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Description of the procedure of the dental services for:

Surgery – Exodontia



dr. MATTEO MEZZERA
STUDIO ODONTOIATRICC

These protocols are taken from the Quality Handbook according to UNI EN ISO 9001:2000
The Quality Handbook belongs to the Dr. Mezzera Dental Clinic
The copy of the handbook, both full and partial, is forbidden

SURGERY – EXODONTIA

1.1 PRE-SURGICAL AND POST-SURGICAL PROTOCOL

1. Antibiotic prophylaxis 2cpr 1 hour before the operation, then 1 cpr every 12 hours for 6 days
2. Painkiller Sinflex 1cpr at the end of the operation, then when needed
3. Rinses with 0,2% chlorhexidine mouthwash
4. Ice

THE PRE-SURGICAL EXAMINATION:

- General pre-operative evaluation
- X-ray evaluation
- Radicular anatomy
- Tooth mobility
- Close anatomic structures
- Tooth crown situation
- Position of the tooth to be extracted
- Mineralization of the surrounding alveolar bone
- Presence of periapical diseases

1.2 SIMPE EXOS

BASIC EQUIPMENT:

1. Anaesthesia material (Carboplyna or Alfacaina SP 1/100.000)
2. Surgical pliers General (TP 50709)
3. Needle holder DR Simion (NH5024)
4. Curved scissor (s16)
5. Periodontal scaler (13k6)
6. Courette (SPR1/2)
7. Periosteal elevator Prichard (PP5590)
8. Lip retractor
9. Periodontal probe (PCPUNC156)
10. Stripper holder
11. Surgical stripper (Swann-Morton 15C)

12. Dispensable suction cannula
13. Straight and angular elevators
14. Extracting forceps
15. Suture 4/0 silk (Sweden & Martina)

SURGICAL TECHNIQUE:

1. Local-regional anaesthesia
2. Syndesmotomy
3. Papilla décollement
4. Tooth luxation by means of a straight elevator
5. Tooth grasp, tooth luxation and, alveolo expansion by means of extracting forceps
6. Extraction of the tooth from the alveolo
7. Check on the integrity of the extracted tooth
8. Alveolar curettage and cavity review
9. Valsala maneuver (when needed)
10. Removal of the extra soft tissues
11. Alveolo lavage through physiological solution
12. Alveolo pressing and possible suture
13. Check on the formation of a normal clot
14. Positioning of a wet gauze over the injure
15. Application of synthetic ice Easy- ice (Dispotec)

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1.3 COMPLICATE EXOS (INCLUDED TEETH)

BASIC EQUIPMENT:

1. Anaesthesia material (Carboplyna or Alfacaina SP 1/100.000)
2. Surgical pliers General (TP 50709)
3. Needle holder DR Simion (NH5024)
4. Curved scissor (s16)
5. Periodontal scaler (13k6)
6. Courette (SPR1/2)
7. Periosteal elevator Prichard (PP5590)

8. Lip retractor
9. Periodontal probe (PCPUNC156)
10. Spitter holder
11. Surgical stripper (Swann-Morton 15C)
12. Disposable suction cannula
13. Straight and angular elevators
14. Extracting forceps
15. Suture through a 4/0 silk thread (Sweden & Martina)

SPECIFIC EQUIPMENT

1. Straight surgical handpiece Kavo SN04 and surgical burs (Komet) to carry out osteotomy and odontotomy
2. Angular elevators such as Barry or Heidbrink elevators (besides Hu –Friedy straight elevators)
3. Root forceps
4. Haemostatic forceps, which can be used to extract root rests after their complete luxation

SURGICAL TECHNIQUE:

1. Local-regional anaesthesia
2. Incision and elevation of the mucoperiosteal flap
3. Osteotomy
4. Odontotomy
5. Root luxation
6. Possible removal of the osseous interradicular septum
7. Regulation of the osseous edges
8. Suture by means of a silk thread 4/0 (Sweden & Martina)
9. Positioning of a wet gauze over the injure
10. Application of synthetic ice Easy- ice (Dispotec)

1.4 CYST EXCISION

ENUCLEATION: It is the complete cyst removal during a single operation.

The remaining osseous cavity heals spontaneously, with osseous regeneration thanks to an organisation mechanism of the original blood clot which forms during the post-surgical time.

BASIC EQUIPMENT:

1. Anaesthesia material (Carboplyna or Alfacaina SP 1/100.000)
2. Surgical pliers General (TP 50709)
3. Needle holder DR Simion (NH5024)
4. Curved scissor (s16)
5. Periodontal scaler (13k6)
6. Courette (SPR1/2)
7. Periosteal elevator Prichard (PP5590)
8. Lip retractor
9. Periodontal probe (PCPUNC156)
10. Stripper holder
11. Surgical spitter (Swann-Morton 15C)
12. Dispensable suction cannula
13. Suture through a 4/0 silk thread (Sweden & Martina)

SPECIFIC EQUIPMENT:

1. Rose head burs or fissure burs (Komet)
2. Surgical curette or straight or angular elevators
3. For radicular cysts which require an apicectomy excise with retrograde filling a specific equipment for endodontic surgery is needed (see retrograde endodontic treatment - apicectomy)
4. For keratocysts Carnoy cytotoxis solution.

SURGICAL TECHNIQUE:

1. Flap design

2. Flap elevation access osteotomy
3. Cyst cleavage
4. Cavity review
5. Haemostasis