

## Strating The Name Of Allah

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### Q2)Q2: Demonstrate why we perform finishing and polishing procedure?

- ★ Ans)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 Or finishing bur
- 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 it causes warpage.

### Q.1)Q1: For what purpose articulator is used and why?

★

Ans:



#### ★ 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
- To correct and modify complete restoration.
- ★ • To arrange artificial teeth.

#### ★ Why we use articulator:



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- ★ • 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

Q3): Who can use immediate denture?

Answer:



- ★ Following can use immediate dentures:
- ★ 1. Not everyone can get immediate denture
- ★ 2. Most obviously, people who've already had all their teeth extracted Can't get "immediate" dentures, as their teeth are already gone.
- ★ 3. For the immediate denture procedure to work, the patient must
  - ★ have Enough teeth left in their mouth to make:
  - ★ 4. A suitable impression of the teeth.
  - ★ 5. A suitable registration of their bite.
  - ★ 6. 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
- ★ 7. So long as you meet those criteria, you're a suitable candidate for Immediate dentures.
- ★ 8. 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.

Q4: (a) types of partial denture?

Answer: (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.

## Q4(b) what is the difference between survey and surveying?

Answer :

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 associated 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.



## Q5: Enlist the role of major connectors?

Answer:



### DEFINITION

The MAJOR CONNECTOR is that

part of a RPD that joins the component parts

on one side of the arch to those on the

opposite side.

Name of components of RPD:

1. Major connectors

2. Minor connector

3. Direct retainer

4. Indirect retainer

5. Denture base

General Characteristics:

Should be rigid and provide cross-arch stability.

Should be made from a compatible alloy.

Should not impinge on oral tissues.

Should not alter the natural contour on the palatal/lingual surfaces

FUNCTIONS:

The functions of the major connector

are to:

1. Join the various parts of a RPD so that the prosthesis acts as a single unit. A major connector must be rigid so that the component parts do not function independently from one another. This way, forces applied to one part of the RPD are transmitted to other parts and are dissipated by all teeth and tissues contacted, rather than just by those where the force is applied.

2. Maxillary major connectors for tooth-tissue supported RPDs

provide some support, retention and direct-indirect retention.

3. Occasionally, in retrognathic jaw relationships, anterior occlusion and incisal guidance is incorporated into the anterior portion of the maxillary major connector