



**LIBYAN INTERNATIONAL
MEDICAL UNIVERSITY**



Comprehensive Case Presentation

By :

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UNDER SUPERVISION

- Dr. Rafik Alkwafi.
- Dr. Abdelmonem Abdelnabi
- Dr. Ali Busnaina.
- Dr. Kadija Alflah.
- Dr. Nada Kashbur.
- Dr. Omar Alhuni.
- Dr. Masoud Dihoum.
- Dr. Amal Alawami.
- Dr. Nuha Alkadiki.

PATIENT DETAILS

- Initials: S.R.R
- DOB:18-December-1973
- Nationality: Libyan.
- Gender : female .
- Occupation: teacher .
- Data:10/12/2018



CHIEF COMPLAINT

- **Chief Complaint:** 1-pain in the lower back right side since 2weeks ago .2-pain in the upper back right side since 1month ago .
- 3-swelling , mobility , and discharge in relation to upper right Front tooth .
- **History Of Chief Complaint:** 1- moderate throbbing intermitted localized pain lasts up to 15 min , started after the filling is full out from 2months ago , the pain is increased during eating and reduce with analgesic (paracetamol500ml) . 2- moderate dull intermitted localized pain lasts up to 15 min, the teeth is restored from 1year ago and from 2months of restored teeth the pain is started.
- 3-history of trauma from 2years ago and within 2months she noted swelling ,mobility and discharge related to upper right anterior tooth without pain and the swelling is comes and goes , no treated provided .

- Medical History: NOS .
- Dental History: the last visit to dentist from 1year for restoration.
- Social History: single .
- Final diagnosis: 1- chronic periapical periodontitis with acute exacerbation of $\frac{7}{7}$
- 2- chronic periapical peridontitis of $\frac{5}{5}$
- 3- end-perio lesion of $\frac{41}{41}$
- 4- Caries teeth $\frac{31}{31}$
- 5-Badly decayed tooth $\frac{4}{4}$
- 6-Generalized mild to moderate chronic periodontitis .

Oral Hygiene Practice:

Brushing: irregular brushing with medium toothbrush.

Brushing Method: horizontal

Kind Of Dentifrice Used: nothing specific.

Extra-Oral Examination

Face symmetry: symmetrical.

Skin: Tattoo

TMJ Health:

No Tenderness

N Clicking

No Jaw rotation subluxation

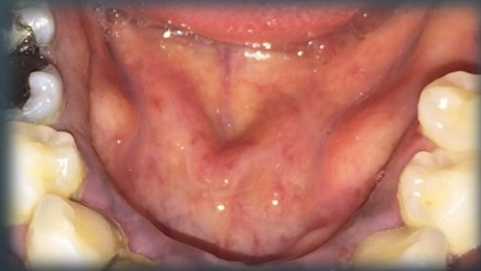
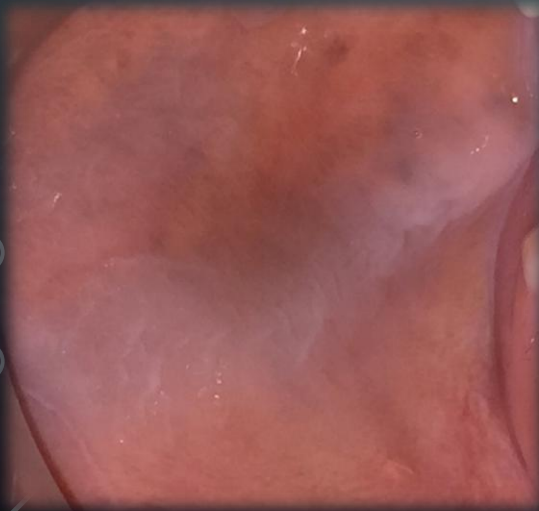
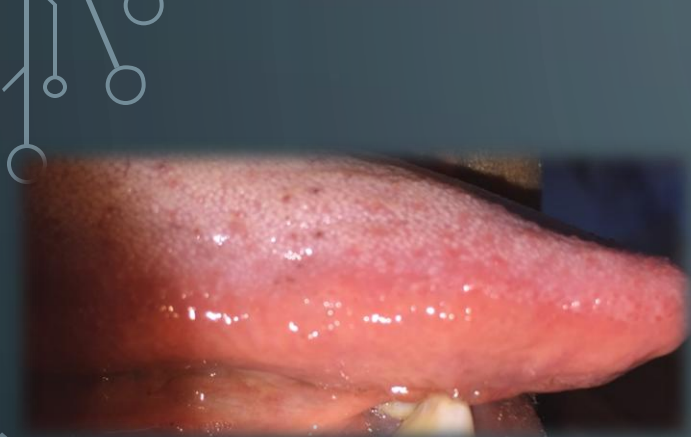
Lymph node not palpable

The image features a dark blue background with white, stylized circuit board traces in the corners. These traces consist of straight lines and right-angle turns, ending in small circles that represent solder pads or vias. The patterns are located in the top-left, top-right, bottom-left, and bottom-right corners, framing the central text.

Intra-Oral Examination

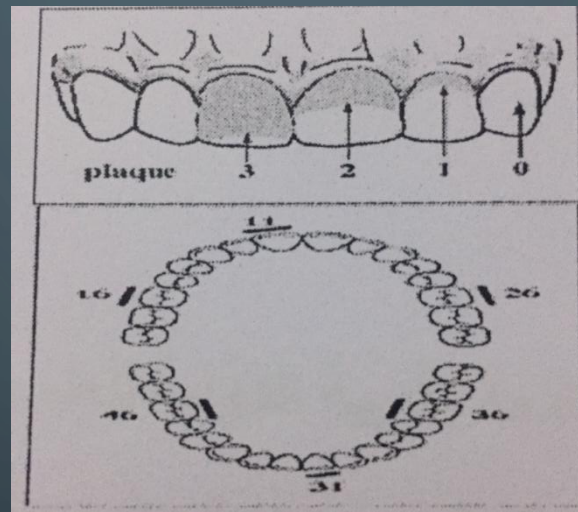


Intra-Oral Examination



Plaque And Calculus

16	11	26
1	1	1
1	1	1
46	31	36



16	11	26
1	0	1
0	1	0
46	31	36

Plaque Index=1

Calculus Index=0.1

OHI-S=1.1 Good (0-1.2)

Intra-Oral Examination

Hard Tissue Examination:
Maxillary Arch .



8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
M	F	M	F	F III	D		II				#	M			M

Intra-Oral Examination

Hard Tissue Examination:
Mandibular Arch .



8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
M	#	F	F			I	I	I	I				M	M	M

Color of gingiva :physiological pigmentation.

Gingival contour : Scalloped ,round margin and blunt interdental papilla.

Size of gingiva : normal except in max.anterior was enlarged .

Consistency :firm and resilient except in max.anterior area was soft and edematous .

Position of gingiva : apical to CEJ except max.anterior and premolar area.

Bleeding on probing : present in all sixtant.

Exudation : present in max.anterior area.

Probing depth :ranged between (1-2) except in max.anterior tooth was 10mm .

Clinical attachment loss: ranged between (0-4) except in max.anterior tooth was 8mm.

Mobility: grade II in max.anterior tooth, grade III in max.premolar tooth and grade I in man.anterior teeth .



Treatment Plan

Emergency

- 1-Extraction
- 2-pulp exacerbation

Phase I

- 1-Patient education and motivation .
- 2-scaling and polishing .
- 3-pit and fissure sealant

Phase II

- 1-Extraction
- 2-endodontic treatment
- 3- Re-Treatment
- 4- Gingivectomy

PhaseIII

Restoration
Post and core and
replacement missing
teeth

Phase IV

Maintanace

Inform Consent

الجامعة الليبية الدولية للعلوم الطبية

كلية طب وجراحة الفم والأسنان

بالعلاج

أقر أنا / صبيحة رمضان العزاني بطاقة شخصية رقم: 3.167.24

وبكامل ارادتي أنني أعطيت موافقتي للفضية والكتابة للبدء والاستمرار في العلاج بعوائد كلية طب الأسنان بالجامعة الليبية الدولية للعلوم الطبية والذي يتضمن

حالة شاملة (خلع + علاج لثا + علاج عام +)

وقد تم شرح التشخيص المرضي لحالتي والخيارات المختلفة المتوفرة لمعالجتها والأعراض الجانبية والمخاطر التي قد تصاحب العلاج والمشاكل التي قد تنتج عن عدم العلاج والمدة التقريبية اللازمة لانتهاء منه والتكلفة الإجمالية للعلاج وفقا للرسوم الرمزية المقررة كما تفهم أن هذا العلاج قد تم تنفيذه من قبل طالب أو طبيب امتياز تحت الإشراف المباشر لأعضاء هيئة التدريس بالكلية.

اسم المريض: صبيحة رمضان العزاني

توقيع المريض: صبيحة رمضان العزاني

اسم الطالب أو طبيب الامتياز: أحمد محمد العزاني

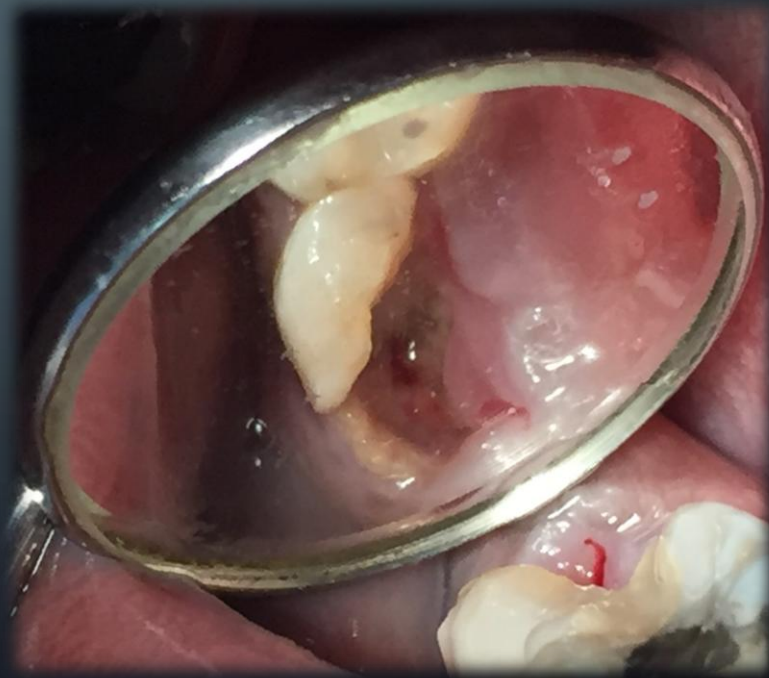
الأستاذ المشرف: أحمد محمد العزاني

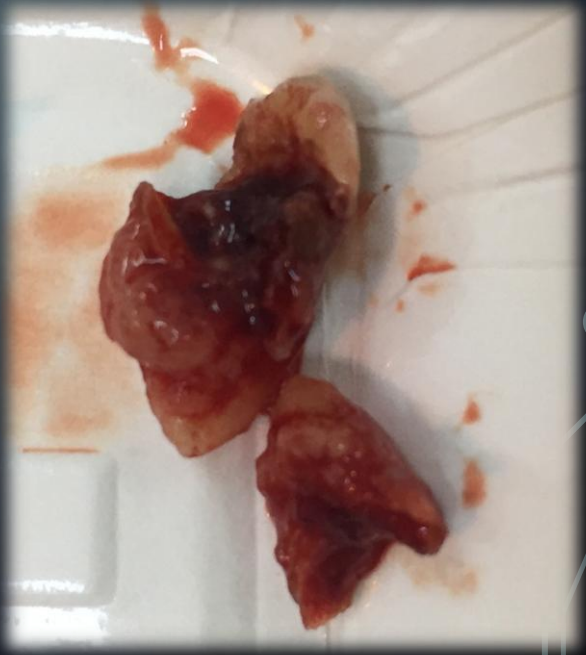
التاريخ: 2018/12/19



EMERGENCY:

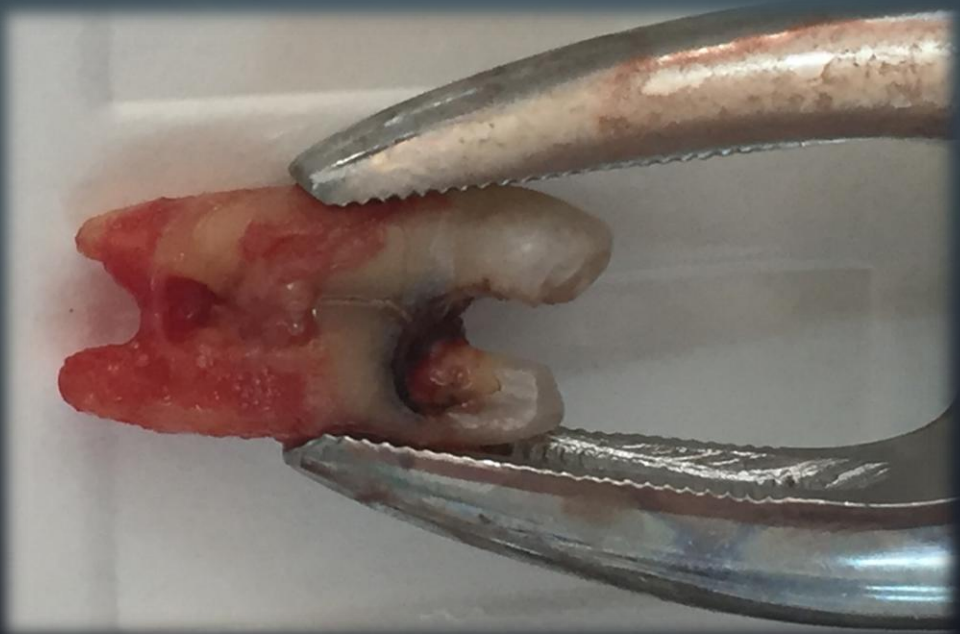
Extraction of $\frac{7}{7}$



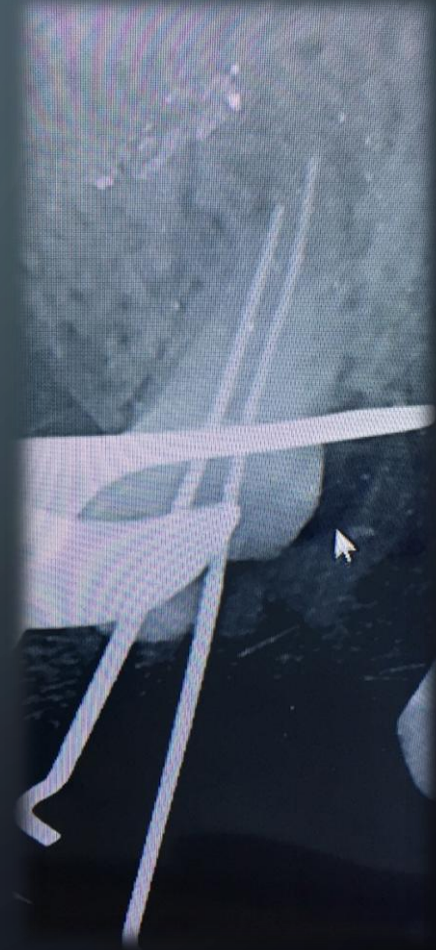
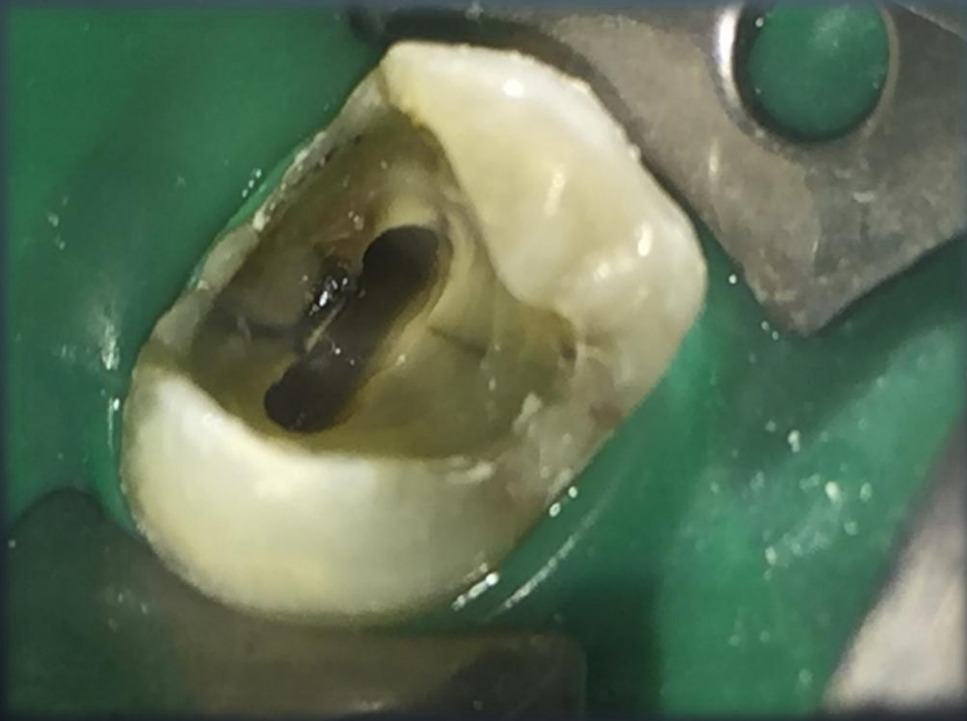


Extraction of $\frac{4}{}$

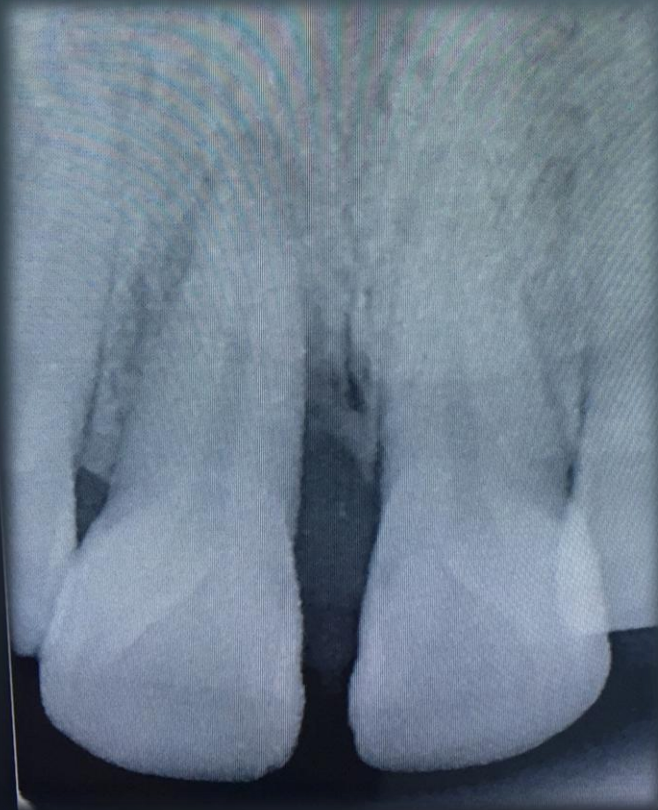




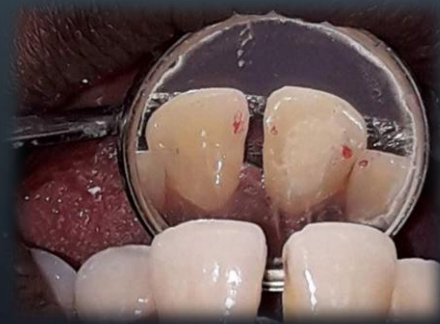
*Access Cavity Preparation ,Pulp Erxacerbation And
Working Length Determination 5*



Probing Depth OF Upper Right Central Incisor From Mesial Side Is 10 mm , Middle 5mm , And Distal 4mm



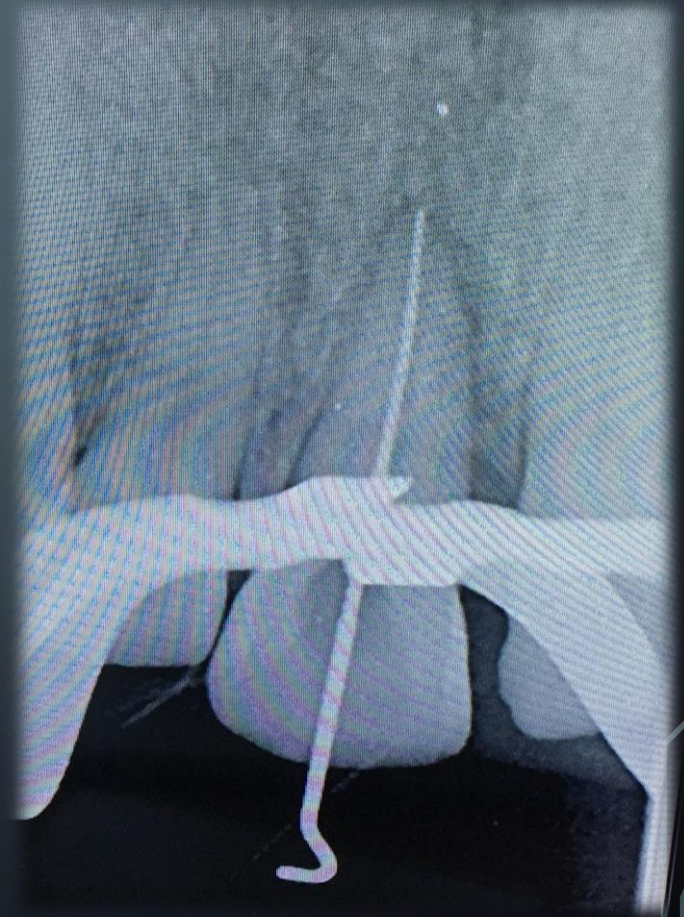
*Guttapercha Points Used With Radiograph To Assist
In Determining The Level Of Attachment Of
Periodontal Pocket And Fremitus Test*



Drainage The Abscess Using Curette And Irrigation With Chlorhexidine



*Access Cavity Preparation ,Pulp Erxacerbation
And Working Length Determination*



The image features a dark blue background with white, stylized circuit board traces in the corners. These traces form various geometric shapes and paths, ending in small circles that represent components or connection points. The patterns are symmetrical, with one set in the top-left, one in the top-right, one in the bottom-left, and one in the bottom-right.

Phase I

Scaling And Polishing

Before



After



Pit And Fissure Sealant 45

Before



After



Pit And Fissure Sealant ₄

Before



After



Pit And Fissure Sealant

7

Before



After



The image features a dark blue background with white, stylized circuit board traces in the corners. These traces consist of straight lines and right-angle turns, ending in small circles that represent solder pads or vias. The patterns are located in the top-left, top-right, bottom-left, and bottom-right corners, framing the central text.

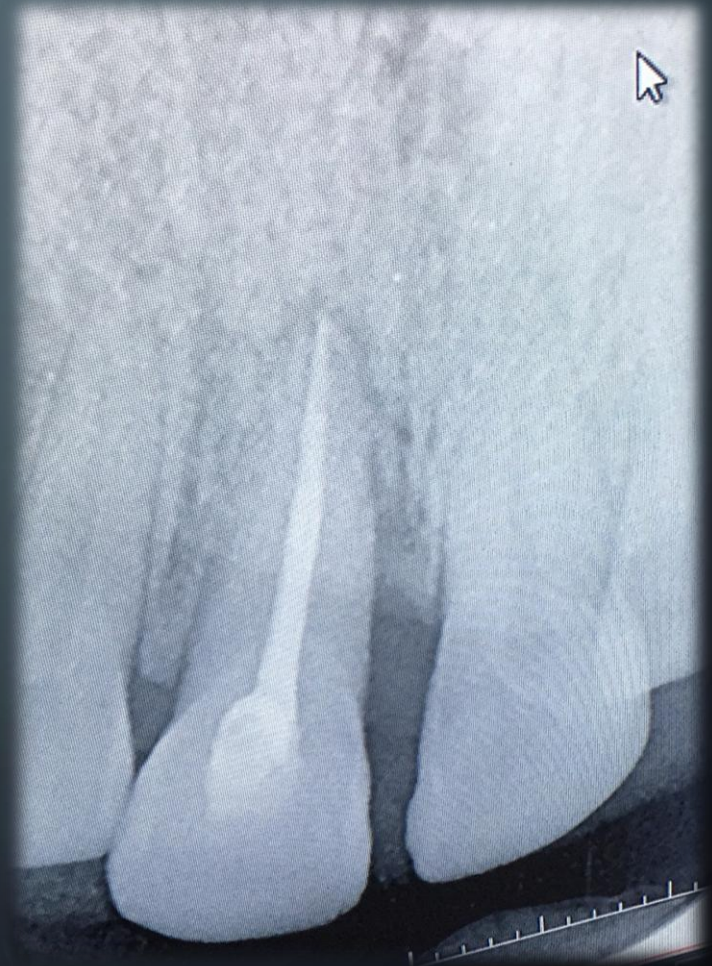
Phase II

Extraction of $\frac{4}{}$





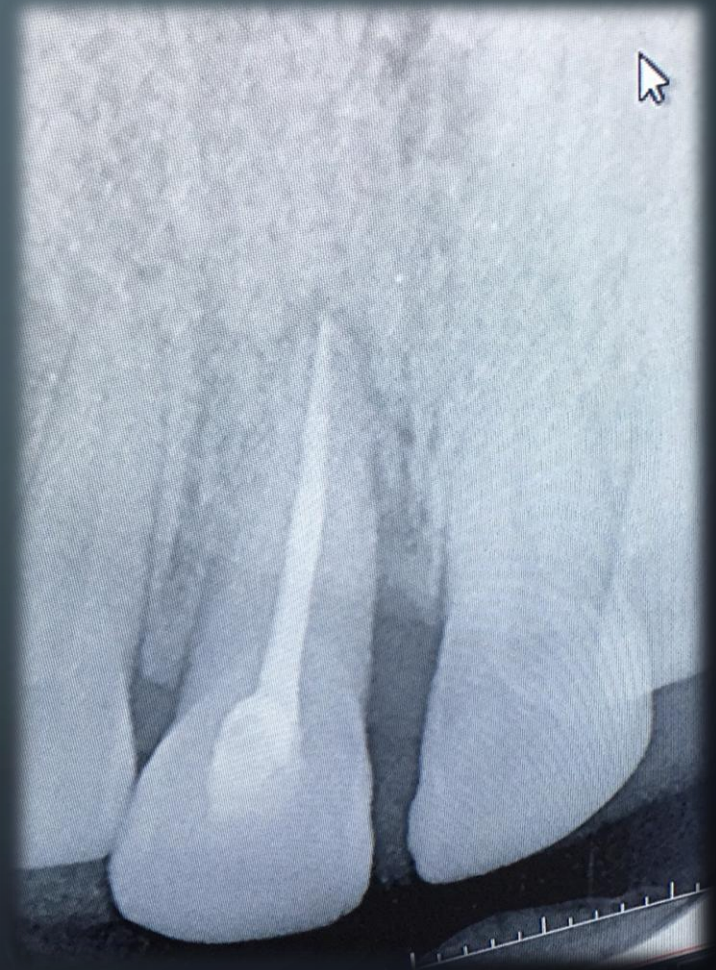
Master Cone Selection And Obturation



Before



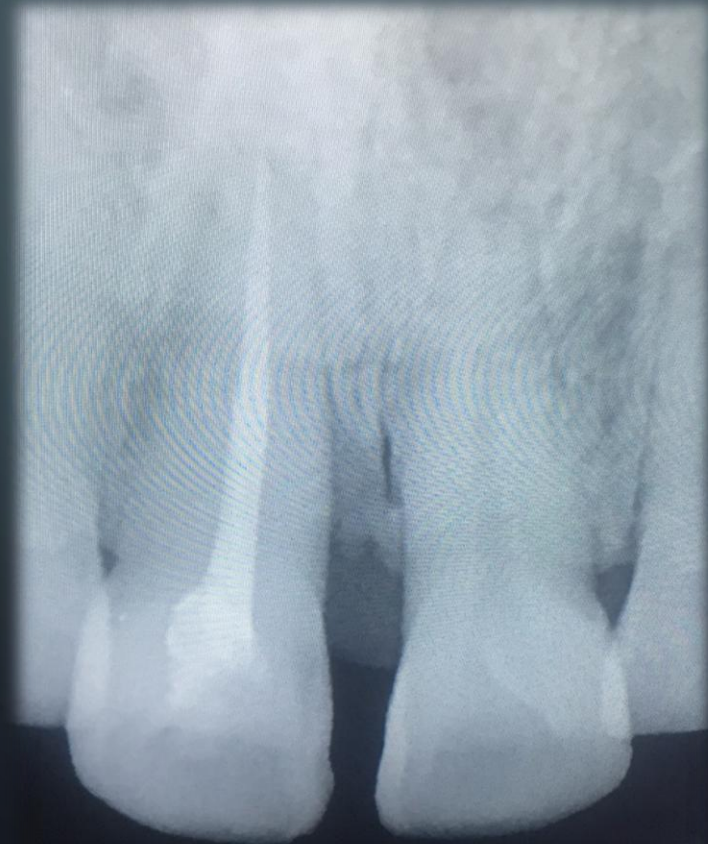
After



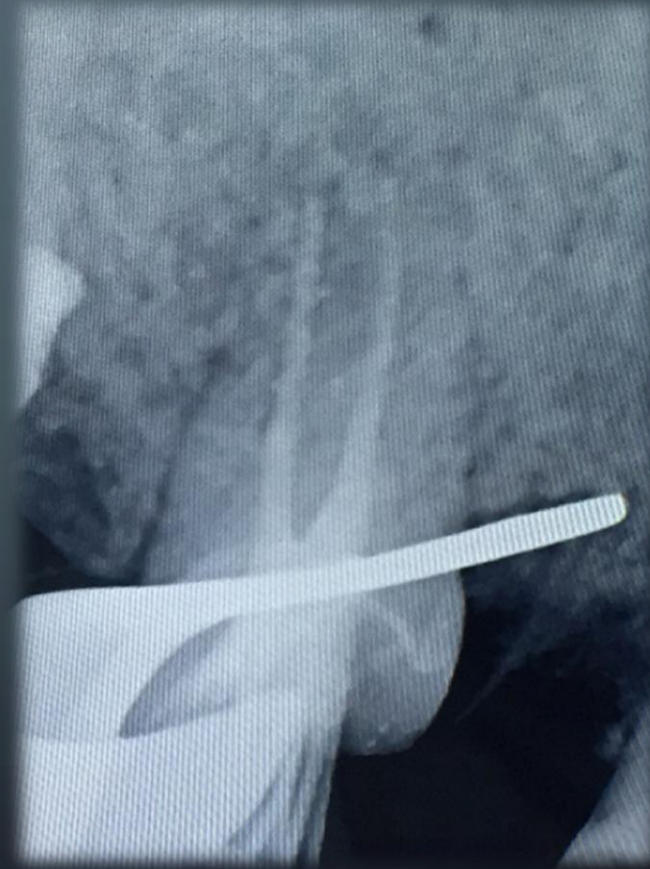
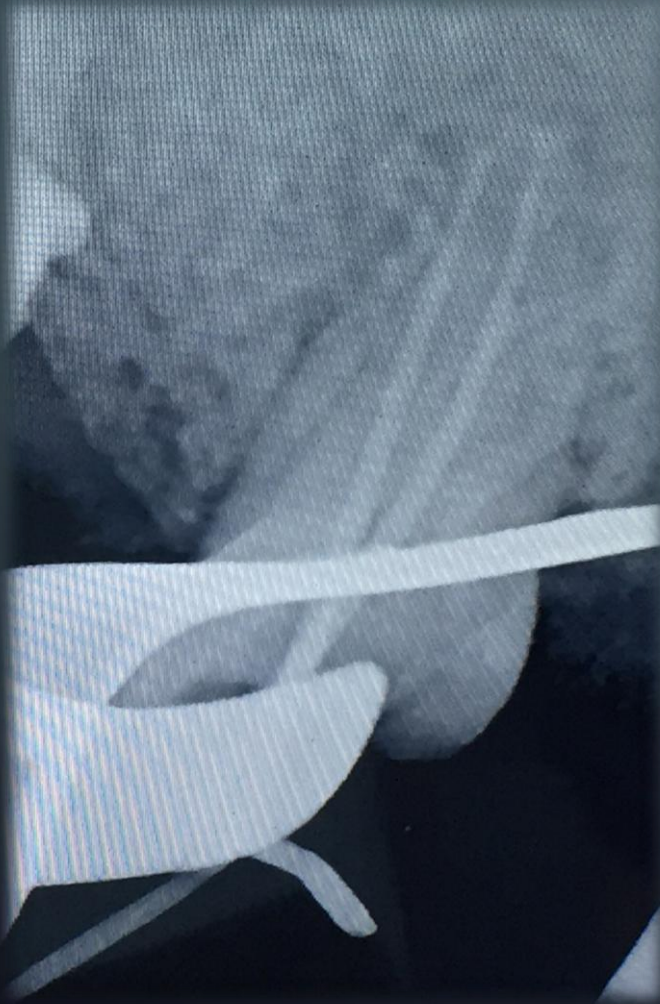
*Re-evaluation After 10 days And
After month*



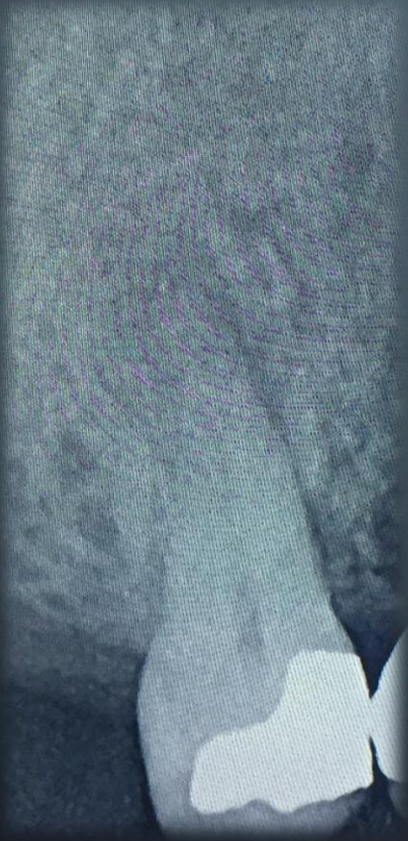
After 10 month



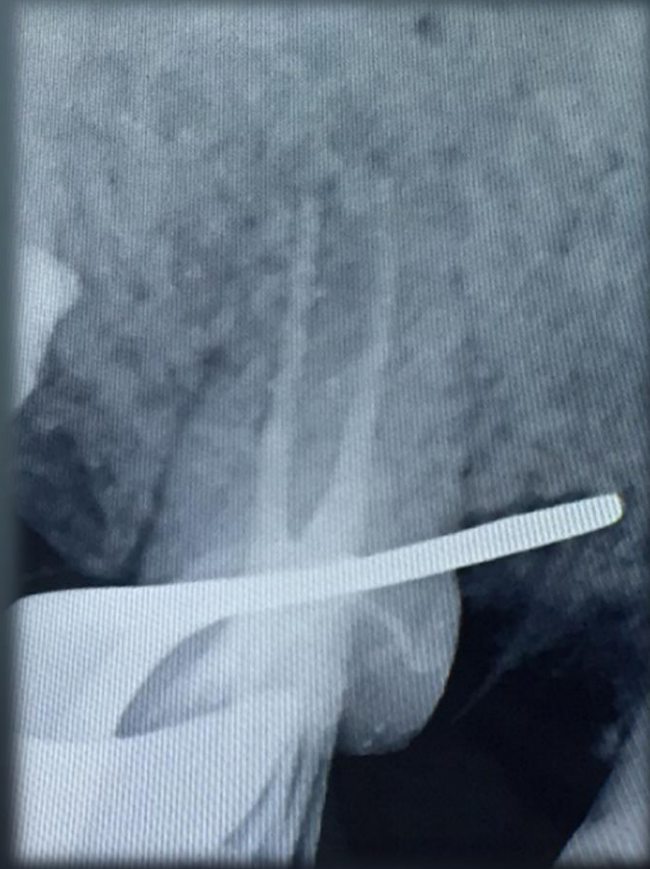
Master Cone Selection And Obturation



Before



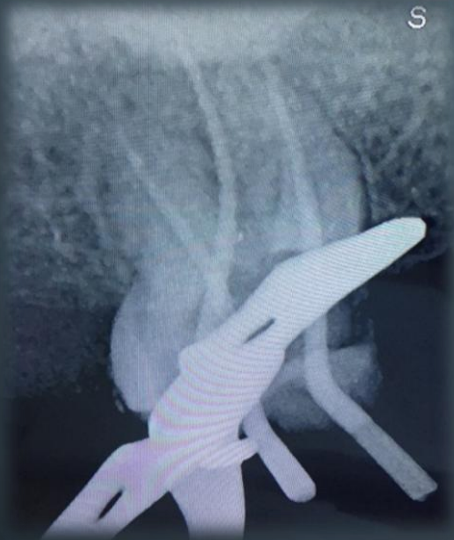
After



Re-Treatment Of ⁷
Pre-Operative Clinical View And
Radiograph



Working Length ,Master Cone Selection And Obturation



Before



After



Gingivectomy



Before



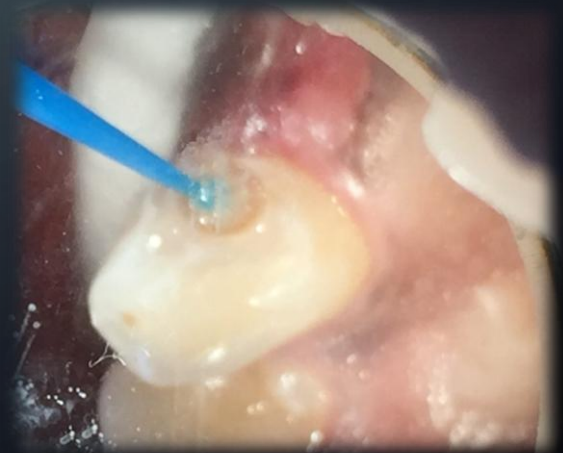
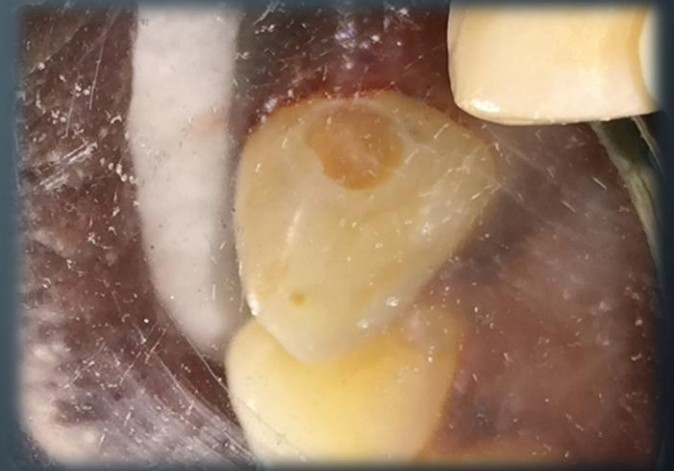
After



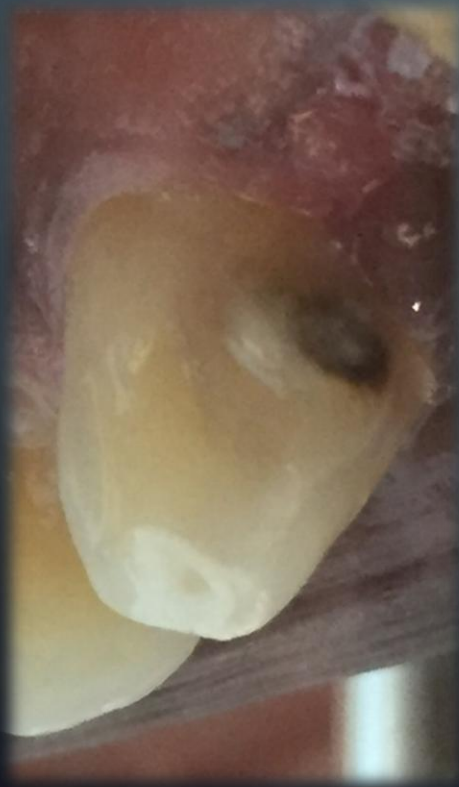
The image features a dark blue background with white, stylized circuit board traces in the corners. These traces consist of straight lines and small circles, resembling a PCB layout. The traces are located in the top-left, top-right, bottom-left, and bottom-right corners, framing the central text.

Phase III

Class III Cavity Preparation And Composite Restoration Of ³



Before



After

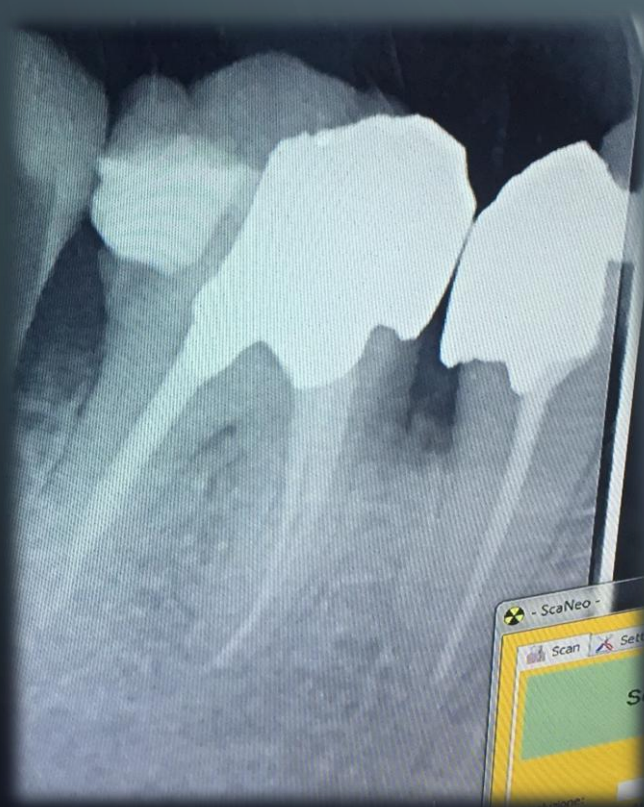


Class III Cavity Preparation And Composite Restoration Of

1



Pre-Operative Clinical View And Radiograph



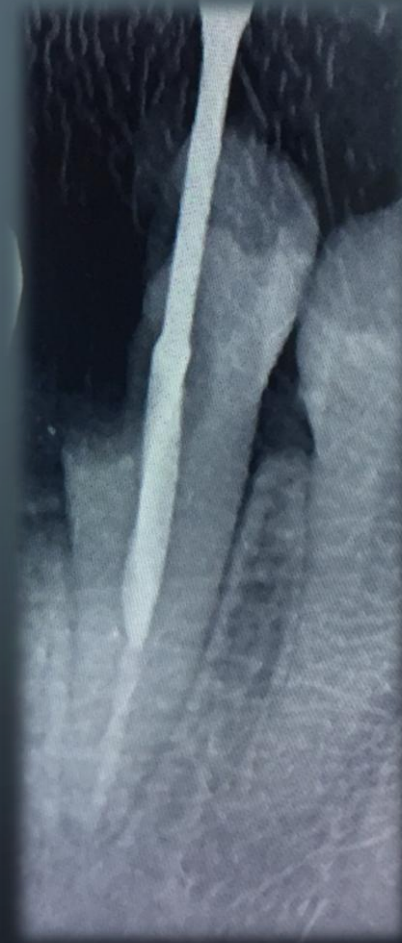
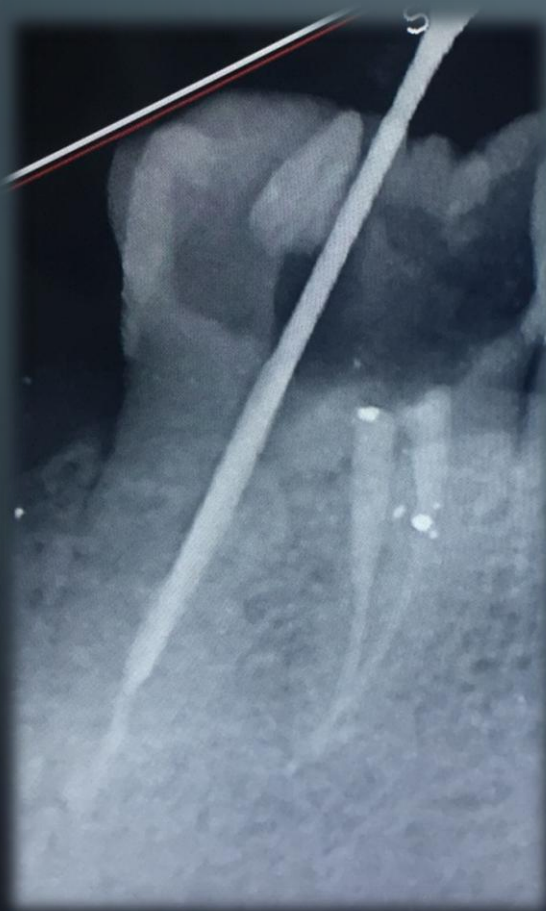
Primary Impression



Diagnostic Wax-Up



Post Space Preparation



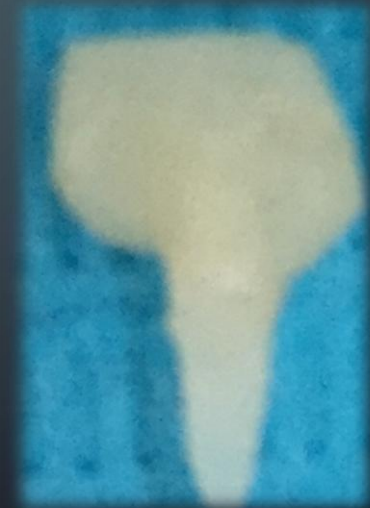
Custom Made Post And Core Direct Technique

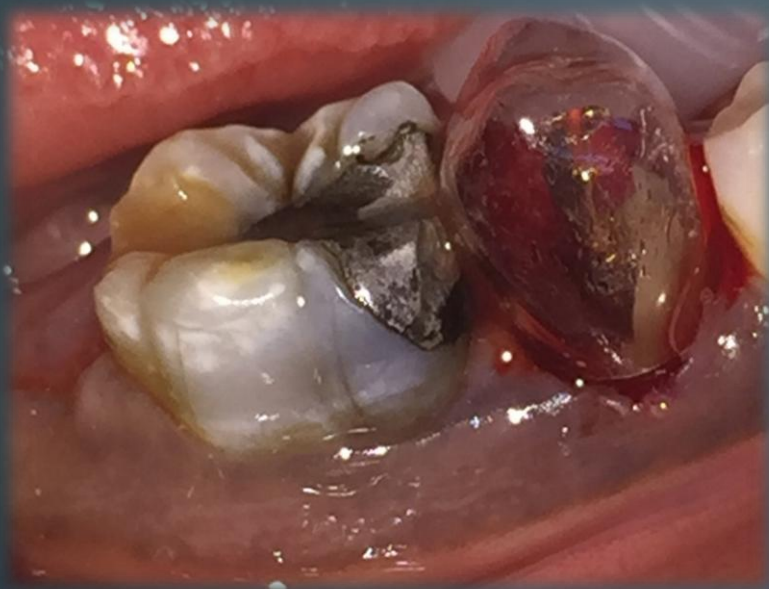


Temporary COLD-V For Fabrication Cast Post And Core



*Shape The Core With Tapered
Diamond Bur*

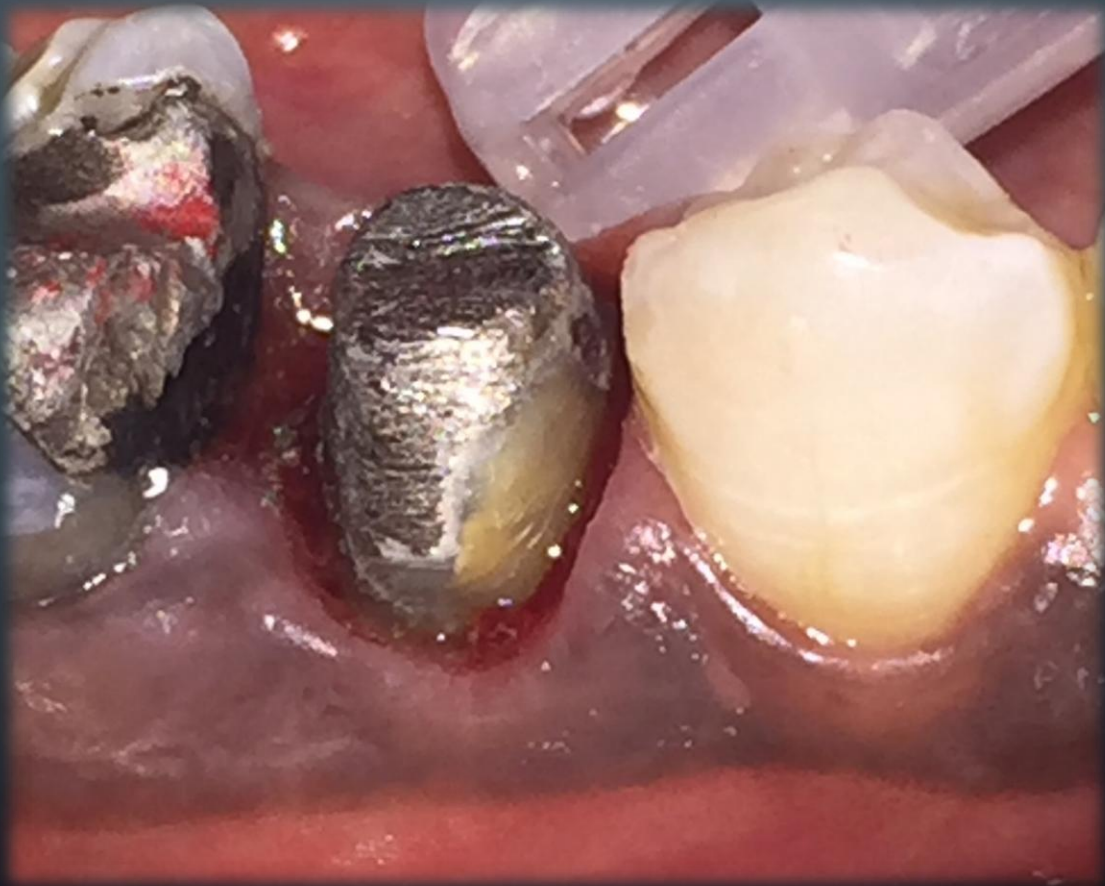




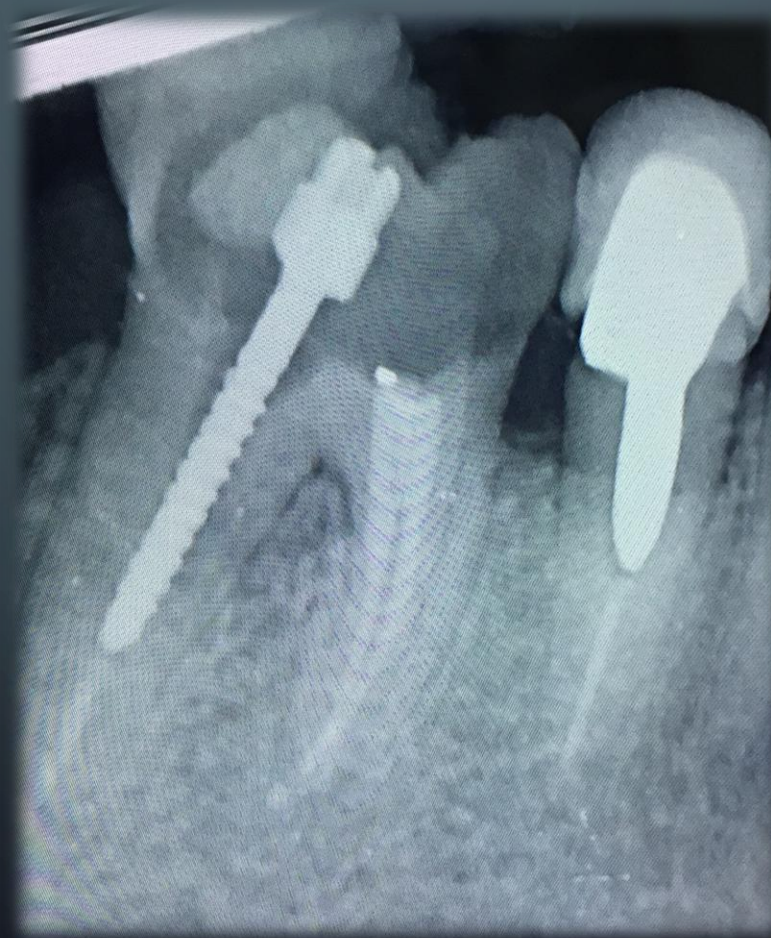
Fabrication Of Metal Post And Core



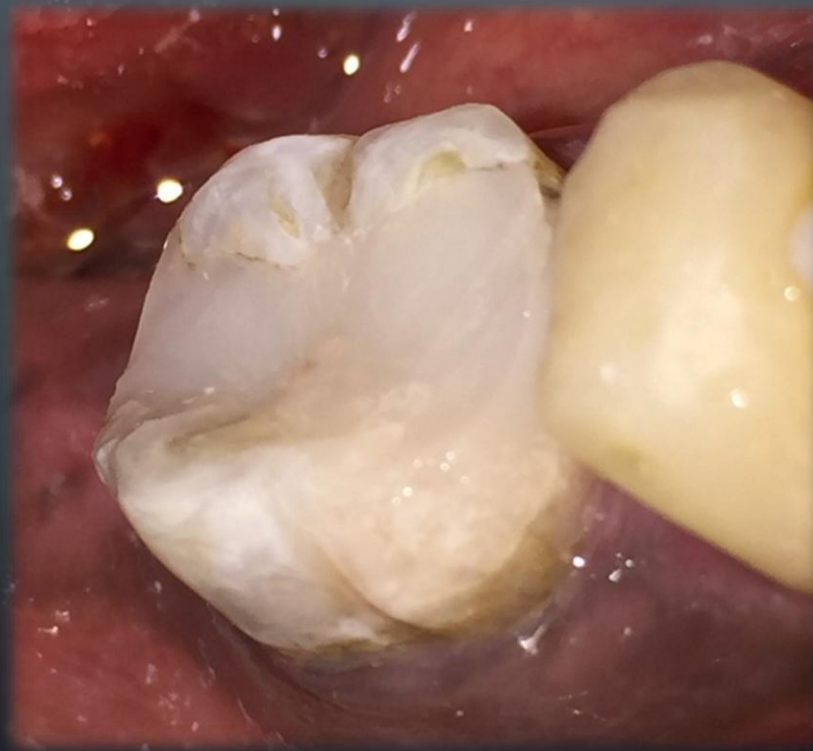
*Cement The Post Using Adhesive
Cement*



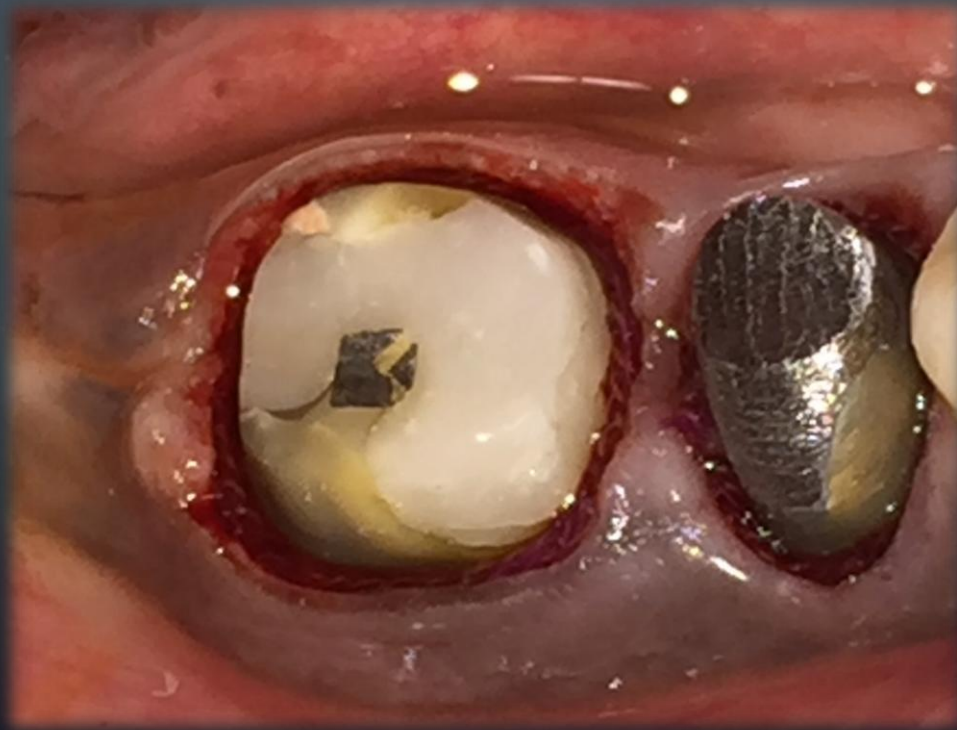
Post Cementation



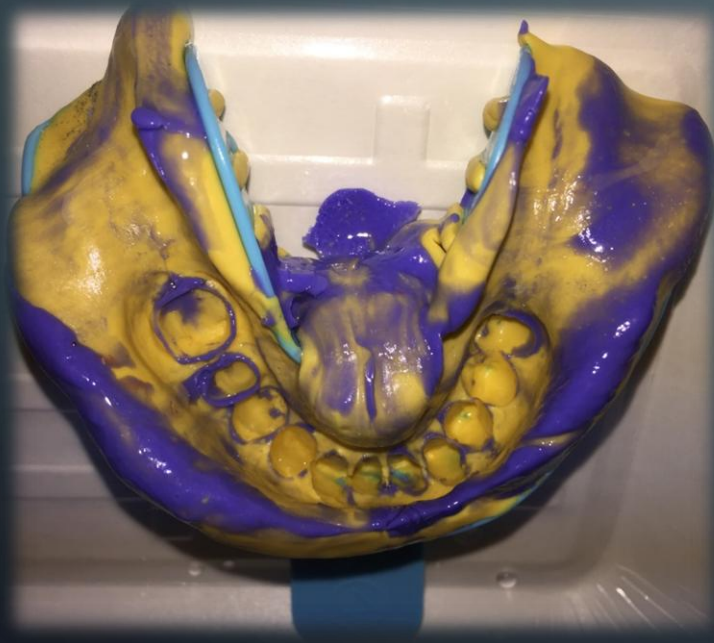
Core Build-Up With Composite



Teeth Preparation And Retraction Core Placement

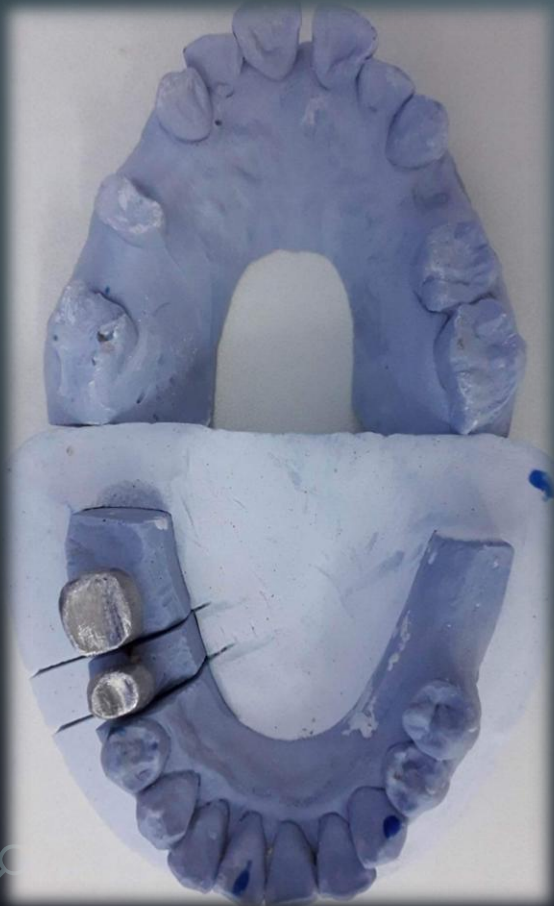
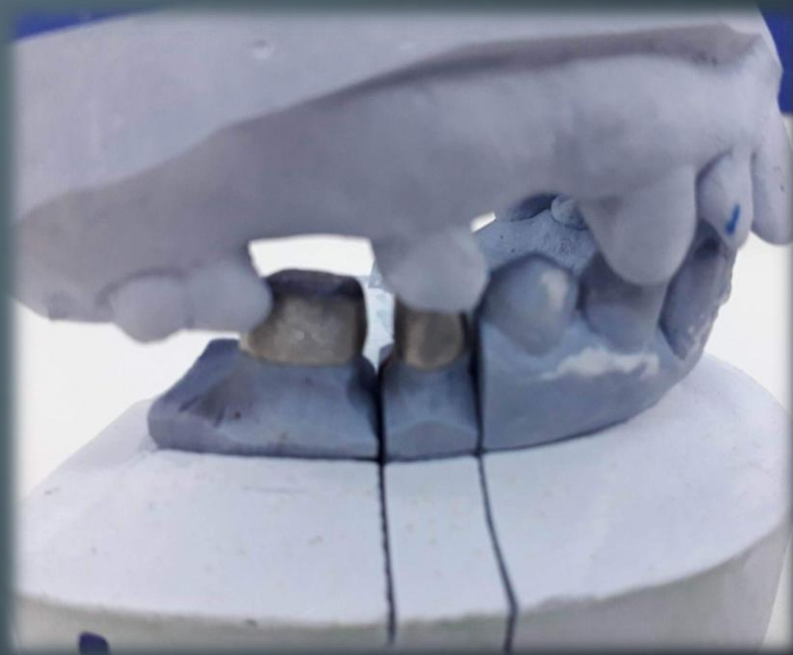
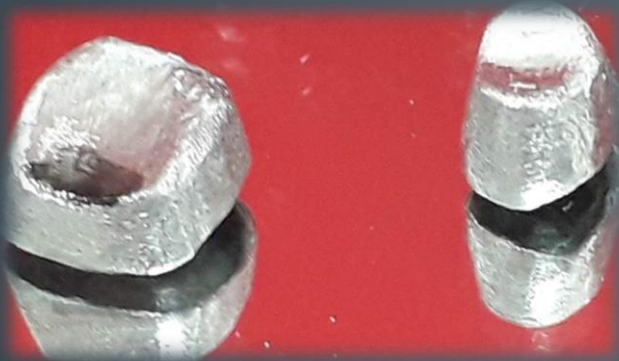


*Final Impression Of Lower And
Putty Impression Of The Upper Arch
For Occlusion*



Putty Index To Be Used For Temporary Crowns Fabrication





Try- In And Shade Selection



Trial Cementation



Final Cementation For The PFM Crowns Using Adhesive Resin Cement



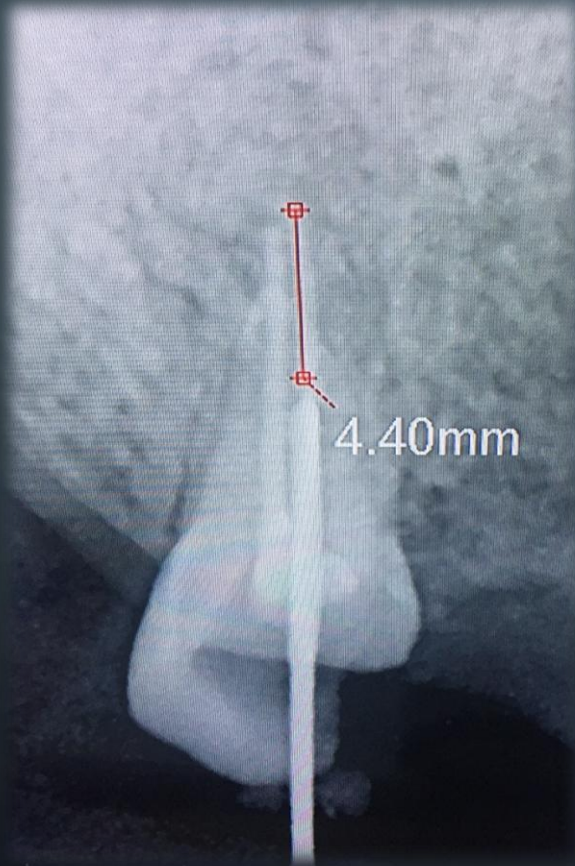
Before



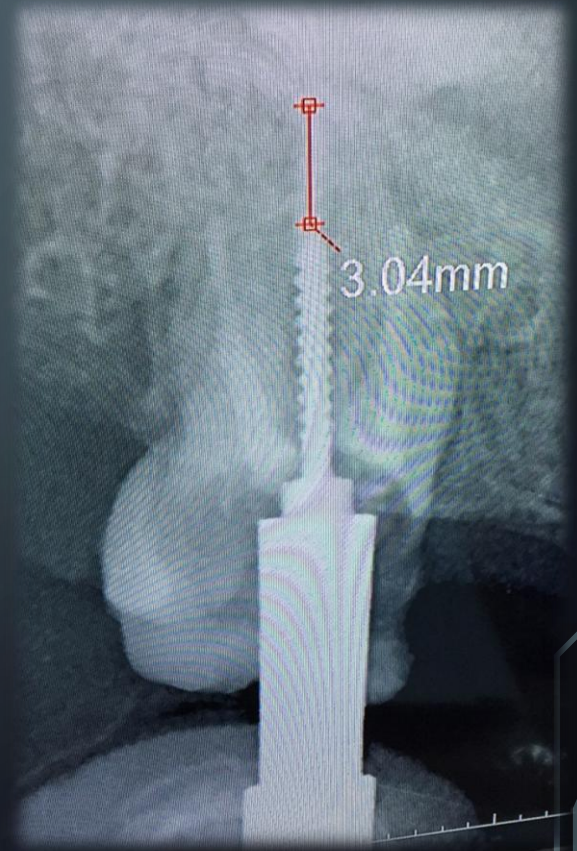
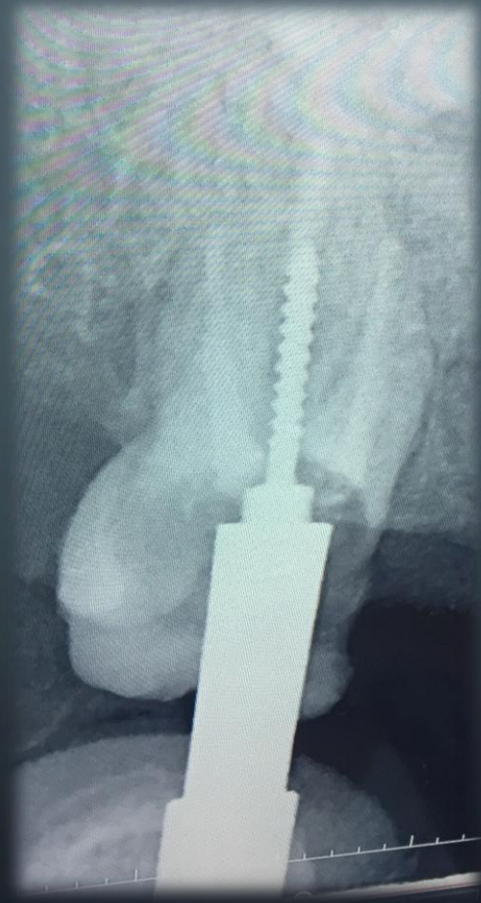
After



Post Space Preparation And Post Cementation



Post Space Preparation And Post Selection And Cementation



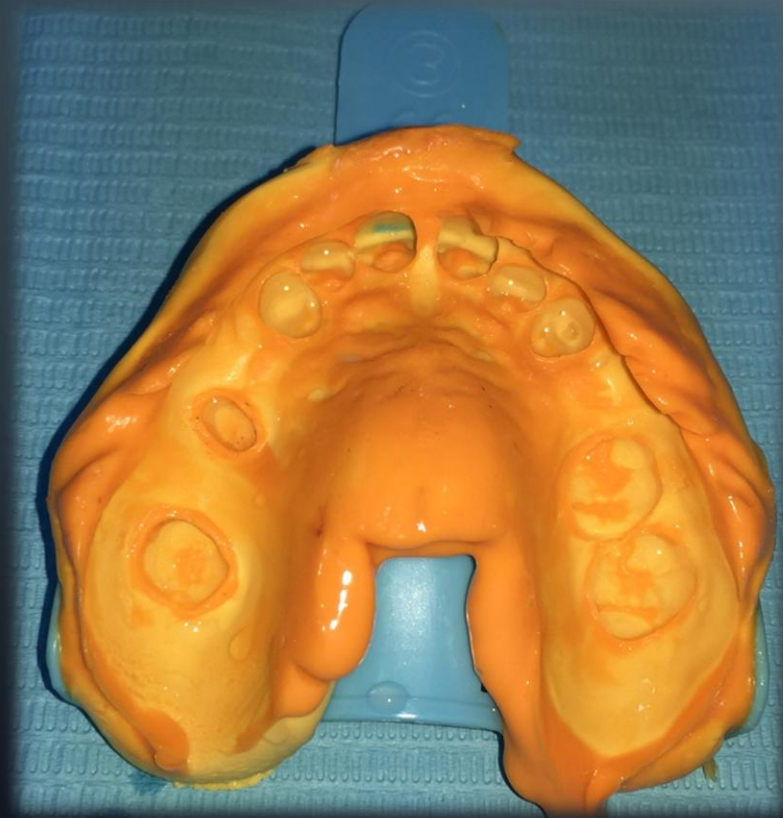
Core Build- Up With Composite



Teeth Preparation And Retraction Core Placement



Final Impression Of Upper And Alginate Impression Of The Lower Arch For Occlusion



Bite Registration



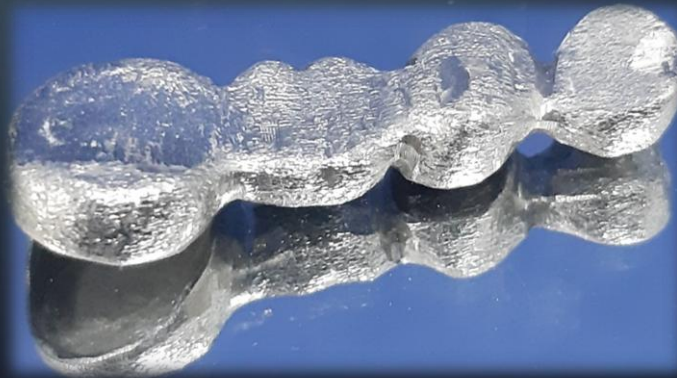
Diagnostic Wax- Up



Putty Index To Be Used For Temporary Bridge Fabrication



Try In And Shade Selection



*Final Cementation For The
PFM Bridge Using Adhesive
Resin Cement*



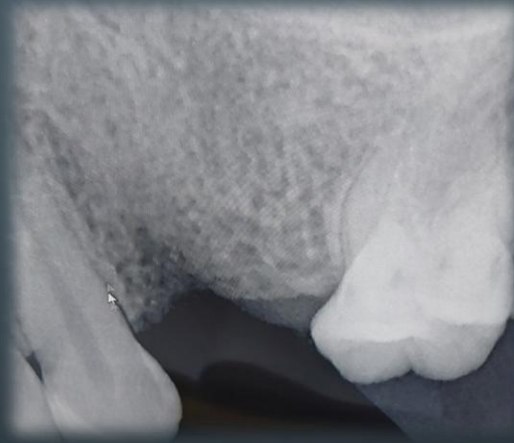
Before



After



Pre-operative Clinical View And Radiograph



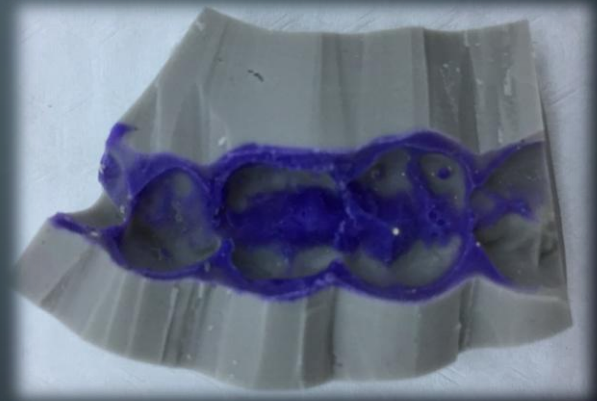
Teeth Preparation And Retraction Core Placement

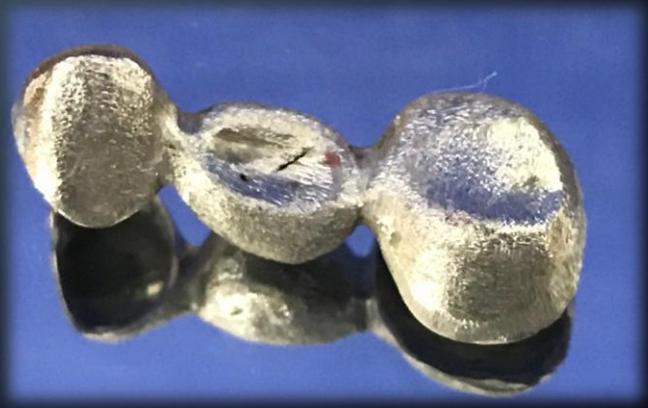


Final Impression And Bite Registration

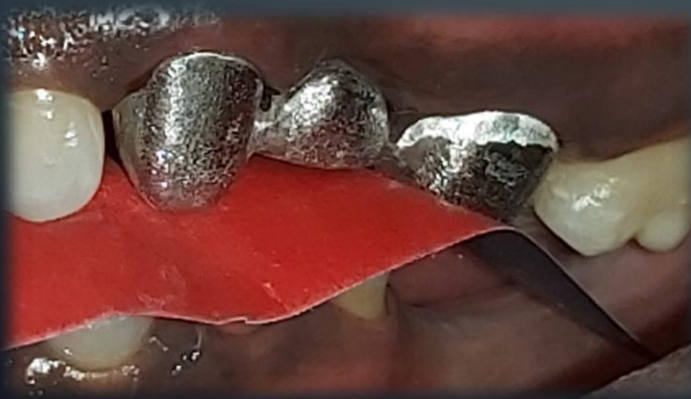


Putty Index To Be Used For Temporary Bridge Fabrication





Try- in And Shade Selection



Trial Cementation



Final cementation for the PFM bridge using glass ionomer cement

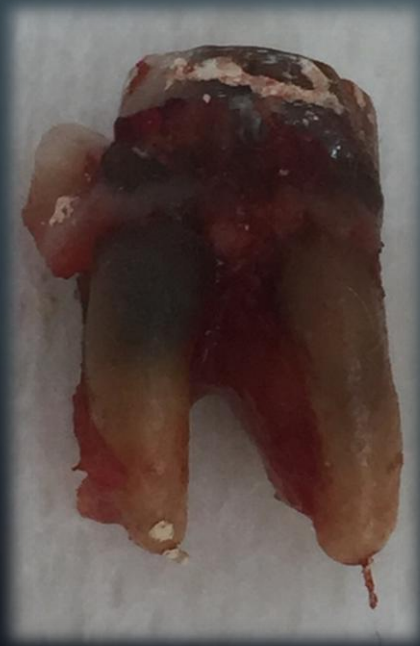


Intra-Oral Sinus Present After 4Months Of Treatment

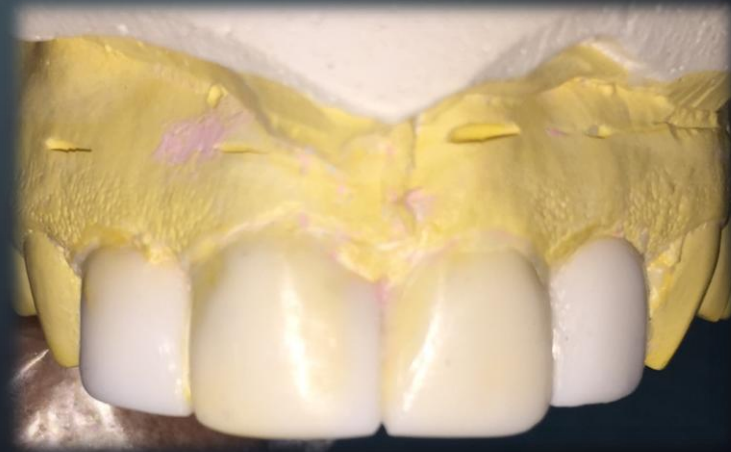
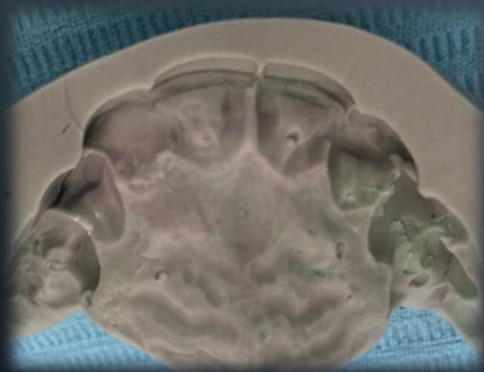


Tracing Sinus Tract With Guttapercha Point





Diasthema Closure



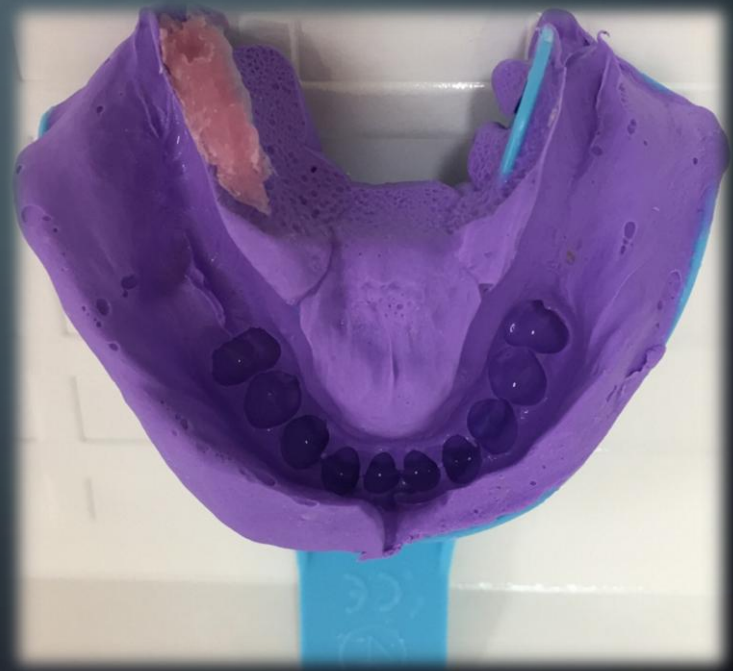
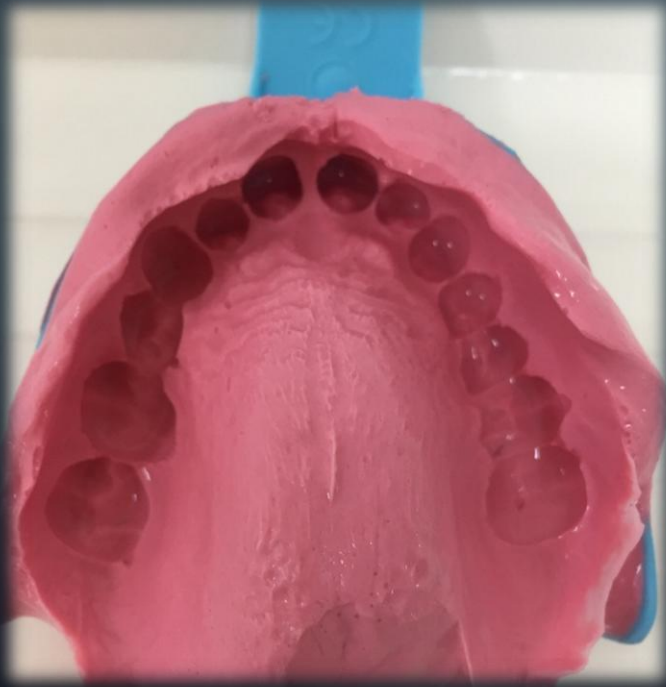
Before



After



Primary Impression



Jaw Relation



Try- in



Insertion



Before



After



Before



After



Before



After



Before



After



Before



After





Thank
you