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491 DEN

# CASE PRESENTATION

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# PATIENT HISTORY

## A- DEMOGRAPHIC DATA :

AGE : 20 years old

GENDER : Male

NATIONALITY: Saudi

SOCIOECONOMIC STATUS: Middle

OCCUPATION: University Student

MARITAL STATUS: Single



# CHIEF COMPLAINT :

“ I WANT TO FIX MY TEETH “

# HISTORY OF CHIEF COMPLAINT:

SEVERAL CARIOUS TEETH

# 36 ,46 PULP EXTIRPATION SINCE SIX MONTHS  
AGO



**MEDICAL HISTORY :**

**NO ABNORMALITY DEDICATED (NAD)**

**FAMILY HISTORY :**

**DIBETES MELLITUS (HIS MOTHER)**



# PAST DENTAL HISTOY:

PULP EXTIRPATION FOR # 36 AND 46

NO COMPLICATION WITH PREVIOUS LOCAL ANESTHESIA

NO HISTORY OF TEETH EXTRACTION



# DIET ANALYSIS :

EAT 2-3 MEALS PER DAY MOSTLY COMPOSED  
PROTIEN AND CARBOHYDRATE

# DENTAL CARE HABITS:

TOOTH BRUSH: Once a day

FLOSSING : None

MOUTH WASH : None

NON - SMOKER



# CLINICAL EXAMINATION :

## EXTRAORAL:

- Salivary glands and Muscles of mastication : within normal.
- TMJ : no clicking ,no tender, and no deviation.
- Lymph nodes : non-palpable and non-tender.
- Medium body built.
- Symmetrical face



# CLINICAL EXAMINATION

## INTRA ORAL EXAMINATION

### A - Soft tissues :

Labial mucosa , buccal mucosa , hard palate, soft palate , tongue and floor of mouth within normal

### B- Gingiva and periodontium :

1- Generalized accumulation of plaque

2- Gingiva: Rolled margin , Pointed IDP

- Pale Pink in color

- firm in consistency



# DENTITION:

#11 Slight Rotated

#45 Lingually tilted

#47 CL.I amalgam restoration

- Occlusion:

- Class I
- bilateral CL. I canine relationship
- VERTICAL OVER LAP= 3MM
- HORIZONTAL OVERLAP= 2MM

- Oral hygiene

- fair oral hygiene
- PLAQUE INDEX:55%
- BLEEDING INDEX: 30%



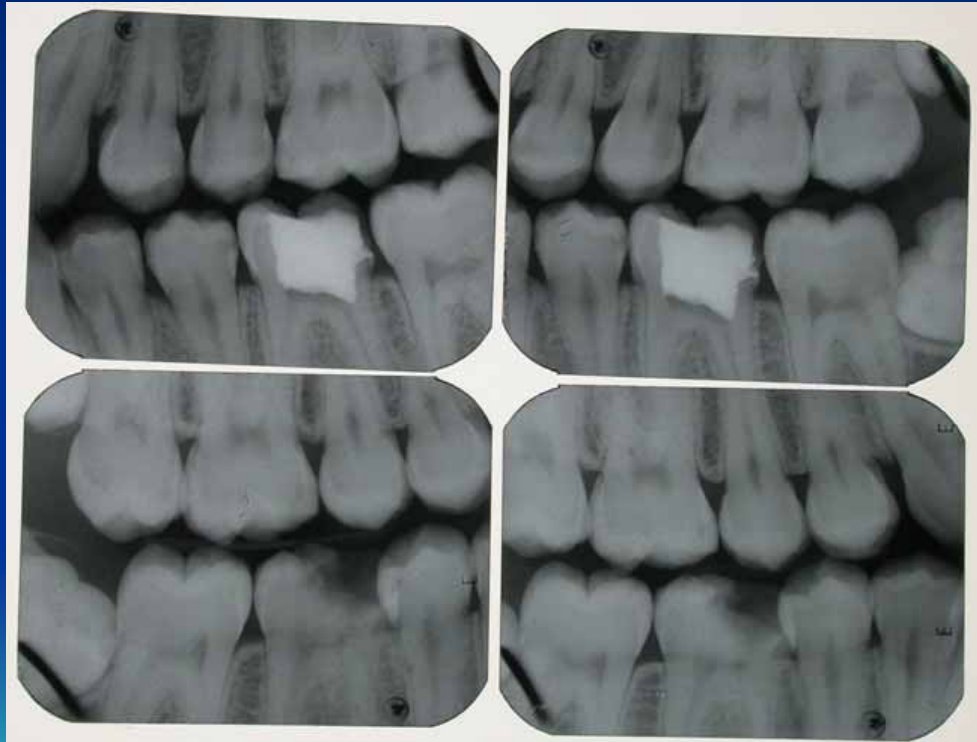
# RADIOGRAPHIC

1-Panoramic view:



# RADIOGRAPHIC

## 2- Bitewings:



# Supplementary examination

## Diagnostic casts •



# Diagnosis :

- Plaque induced Gingivitis
- Multiple carious teeth
- Pulp extirpated #36,46



# TREATMENT OBJECTIVES :

- 1 - Modify the behavior of the patient by motivating him to improve his oral hygiene .
- 2 - Restore the carious lesions.
- 3 - Restore function.

PROGNOSIS: GOOD



# TREATMENT PLAN

**Phase I (Disease control):**

**PERIO - TX •**

- 1 - case presentation to the patient.
- 2 - oral hygiene instructions including :
  - a-brushing technique : modified BASS .
  - b-brush type: soft
  - c-times:3 times daily
  - d-dental floss after each meal

# TREATMENT PLAN

Resto- phase: •

#	DENTAL PROBLEM	TREATMENT
17	OCCLUSAL CARIES	CL.I COMPOSITE
16	OCC.DISTAL CARIES	CL.II COMPOSITE
12	MESIAL CARIES	CL.III COMPOSITE
11	DISTAL CARIES	CL.III COMPOSITE
22	MESIAL CARIES	CL.III COMPOSITE
24	DISTAL CARIES	CL.II COMPOSITE
25	OCC. DISTAL CARIES	CL.II COMPOSITE
26	OCC.MESIAL CARIES	CL.II COMPOSITE
27	OCCLUSAL CARIES	CL.II COMPOSITE
44	OCCLUSAL CARIES	CL.I COMPOSITE
45	OCCLUSAL CARIES	CL.I COMPOSITE
47	OCCLUSAL CRIES	CL.I AMALGAM

# TREATMENT PLAN

Endo – TX:

RCT # 36



RCT #46



# TREATMENT PLAN

**Phase III (Definitive treatment):**

**Prefabricated POST # 46**

**MC CROWN:# 36, 46**



# TREATMENT PLAN

**Phase V (maintenance) :**

**1WEEK , 1 MONTHS , 6 MONTHS**



# TREATMENT DONE:



Before



After



