure on the area until you can be treated.
- Dentists are trained to diagnose and repair damage to the soft tissues, but doctors and oral surgeons in hospital emergency rooms usually handle serious injuries to these areas.
- The ^{doctor} ~~teeth~~ oral surgeon will wash the area thoroughly and determine whether the teeth are loose or damaged if the teeth are not damaged and the injury is limited to the gum or other soft tissues, you may need stitches to close the wound and control the bleeding, in most cases stitches will not be necessary and the doctor will only need to wash the area thoroughly and remove any dirt or debris.

Qno (4)

Define an impacted tooth. What are the causes of tooth impaction.

Impacted tooth :-

An impacted tooth is a tooth that, for some reason, has been blocked from breaking through the gum. Sometimes a tooth may be only partially impacted, meaning it has started to break through.

Wisdom teeth usually emerge

Sometimes between the ages of 17 and 25. Some people have wisdom teeth that emerge without any problems and line up with other teeth behind the second molars.

In many cases, however, the mouth is too crowded for third molars to develop normally. ~~These~~ These crowded third molars become trapped (impacted)

An impacted wisdom tooth may partially emerge so that some of the crown is visible (partially impacted) or it may never break through the gums (fully impacted) whether partially or fully impacted the tooth may

- Grow at an angle toward the next tooth (second molar)
- Grow at an angle toward the back of the mouth.
- Grow at a right angle to the other teeth, as if the wisdom tooth is lying down within jawbone.
- Grow straight up or down like other teeth but stay trapped within the jawbone.

Causes of Impaction:-

- Obstruction for eruption
- Lack of space
- Ankylosis of primary or permanent teeth.
- Nonabsorbing alveolar bone
- Ectopic position of tooth bud
- Divergence of roots
- Soft tissue or bony lesions - fibrosis
- Habits.