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Paper:- Orthodontic

S M T W T F S

Date: _____

Q No:-1 Demonstrate the recent trend modification of oral screening?

Ans:- (1) The oral screening can be fabricated by a metal ring projecting b/w the upper and the lower lip. The ring can be use to carry out various muscles exercise.

(2) In patient who has tongue thrust habit. an additional screen is placed to the lingual aspect of teeth.

(3) In case of mouth breather the vestibular screen should be fabricated with a number of hole that are gradually closed in a phased manner.

Q No:-2 What is finger spring? why Z spring is called double cantilever spring?

Ans:- (1) Palatal finger spring are often used in removable orthodontic appliances to tip teeth in a mesiodistal direction. — The purpose of this report is to establish the magnitude of force for finger spring made from different types of wires (i.e. those from different manufacturers and of different diameters and lengths).

② Z Spring The Z Spring is also called double Cantilever Spring.

It is made up of 0.5mm wire. The spring consists of two perpendicular to palatal surface of tooth.

Q No: 3 Summarize the division 1 and division 2 of the Class II malocclusion?

Ans: ① Class II Division 1:-

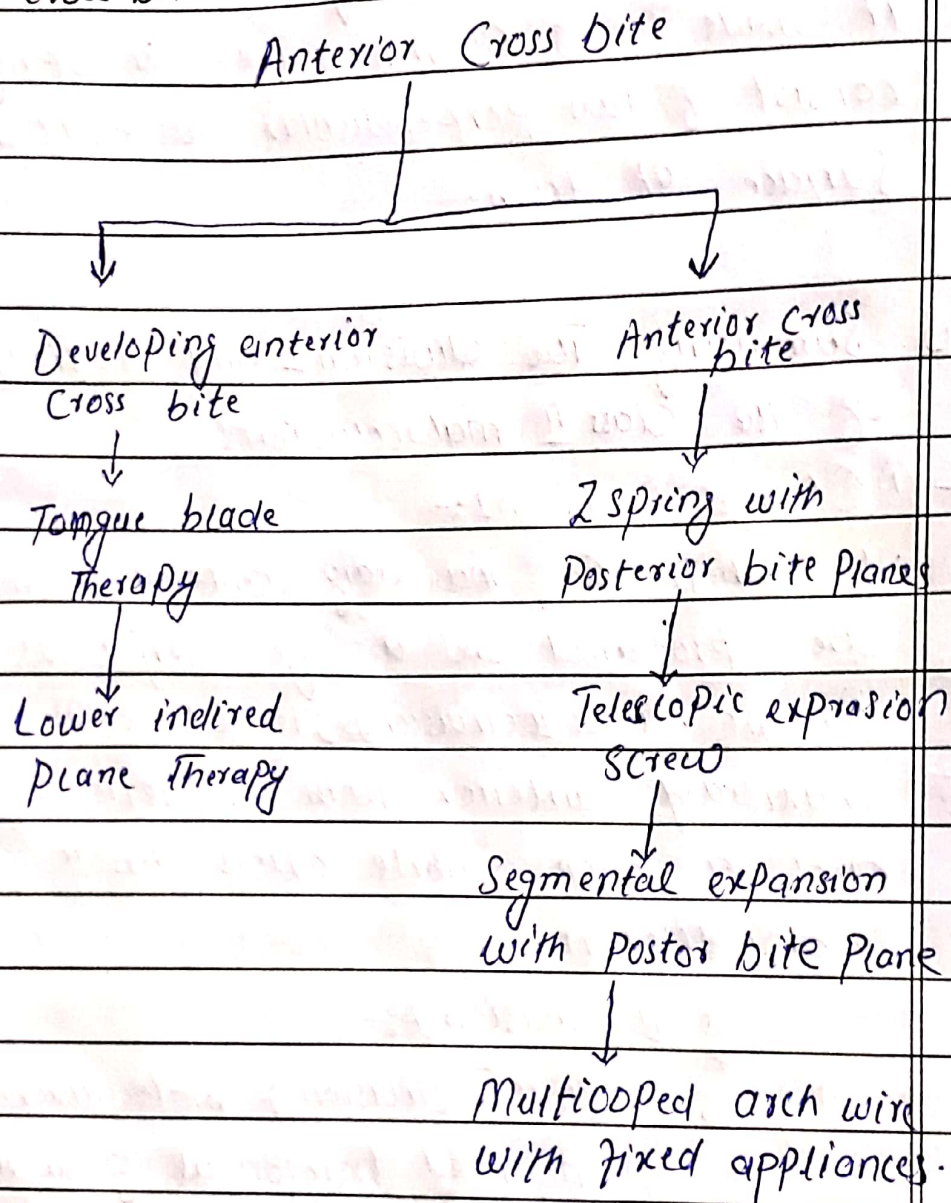
It is where the maxillary anterior teeth are proclined and a large overjet is present. Class II division 2 is where the maxillary anterior teeth are retroclined and a deep overbite exists. Class II malocclusion.

② Class II Division 2:-

Angle's Class II division 2 malocclusion has a pronounced horizontal growth pattern with decreased lower anterior facial height, retroclined upper anteriors and significantly increased maxillary arch width parameters.

Ques: Illustrate the management of anterior cross bite?

Ans:



The main goal in treating anterior dental crossbite is to tip the affected maxillary tooth or teeth labially to a point where a stable overbite relationship ~~can~~ prevents relapse.

Treatment:- may involve lingual movement of a mandibular tooth, labial movement of a maxillary tooth, or both.

Q No: 5

Describe the procedure for mandibular and maxilla uses of acrylic in activator?

Ans:-

Activator appliance initially started out as one block of acrylic which fit in both maxillary and mandibular arch. The lower arch would see the horseshoe shaped lingual plate acrylic extending from distal of the last erupted molar. In the upper arch, initially the anterior portion is covered from canine to canine, but that was later modified.

⇒ Con ---

as seen with appliances such as Bionator & Appliance ~~with~~ which placed its emphasis on the tongue function.

⇒ Wire:-

- The wire components of activator included a labial bow which was usually placed 1mm away

from the front incisors and extended from canine to canine. The bow would be 0.9 - 0.8 mm thick. Additional wire element were later added to stabilize the appliance.

The construction bite of Activator can consist of two types:
Horizontal (H) Activator and
Vertical (V) Activator.