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Name Muhammad Saeed

I:D 13910

Department B.S-Dental

Subject Maxillofacial Surgery

Submitted to → Dear Mem

Dr-Natasha Kamran

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Q1: Surgical instruments.

Ans:

Following are the Surgical instruments.
use in extuction process.

⇒ Examination instruments:

- (i) Mouth mirror
- (ii) Cotton plier
- (iii) probe

••• Elevators:

- (i) Streight elevators
- (ii) Angular
- (iii) Cross bar
- (iv) Crainers
- (v) Periosteal elevators.

••• Forceps:

- (i) Maxillary
- (ii) Mandibular
- (iii) Cew down

Maxillary central incisor forceps are
straigh and posterior forceps
are ingular while mandibular are
all ingular, Inesthesia syringe.

Cartridge

Block needle (Long)

infeltraction needle (short)

- | | |
|--------------------------|-----------------------|
| ★ Scalpel | ★ Surgical blades |
| ★ Hemostats | ★ Ramyer |
| ★ Bone file | ★ Bone Ranger |
| ★ Bone chisel and Mallet | ★ Saliva ejection tip |
| ★ Needle holder | ★ Suture |
| ★ Tissue Seissor | ★ Dispasable Syring. |



Ans 2 Define L.A. Agents:

Local anesthesia is any technique to include the absence of sensation in a specific part of the body, generally for the aim of including local analgesia, that is local insensitivity to pain, although other local senses may be affected as well.

⇒ Local Anesthetic Agent ::

Lignocaine hydrochloride 2% is most commonly used local anesthetic agent.

⇒ Uses ::

Conduct block.

• Vasoconstrictors ::

Adrenaline is used for vasoconstrictor in local anesthesia.

• Uses ::

Delays absorption of LA from the site.
Provide blood less field. Prolong the actions.
Reduces the systemic toxicity.

⇒ Reducing agent ::

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

⇒ Preservative ::

Methylparaben

It increase the shelf life of the anesthetic solution acts as a bacteriostatic agent.

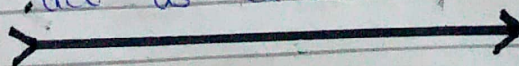
⇒ Fungicide ::

Thymol is used as fungicide.

⇒ Vehicle ::

modified ringers solution or distilled water is used as vehicle.

It provides the volume of the solution and act as diluent.



Ans 3

Complication Part A

- ★ Soft tissue injuries.
- ★ Problem with the tooth being extracted.
- ★ Injuries to the adjacent tooth.
- ★ Injuries to the osseous structure.
- ★ Orofacial Communication.
- ★ Post operative bleeding.
- ★ Delayed healing and infection.
- ★ Injuries of the mandible.

1 Soft Tissue injuries

Causes :-

- ★ Surgeons lack of adequate attention to the delicate nature ^{the} mucosa.
- ★ Attempts to do surgery with inadequate access
- ★ Rushing during surgery.
- ★ use of excess and uncontrolled forces.

Soft tissue injuries occur in the form of:

- A Tear of 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 of stretch (to gain needed surgical access)

Tearing

Prevention

- (iv) Creating adequately sized flap to prevent excess tension on the flap.
- (ii) Using controlled amount of retraction forces on the flap.
- (iii) 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.

"D" Puncture wound

Causes

Due to uncontrolled force during force during using the instruments such as straight elevator or a periosteal elevator which may slip from the surgical field and puncture or tear into adjacent soft tissue.

"Prevention"

- (iv) use of controlled forces.
- (ii) Using finger rests.
- (iii) Support from the opposite hand if slippage is anticipated.

Management

- Primary aim is prevention of infection and allowing healing to occur.
- If wound bleeds is prevention of excessively hemostasis left open unstitched healing by secondary intention.

"C" Stretch or Abrasion

Common sites

Lips, Corner of the mouth.

Causes

- Abrasion or burns from the rotating Shank of the bur rubbing on Soft tissue.
- Metal retractor coming into contact with the Soft tissues.

→ Prevention :-

Surgeon should focus on the Cutting end of bur as well as the location of Shank Shaft in relation to the Soft tissues.

→ Managements:

- Clean the area with regular oral rinsing.
- Usually such wounds heal in 4-7 days without Scarring.
- If such abrasion or burn does develop on Skin advised to keep it moist with antibiotic ointment (5-10 day).



Ques
Ans

Impacted Tooth

It is the tooth that has failed to erupt completely or partially to its correct position in the dental arch and its eruption potential has been lost.

Causes %

- * Heredity
- * Malnutrition
- * Endocrine dysfunction
- * Disease of jaw and surrounding tissue.
- * Density of the overlying or surrounding tissue.
- * Irregularity in the position and pressure of an adjacent tooth.
- * Chronic inflammation with resultant fibrosis of the overlying mucosa.
- * Lack of space due to under developed jaws. unduly over retention of the deciduous teeth.
- * Inflammatory changes in the bone due to disease in children like chicken pox, Parotitis.



Q5:

3 Techniques of administration of local anaesthetics

→

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.

"Nerve Block"

★

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



The Ended