

## **Algorithm of student actions**

### **"Tuberal anesthesia"**

The student must:

1. say orally: it is necessary to carry out tubercular anesthesia
2. Say orally: the anesthesia zone of tubercular anesthesia:
3. Molars and premolars to the middle of 5 tooth
4. Mucous membrane on the buccal side and alveolar process from the molars to the middle of the 5th tooth
5. Wear gloves and treat your hands with antiseptic
6. Say orally, "Open your mouth not wide, please" and make the phantom half-open it's mouth
7. Pull the cheek to the side with a mirror or spatula
8. Treat the injection site with antiseptic
9. Perform applicational anesthesia (apply a small amount of anesthetic to the injection site)
10. Take a carpule syringe with a 35-40 mm needle
11. Locate the target point (Upper jaw tubercle)
12. Inject the needle at the level of the second molar, closer to the third, departing from the transitional fold 5mm
13. Push the needle at an angle of 45 degrees up 25 mm
14. Make an aspiration test
15. Release anesthetic
16. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Infraorbital anesthesia"**

The student must:

1. State orally: infraorbital anesthesia should be performed
2. State orally: the infraorbital anesthesia zone:
3. Lower eyelid
4. The wing of the nose and the lateral surface of the nose
5. Teeth, from half of the central incisor to half of the 5th tooth
6. Wear gloves and treat your hands with antiseptic
7. Say orally: "Put your head on the headrest, please" and fix the phantom in the headrest
8. Determine the location of the target point (infraorbital hole)
9. Pull the upper lip up with a dental mirror
10. Treat the injection site with antiseptic
11. Perform applicational anesthesia (apply a small amount of anesthetic to the injection site)
12. Take a carpule syringe with a needle of 41.5 mm
13. Insert the needle between the central and lateral incisors
14. Push the needle up to the target point
15. Make an aspiration test
16. Release anesthetic
17. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Mandibular anesthesia"**

The student must:

1. State orally: "Mandibular anesthesia anesthetizes 2 nerves":
2. -lower alveolar
3. -lingual
4. Wear gloves and treat your hands with antiseptic
5. Say orally, "Open your mouth wide, please" and open your phantom mouth wide
6. Treat the injection site with antiseptic
7. Perform applicational anesthesia (apply a small amount of anesthetic to the injection site)
8. Take a carpule syringe with a needle.
9. Palpate the retromolar fossa with the finger of the left hand
10. The finger is placed so that the nail feels the inner edge of the retromolar fossa (temporal crest)
11. The syringe should be located at the level of the opposite premolars
12. Inject the needle into the furrow between the pterygopalatal fold and the cheek, stepping up 1 cm from the masticatory surface of the lower molars
13. Push the needle into the soft tissue by 5 mm and release 0.5 ml of anesthetic to anesthetize the lingual nerve
14. Unroll the syringe to the incisors and push the needle another 2.5 cm into the soft tissue
15. Make an aspiration test
16. Release anesthetic
17. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Mental anesthesia"**

The student must:

1. State orally: you need mental anesthesia
2. Say orally: the mental anesthesia area:
3. Chin on the side of anesthesia
4. Lower lip on the side of anesthesia
5. Teeth: premolars, canines, incisors
6. Alveolar process on the vestibular side from the incisors to the premolars
7. Wear gloves and treat your hands with antiseptic
8. Say orally: "Put your head on the headrest, please" and fix the phantom in the headrest, the phantom's teeth should be closed
9. Pull the lower lip down with a dental mirror
10. Treat the injection site with antiseptic
11. Perform application anesthesia (apply a small amount of anesthetic to the injection site)
12. Take a carpule syringe with a 25 mm needle
13. Inject the needle below the transition fold in the area between the first and second lower premolars
14. Push the needle 1 cm down to the target point
15. Perform an aspiration test
16. Release anesthetic
17. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Torus anesthesia"**

The student must:

1. To say orally: "It is necessary to anesthetize 3 nerves:
  - lower alveolar
  - lingual
  - buccal
2. Say orally: "Torus anesthesia is used to anesthetize these nerves"
3. Wear gloves and treat hands with antiseptic
4. Say orally, "Open your mouth wide, please" and open your phantom mouth wide
5. Determine the location of the target point (Torus of the mandible)
6. Treat the injection site with antiseptic
7. Carry out application anesthesia (apply a small amount of anesthetic to the injection site)
8. Take a carpule syringe with a needle.
10. The syringe should be placed over the opposite molars
11. Inject the needle in front of the pterygopalatine fold, receding down 5 mm from the crown of the upper third molar
12. Push the needle into the soft tissue 15-20 mm to the bone
13. Perform an aspiration test
14. Release the anesthetic, anesthetize the buccal and inferior alveolar nerves
15. Pushing the needle a few mm from the soft tissues, release another 0.5 ml of anesthetic to anesthetize the lingual nerve
16. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Palatal anesthesia"**

The student must:

1. State orally: palatal anesthesia should be performed
2. State orally: palatal anesthesia anesthesia zone:
3. The mucous membrane of the hard palate from the posterior edge to the canine
4. Alveolar process on the palatal side from the third molar to the middle of the canine
5. Wear gloves and treat your hands with antiseptic
6. Say orally, "Open your mouth wide, please" and open the phantom's mouth
7. Determine the location of the target point (large palate)
8. Treat the injection site with antiseptic
9. Perform applicational anesthesia (apply a small amount of anesthetic to the injection site)
10. Take a carpule syringe with a 10 mm needle
11. Inject the needle into the mucous membrane of the hard palate 1 cm in front from the large palatine hole to the stop in the bone
12. Push the needle into the projection of the target point
13. Make an aspiration test
14. Release the anesthetic slowly
15. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"incisal foramen anesthesia"**

The student must:

1. State orally: incisional anesthesia should be performed
2. State orally: incisor anesthesia anesthesia zone:
3. The mucous membrane of the hard palate from canine to canine
4. Alveolar process from the palatal side from canine to canine
5. Wear gloves and treat your hands with antiseptic
6. Orally say, "Open your mouth wide and throw your head back, please" and lock the phantom in your headrest and open its mouth wide
7. Locate the target point (incisor)
8. Treat the injection site with antiseptic
9. Perform applicational anesthesia (apply a small amount of anesthetic to the injection site)
10. Take a carpule syringe with a 10 mm needle
11. Inject the needle from the side of the incisor papilla
12. Push the needle to the target point
13. Make an aspiration test
14. Release anesthetic
15. Remove the syringe needle from the soft tissue

## **Algorithm of student actions**

### **"Ligature bonding of teeth in the form of an eight according to Kazanian"**

The student must:

1. Say orally, "Please sit in the chair." And lock the phantom in the chair
2. Wear gloves
3. Treat your hands with antiseptic
4. Take a piece of ligature wire 6-8 cm long and a clamp Mykulych.
5. In the oral cavity, select 2 teeth closest to the fracture slit on the fragment of the mandible.
6. The wire is passed into the interdental spaces from the vestibular side to the oral so that it covers two included in the bandage of the tooth.
7. Then both ends of the wire are turned to the vestibular side, passing them through the gap between the teeth included in the bandage. In this case, one end is passed over the wire covering the teeth on the vestibular side, and the other - under it.
8. On the vestibular surface, the ends of the wire are twisted together.
9. The same bandage is applied to the teeth of the second fragment
10. The same bandage is applied to the antagonist teeth.
11. The wire fixed on the teeth of the upper and lower jaws is twisted together.
12. Cut off the excess with scissors on the metal
13. Bend the cut wires towards the cutting edge to avoid injury to the oral mucosa.



## **Algorithm of student actions**

### **«Ivy Intermaxillary Ligature Binding »**

The student must:

1. Say orally, "Please sit in the chair." And lock the phantom in the chair
2. Put on gloves
3. Treat hands with an antiseptic
4. Cut with scissors a piece of ligature wire about 10 cm long.
5. Bend this wire in the form of a pin so that one end is longer than the other by 2 cm.
6. At the blunt end of the "pin" with the help of cramp forceps form a loop with a diameter of about 0.2 mm.
7. Choose 2 teeth on the fragment of the mandible, located near the fracture fissure.
8. Using the Mykulych clamp, both ends of the wire are passed from the vestibular side to the oral side between the teeth included in the bandage.
9. The long end of the wire is returned to the vestibular surface through the interdental space located behind the loop, and passed through it.
10. The short end is brought to the vestibular side through the interdental space, located in front of the loop, and twisted with the long end.
11. The same bandage is applied to the teeth of the second fragment,
12. The same bandage is applied to the antagonist teeth.
13. The fragments are repositioned and fixed to the teeth of the upper jaw with a wire stretched in a loop of ligature bandage on each side.
14. Cut off the excess metal with scissors

## **Algorithm of student actions**

### **"Simple ligature bonding of teeth by Silverman"**

The student must:

1. Say orally, "Sit down, please." Lock the phantom in the chair
2. Wear rubber gloves
3. Treat hands with antiseptic
4. Visually select the tooth on the medial fragment of the mandible, located as close as possible to the fracture fissure.
5. Using the Mykulych clamp, wrap a 5-6 cm long ligature wire around the selected tooth, the ends of which are twisted on the vestibular side.
6. Similarly, fix the ligature on the tooth on the lateral fragment of the mandible.
7. The ligatures are connected by twisting
8. Similarly, fix the ligatures on the antagonist teeth of the upper jaw
9. Twist the ligatures together
10. Use twisting to connect the ligatures of the upper and lower jaws.
11. Bend the end of the wire to the cutting edge to avoid injury to the oral mucosa.

## Algorithm of student actions

### "Removal of third molars on the upper jaw"

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. State orally: "I am administering left or right tubercular anesthesia to the patient" (depending on which side the removal is performed)
9. Say orally: "I perform left or right palatal anesthesia on the patient" (depending on which side the removal is performed)
10. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
11. Choose from the available tools bayonet (bayonet) tongs with wide smooth cheeks that do not converge
12. Apply forceps to the crown of the tooth so that the cheeks of the forceps were superimposed on the buccal and palatal side of the tooth
13. Push the forceps to the neck of the tooth
14. Lock the tongs
15. Carry out luxation first in the vestibular side, then in the palate
16. Carry out traction (removal of a tooth from a hole)
17. Place the tooth and forceps in the tray
18. Take a curettage spoon
19. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
20. Apply a gauze swab to the socket of the removed tooth
21. Take the saliva ejector
22. give recommendations to the patient on postoperative care of a wound in house conditions:
  - a. do not rinse!
  - b. do not touch the socket of the removed tooth with your tongue
  - c. do not eat for 2 hours

## **Algorithm of student actions**

### **"Removal of the second premolar on the upper jaw"**

1. State orally: "The patient is shown tooth extraction №"
2. Wear gloves and treat your hands with antiseptic
3. State orally: "Please open your mouth"
4. Stand to the right of the phantom
5. Take a saliva ejector and attach it to the phantom's mouth
6. Treat the operating area with a gauze swab with antiseptic
7. Say orally: "I am administering right or left infraorbital anesthesia to the patient" (depending on which side the tooth will be removed)
8. Say orally: "I am administering right or left tubercular anesthesia to the patient" (depending on which side the tooth will be removed)
9. Say orally: "I am administering right or left palatal anesthesia to the patient" (depending on which side the tooth will be removed)
10. Grasp the alveolar process of the removed tooth from the vestibular and palatal side with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose from the available tools S-shaped pliers without spikes
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps are superimposed on the vestibular and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. Carry out luxation first in the vestibular side, then in the palate
17. Carry out traction (removal of a tooth from a hole)
18. Place the tooth and forceps in the tray
19. Take a curettage spoon
20. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
21. Apply a gauze swab to the hole of the removed tooth
22. Take the saliva ejector
23. To give recommendations to the patient on postoperative care of a wound in house conditions:
  - d. do not rinse!
  - e. do not touch the socket of the removed tooth with your tongue
  - f. do not eat for 2 hours

## Algorithm of student actions

### "Removal of molars on the upper right jaw"

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I will administer the patient right-sided tubercular anesthesia"
9. Say orally: "I will administer the patient right palatal anesthesia"
10. Grasp the alveolar process of the extracted tooth on the vestibular and palatal sides with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose the right S-shaped pliers with a spike from the available tools
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps are superimposed on the buccal and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. To carry out luxation at first in the vestibular direction, then towards the palate (if the first molar is removed (6 teeth) it is necessary to carry out luxation at first in the palatal party)
17. Carry out traction (removal of a tooth from the socket)
18. Place the tooth and forceps in the tray
19. Take a curettage spoon
20. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
21. Apply a gauze swab to the hole of the removed tooth
22. Take the saliva ejector
23. give recommendations to the patient on postoperative care of a wound in house conditions:
  - g. do not rinse!
  - h. do not touch the socket of the removed tooth with your tongue
  - i. do not eat for 2 hours

## **Algorithm of student actions**

### **"Removal of molars on the upper left jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I will administer the patient left-sided tubercular anesthesia"
9. Say orally: "I will administer the patient left palatal anesthesia"
10. Grasp the alveolar process of the extracted tooth on the vestibular and palatal sides with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose from the available tools left S-shaped pliers with a spike
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps were superimposed on the buccal and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. To carry out luxation at first in the vestibular party, then in the palate (if the first molar is removed (6 teeth) it is necessary to carry out luxation at first in the palatal party)
17. Carry out traction (removal of a tooth from a hole)
18. Place the tooth and forceps in the tray
19. Take a curettage spoon
20. Carry out an audit of the socket (removal of pieces of alveoli and granulations)
21. Apply a gauze swab to the hole of the removed tooth
22. Take the saliva ejector
23. give recommendations to the patient on postoperative care of a wound in house conditions:
  - j. do not rinse!
  - k. do not touch the socket of the removed tooth with your tongue
  - l. do not eat for 2 hours

## **Algorithm of student actions**

### **"Removal of premolars on the upper jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I am administering right or left infraorbital anesthesia to the patient" (depending on which side the tooth will be removed)
9. Say orally: "I am administering right or left palatal anesthesia to the patient" (depending on which side the tooth will be removed)
10. Grasp the alveolar process of the extracted tooth on the vestibular and palatal sides with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose from the available tools S-shaped pliers without spikes
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps were superimposed on the vestibular and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. Carry out luxation first in the vestibular side, then in the palate
17. Carry out traction (removal of a tooth from a hole)
18. Place the tooth and forceps in the tray
19. Take a curettage spoon
20. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
21. Apply a gauze swab to the hole of the removed tooth
22. Take the saliva ejector
23. give recommendations to the patient on postoperative care of a wound in house conditions:
  - m. do not rinse!
  - n. do not touch the hole of the removed tooth with your tongue
  - o. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Removal of premolars on the lower jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Put on gloves
3. Treat hands with antiseptic

4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I give the patient left or right torus anesthesia and / or mandibular + buccal"
9. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
10. Choose from the available tools beak-shaped tongs without spikes with wide cheeks
11. Apply forceps to the crown of the tooth so that the cheeks of the forceps were superimposed on the buccal and lingual side of the tooth
12. Push the forceps to the neck of the tooth
13. Lock the tongs
14. Carry out luxation first in the vestibular side, then in the lingual
15. Carry out traction (removal of a tooth from a hole)
16. Place the tooth and forceps in the tray
17. Take a curettage spoon
18. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
19. Apply a gauze swab to the hole of the removed tooth
20. Take the saliva ejector
21. give recommendations to the patient on postoperative care of a wound in house conditions:
  - p. do not rinse!
  - q. do not touch the hole of the removed tooth with your tongue
  - r. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Removal of incisors on the upper jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic



4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I will perform right or left infraorbital anesthesia on the patient"  
(both are performed to remove the central incisors)
9. Say orally: "I give the patient incisional anesthesia"
10. Grasp the alveolar process of the extracted tooth on the vestibular and palatal sides with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth  
(removal of the circular ligament of the tooth)
12. Choose straight pliers from the available tools
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps are superimposed on the vestibular and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. Carry out luxation first in the vestibular side, then in the palate
17. Rotate
18. Carry out traction (removal of a tooth from a hole)
19. Place the tooth and forceps in the tray
20. Take a curettage spoon
21. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
22. Apply a gauze swab to the hole of the removed tooth
23. Take the saliva ejector
24. give recommendations to the patient on postoperative care of a wound in house conditions:
  - s. do not rinse!
  - t. do not touch the hole of the removed tooth with your tongue
  - u. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Removal of incisors and canines on the lower jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Put on gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic

8. Say orally: "I give the patient mental anesthesia / or mandibular + buccal / or torus" (when removing the central incisors, bilateral anesthesia should be performed)
9. Grasp the alveolar process of the removed tooth from the vestibular and lingual side with the thumb and forefinger
10. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
11. Choose from the available tools beak-shaped tongs without spikes
12. Apply forceps to the crown of the tooth so that the cheeks of the forceps are superimposed on the vestibular and lingual side of the tooth
13. Push the forceps to the neck of the tooth
14. Lock the tongs
15. Carry out luxation first in the vestibular side, then in the lingual
16. Rotate
17. Carry out traction (removal of a tooth from a hole)
18. Place the tooth and forceps in the tray
19. Take a curettage spoon
20. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
21. Apply a gauze swab to the hole of the removed tooth
22. Take the saliva ejector
23. To give recommendations to the patient on postoperative care of a wound in house conditions:
  - v. do not rinse!
  - w. do not touch the socket of the removed tooth with your tongue
  - x. do not eat for 2 hours

## Algorithm of student actions

### "Removal of third molars on the lower jaw"

1. Say orally: "The patient is shown tooth extraction №"
2. Put on gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right and behind the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I give the patient left or right torus anesthesia and / or mandibular + buccal"
9. Grasp the thumb and forefinger of the alveolar process of the removed tooth from the buccal and lingual side
10. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
11. Choose from the available tools tongs with spikes curved in the plane
12. Apply forceps to the crown of the tooth so that the cheeks of the forceps were superimposed on the buccal and lingual side of the tooth
13. Push the forceps to the neck of the tooth
14. Lock the tongs
15. Carry out luxation first in the oral side, then in the buccal side
16. Carry out traction (removal of a tooth from a hole)
17. Place the tooth and forceps in the tray
18. Take a curettage spoon
19. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
20. Apply a gauze swab to the hole of the removed tooth
21. Take the saliva ejector
22. To give recommendations to the patient on postoperative care of a wound in house conditions:
  - y. do not rinse!
  - z. do not touch the socket of the removed tooth
  - aa. do not eat for 2 hours

## **Algorithm of student actions**

### **"Removal of canines on the upper jaw"**

1. Say orally: "The patient is shown tooth extraction №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I am administering right or left infraorbital anesthesia to a patient"
9. Say orally: "I give the patient incisional anesthesia"
10. Grasp the alveolar process of the extracted tooth on the vestibular and palatal sides with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose straight pliers and / or S-shaped tools from the available tools
13. Apply forceps to the crown of the tooth so that the cheeks of the forceps are superimposed on the vestibular and palatal side of the tooth
14. Push the forceps to the neck of the tooth
15. Lock the tongs
16. Carry out luxation first in the vestibular side, then in the palate
17. Rotate
18. Carry out traction (removal of a tooth from a hole)
19. Place the tooth and forceps in the tray
20. Take a curettage spoon
21. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
22. Apply a gauze swab to the hole of the removed tooth
23. Take the saliva ejector

24. To give recommendations to the patient on postoperative care of a wound in house conditions:
- bb. do not rinse!
  - cc. do not touch the socket of the removed tooth
  - dd. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Discovery of periodontal abscess"**

The student must:

1. Say orally, "Sit in the chair, please." Lock the phantom in the chair
  - when opening a periodontal abscess on the upper jaw, the patient is in a reclining chair, head slightly tilted. The doctor stands to the right and in front of the patient. The patient's upper jaw is located at the level of the doctor's shoulder joint;
  - When opening a periodontal abscess on the lower jaw, the patient is in a chair in a sitting position, his head is in a vertical position. The doctor stands in front and to the right of the patient. The patient's lower jaw is at the level of the elbow joint of the lowered hand of the doctor.
2. Conduct local anesthesia
3. Carry out local infiltration anesthesia
4. Treat the operating area with a gauze swab with antiseptic
5. Secure the saliva ejector
6. Farabef's hook removes the cheek or lip;
7. The doctor holds a sharp scalpel with his hand so that its tip is directed to the surface of the bone (perpendicular)
8. Dissect the mucous membrane
9. Dissect the periosteum, starting from the distal inflammatory infiltrate (abscess) and ending with its medial border, while the tip of the scalpel slides on the bone
10. Spread (after opening) the tissue with a clamp Mykulych or raspator;
11. The contents of the periodontal abscess are evacuated;
12. The wound is washed with a solution of furacillin with hydrogen peroxide;

13. A rubber graduate (drainage) is injected into the wound.

### **Algorithm of student actions**

#### **"Removal of the root on the upper jaw with a straight elevator"**

1. Say orally: "The patient is shown the removal of the tooth root №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I am administering left infraorbital anesthesia to a patient"
9. Say orally: "I give the patient incisive anesthesia"
10. Grasp the alveolar process of the removed tooth from the vestibular and palatal side with the thumb and forefinger
11. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
12. Choose a direct elevator from the available tools.
13. Take the elevator in hand so that the index finger is located on the connecting rod near the cheek
14. Apply the elevator on the palatal side so that the working (concave) part is directed to the surface of the root, and the convex part is directed to the wall of the hole.
15. Rotate the elevator into the periodontal slit with rotational movements around its axis
16. Leaning on the edge of the hole (like a lever) dislocate the root
17. Remove the root from the hole with forceps or tweezers
18. Place the root and tool in the tray
19. Take a curettage spoon
20. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
21. Remove the saliva ejector
22. Apply a gauze swab to the hole of the removed tooth
23. give recommendations to the patient on postoperative care of a wound in house conditions:
  - ee. do not rinse!
  - ff. do not place your tongue into the hole of the removed tooth
  - gg. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Removal of molar roots on the lower jaw with an angular elevator"**

1. Say orally: "Patient shown to remove tooth root №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the patient
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. Say orally: "I conduct anesthesia to the patient"
9. Grasp the alveolar process of the removed root from the vestibular and lingual side with the thumb and forefinger
10. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
11. Choose an angle elevator from the available tools.
12. Take the elevator in hand so that the index finger is located on the connecting rod near the cheek
13. Place the elevator in an empty hole so that the working (concave) part is directed to the root, and the convex part is directed to the wall of the hole. (for the medial root on the right and the distal root on the left the elevator "from itself" is used, for the distal root on the right and the medial left - the elevator "on itself")
14. Rotating movements around its axis on itself, or on itself (depending on which elevator was chosen) to dislocate the root with part of the inter-root septum
15. Remove the root from the hole with forceps or tweezers
16. Place the root and tool in the tray
17. Take a curettage spoon
18. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
19. Take the saliva ejector

20. Apply a gauze swab to the hole of the removed tooth
21. To give recommendations to the patient on postoperative care of a wound in house conditions:
  - hh. do not rinse!
  - ii. do not touch the hole of the removed tooth
  - jj. do not eat for 2 hours

### **Algorithm of student actions**

#### **"Removal of roots on the upper jaw with Bayonet forceps"**

1. Say orally: "Patient shown to remove tooth root №"
2. Wear gloves
3. Treat hands with antiseptic
4. Say orally: "Please open your mouth"
5. Stand to the right of the phantom
6. Take a saliva ejector and attach it to the phantom's mouth
7. Treat the operating area with a gauze swab with antiseptic
8. To say orally: "I conduct anesthesia to the patient"
9. Grasp the alveolar process near the removable tooth root on the vestibular and palatal sides with the thumb and forefinger
10. Take a trowel and perform a syndesmotomy around the neck of the tooth (removal of the circular ligament of the tooth)
11. Choose from the available tools Bayonet tongs
12. Apply forceps to the root of the tooth so that the cheeks of the forceps are superimposed on the vestibular and palatal side of the tooth
13. Push the forceps under the gingival margin to the alveolar bone
14. Fix the tongs on the root surface
15. Carry out luxation first in the vestibular side, then in the palate



16. Carry out traction (removal of the root from the hole)
17. Place the root and tongs in the tray
18. Take a curettage spoon
19. Carry out an audit of the hole (removal of pieces of alveoli and granulations)
20. Apply a gauze swab to the hole of the removed tooth
21. Take the saliva ejector
22. To give recommendations to the patient on postoperative care of a wound in house conditions:
  - kk. do not rinse!
  - ll. do not touch the hole of the removed tooth
  - mm. do not eat for 2 hours