

ANNOOR DENTAL COLLEGE
DEPARTMENT OF ORAL MEDICINE AND
RADIOLOGY

Special Cases

1.DENTURE STOMATITIS

Chief complaint

Patient complaints of decay on the upper left back tooth region since 6 months.

History of presenting illness

- Patient notices decay on the upper left back tooth region since 6 months.
- Patient had redness in the upper left palate region since a 2 weeks.
- Patient is referred from the Department of Oral and Maxillofacial Surgery for the evaluation of the palate area.
- Patient had a history of wearing a removable denture since 1 year.
- Patient had a history of burning sensation in the region in exposure to hot and spicy food .



Diagnosis

- Denture stomatitis irt 23,24,25
- Dentinal caries irt 27,28,38
- Chronic irreversible pulpitis irt 26,47,46
- Missing teeth irt 25

Treatment

- Topical Application: Candid mouth paint 1-1-1 x 14 days
- Advised to discontinue the use of denture.

2.ANKYLOGLOSSIA

Chief complaint

Patient complaints of dislodged restoration on right back tooth region since 6 months

History of presenting illness

- Patient notices dislodged restoration on right back tooth region since 6 months.
- Patient has history of pain on the lower right back teeth region .
- No history of swelling and bad breath. Patient also presents with reddened ulcerated area on the lower gum region.



Diagnosis

- Tongue tie
- Proximal caries irt 14,16
- Chronic irreversible pulpitis irt 46

Treatment

- Frenectomy
- Endodontic evaluation irt 46
- Restoration irt 14,16

3.PAN CHEWERS MUCOSA

Chief complaint

Patient complaints of loose tooth in the right upper back tooth region since 2 weeks

History of presenting illness

Patient notices loose tooth in the right upper back tooth region since 2 weeks.

Patient has history of pain and bleeding on brushing.



Diagnosis

- Pan chloasma mucosa with OSMF
- Localized periodontitis I.r.t 15
- Cervical abrasion I.r.t 14
- Chronic generalized gingivitis

Treatment

- Habit cessation
- Perio consultation
- Restoration i.r.t 14

4. TRAUMATIC FIBROMA

Chief complaint

Patient complaints of stains and deposits on the upper and lower teeth region since 6 months

History of presenting illness

- Patient complaints of stains and deposits on the upper and lower teeth region since 6 months
- Patient had a history of frequent biting on the left cheek due to malaligned upper front tooth.
- History of swelling on left cheek area.



Diagnosis

- Chronic generalized gingivitis
- Traumatic fibroma on left buccal mucosa

Treatment

- Oral prophylaxis
- Surgical excision of fibroma

5.PYOGENIC GRANULOMA

Chief complaint

Patient complaints of fractured teeth on upper right back tooth region since 1 week.

History of presenting illness

- Patient complaints of fractured teeth on upper right back tooth region since 1 week.
- Patient has history of pain ,bleeding and pus discharge.
- No history of swelling and bad breath.



Radiographic investigation

- A size 2 IOPA radiograph of maxillary arch showing 15,16,17 completely with tooth of interest 16 showing a coronal radiolucency involving pulp irt 16 which is a root canal treated tooth.

Diagnosis

- Pyogenic granuloma irt 16
- Missing teeth irt 35

Treatment

- Extraction irt 16 with biopsy of the lesion
- Prosthetic rehabilitation irt 35

6. IMPACTED CANINE

Chief complaint

Patient complaints of dislodged cap in the upper left front teeth region since 1 day.

History of presenting illness

- Patient notices dislodged cap in the upper left front teeth region since 1 day.
- Patient had a history of root canal treatment in the upper front teeth region 1 year back.
- Patient also noticed a spacing in upper front teeth region which is not associated pain or swelling.



Radiographic investigation

- A size 2 IOPA radiograph of maxillary arch showing 22,23,24,25 completely with tooth of interest 22,24,25 suggestive of **impacted canine** irt 23 and chronic irreversible pulpitis irt 22,24,25
- A size 2 IOPA of mandibular arch showing 47,46,45,44 with tooth of interest 47 suggestive of chronic irreversible pulpitis irt 47.

Diagnosis

- IMPACTED CANINE (Class 1) irt 23
- Chronic irreversible pulpitis irt 22,24,47

Treatment

- Surgical extraction irt 23
- Endodontic consultation irt 22,24,47

7. SMOKERS PALATE

Chief complaint

- Patient complains of pain in the lower right back tooth region since 3 days.

History of presenting illness

- Patient notices intermittent pain in the lower right back tooth region since 3 days.



DIAGNOSIS

- Deep dentinal caries i.r.t 47
- Leukoedema i.r.t right and left buccal mucosa
- Smokers palate
- Chronic generalized gingivitis

TREATMENT

- Restoration i.r.t 47
- Oral prophylaxis
- Habit cessation

8. MICRODONTIA

Chief complaint

- Patient complains of stains and deposits in the upper and lower back tooth region since 6 months.

History of presenting illness

- Patient notices stains and deposits in the upper and lower back tooth region since 6 months.
- No bleeding while brushing is noticed



DIAGNOSIS

- Chronic generalized gingivitis
- Pit and fissure caries i.r.t 36,37,38,47,48
- Microdontia i.r.t 18,28

TREATMENT

- Oral prophylaxis
- Restoration i.r.t 36,37,38,47,48

9. LEUKOPLAKIA

Chief complaint

- Patient complains of loose tooth in the lower right back tooth region since 1 week

History of presenting illness

- Patient notices loose tooth in the lower right back tooth region since 1 week



DIAGNOSIS

- Localized periodontitis i.r.t 45
- Chronic generalized gingivitis
- Leukoplakia in the left and right buccal mucosa

TREATMENT

- Perio consultation and oral prophylaxis

10 GINGIVAL POLYP

Chief complaint

— Patient complaints of pain in the lower right back tooth region since 2 years

History of presenting illness

Patient notices pain in the lower right back tooth region since 2 years

Patient notices bleeding



Diagnosis

Gingival polyp wrt 45
Enamel caries wrt 46,17,26

Treatment

- Surgical removal of polyp wrt 45
- Restoration wrt 46,17,26

11 EROSSIVE LICHEN PLANUS

Chief complaint

Patient complaints of ulcer in lower back tooth region

History of patient illness

- Patient notices loss of skin on lower back tooth region
- Patient feels pain on brushing



Diagnosis

EROSIVE LICHEN PLANUS

Treatment

- T/A CLOTRIMAZOLE. 1% 1-1-1
- T/A TRIAMCINOLONE ACETONIDE 0.1% 1-1-1
- Tab. Cholecalciferol+ methyl cobalamin + Retinol + selenium 1-0-0
- Patient recall after 1 week

12 PAROTID PAPPILLITIS

CHIEF COMPLAINT

Patient complains of decayed teeth in the upper right back tooth region since few months

HISTORY OF PRESENTING ILLNESS

Patient notices decayed teeth in the upper right back tooth region since few months



DIAGNOSIS

- Chronic generalized periodontitis
- Inflamed parotid papilla
- Proximal caries irt 25

TREATMENT PLAN

- Prosthetic consultation for rehabilitation planning
- Surgical consultation irt 13,15,16,33
- Restoration irt 25

13 TRAUMATIC KERATOSIS

CHIEF COMPLAINT

- Patient complaints of decay in the lower back tooth region since few days.

HISTORY OF PRESENTING ILLNESS

- Patient complaints of decay in the lower back tooth region since few days.
- Patient notices bad breath



DIAGNOSIS

- Chronic generalized gingivitis
- Traumatic keratosis irt 18
- Impacted tooth irt 28, 38, 48.

TREATMENT PLAN

- PERIOCONSULTATION AND ORAL PROPHYLAXIS
- SURGICAL CONSULTATION IRT 28,38,48 .

14 TALON'S CUSP

CHIEF COMPLAINT

Patient complains of stains and deposits irt upper and lower front teeth region since 6 months.

HISTORY OF PRESENTING ILLNESS

Patient notices stains and depositis irt upper and lower front teeth region since 6 months.
Patient has no associated pain or bleeding .



DIAGNOSIS

- Chronic generalized gingivitis
- Talon's cusp irt 21

TREATMENT PLAN

- Oral prophylaxis

15.MESIODENS

CHIEF COMPLAINT:

PATIENT COMPLAINTS HAVING AN EXTRA TEETH IN THE UPPER FRONT TOOTH REGION

HISTORY OF PRESENTING ILLNESS

- PATIENT NOTICES HAVING AN EXTRA TEETH IN THE UPPER FRONT TOOTH REGION
- HE IS CONCERNED ABOUT THE AESTHETICS.



DIAGNOSIS

MESIODENS IRT 11 21

TREATMENT

SURGICAL EXTRACTION OF THE MESIODENS IRT 11,21

16.PARAMOLAR

CHIEF COMPLAINT

PATIENT COMPLAINTS OF DECAY IN THE LOWER LEFT BACK TOOTH REGION SINCE 2 WEEKS

HISTORY OF PRESENTING ILLNESS

PPATIENT NOTICES DECAY IN THE LOWER LEFT BACK TOOTH REGION SINCE 2 WEEKS.HISTORY OF PAIN AND SENSITIVITY.



DIAGNOSIS

DEEP DENTINAL CARIES IRT 36

PARAMOLAR IRT.17

TREATMENT

RESTORATION IRT 36

SURGICAL EXTRACTION OF PARAMOLAR IRT 17

17. MORSICATIO BUCCARUM

Chief complaint

- Patient complains of stains and deposits in the lower back tooth region since 1 year.

History of presenting illness

- Patient notices stains and deposits in the lower back tooth region since 1 year
- No bleeding on brushing
- Patient notices bad breath



Diagnosis

- Chronic generalized gingivitis
- Morsicatio Buccarum
- Morsicatio Labiorum
- Pit and fissure caries i.r.t 46,47

Treatment

- Habit cessation
- Perio consultation and oral prophylaxis
- Coronoplasty i.r.t 34,35,36,37,44,45,46,47,48
- Restoration i.r.t 46,47

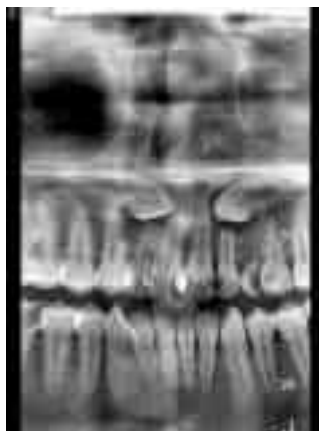
18. IMPACTED LATERALS

Chief complaint

- Patient complains of recurrent decay in the upper front tooth region since 2 years.

History of presenting illness

- Patient notices recurrent decay in the upper front tooth region since 2 years



Diagnosis

- Impacted teeth 12,22
- Deep dentinal caries 46
- Chronic generalized gingivitis

Treatment

- Disimpaction 12,22
- Restoration 46
- Oral prophylaxis

19. OSTEORADIONECROSIS

Chief complaint

- Patient complains of swelling on lower left back tooth region since 2 weeks

History of presenting illness

- Patient notices of swelling on lower left back tooth region since two weeks.
- Patient also notices of discomfort while chewing



Diagnosis

- Osteoradionecrosis/ Osteomyelitis
- Cervical abrasion i.r.t 16,45

Treatment

- OMFS consultation (curettage biopsy)
- Restoration i.r.t 16,45

20. SQUAMOUS CELL CARCINOMA

Chief complaint

Patient complains of ulceration in the left cheek region for 1 month.

History of presenting illness

- Patient notices ulceration in the left cheek region for 1 month.
- Patient notices pain that is continuous throughout the day & it elevates while touching and having food.
- Patient notices the beginning of this ulceration as a small patch, and eventually it grows in size



Diagnosis

1. Carcinoma of left buccal mucosa

Treatment

- Surgical excision
- Radiation therapy

MAXILLARY COMPLETE DENTURE AND MANDIBULAR TOOTH SUPPORTED OVERDENTURE

Chief complaint :wants replacement of missing teeth with removable prosthesis

Procedure – maxillary complete denture and mandibular tooth supported over denture



STABILIZATION SPLINT

Chief complaint : 33 yr old female complaints of pain
in right and left TMJ

Procedure –stabilization splint



NON RIGID CONNECTOR

Chief complaint -53 yr old male pt complaints of missing teeth irt upper back tooth
Procedure – fixed partial denture with non rigid connector



FULL ARCHED FIXED DENTAL PROSTHESIS

Chief complaint : 72 yr olde pt wants replacement of missing teeth with fixed prosthesis
Procedure: full arch fixed partial denture



11/F

CHIEF COMPLAINT: PATIENT COMPLAINTS OF MISSING TEETH IN UPPER FRONT TEETH REGION SINCE 3 YEARS

CLINICAL FINDING: DIALCERATION SEEN WRT 11 AS A SEQUELAE TO TRAUMATIC INTRUSION OF PRIMARY TEETH

TREATMENT DONE:EXTRACTION OF 11 DONE UNDER LOCAL ANESTHESIA





DEPT.OF CONSERVATIVE DENTISTRY AND ENDODONTICS

**ANNOOR DENTAL COLLEGE AND
HOSPITAL MUVATTUPUZHA**

SPECIAL CASES DONE –AUGUST 2026

CASE NO.1 – MANAGEMENT OF MIDLINE DIASTEMA WITH VENEERS

Chief complaint :Patient complaints spacing of upper anterior tooth

Treatment done : Veneer fabrication irt 11 21 (Diastema closure)



PRE OP



SHADE SELECTION



TOOTH PREPARATION



IMPRESSION



TRY IN



BONDING



POST OP

CASE NO.2-ENDODONTIC MANAGEMENT OF TOOTH WITH OPEN APEX WITH BIOACTIVE SCAFFOLD

Chief complaint–Fractured upper anterior teeth since 1 month
 Treatment done – Endodontic management of tooth with open apex using bioactive scaffold: PRF and PRF - bone graft internal matrix irt11



PRE OP



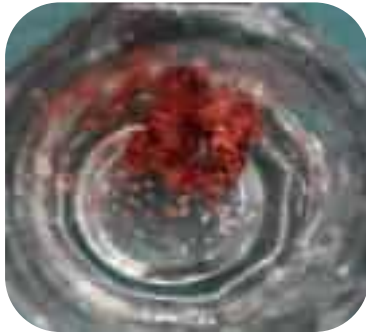
AO DONE CANAL
 ENLARGEMENT DONE UP
 TO 80 K FILE



PRF



OSSEOUS
 GRAFT



OSSEOUS
 GRAFT WITH
 PRF



APICAL 5MM
 MTA PLUG



POST
 &CORE



TOOTH
 PREPERATION



1 MONTH
 FOLLOW
 UP

CASE NO.3 –RESTORATIVE MANAGEMENT OF DISCOLOURATION AND ENAMEL DEFECT WITH COMPOSITE ONLY

Chief complaint-Discolouration and enamel defect irt46

Procedure-Composite overlay irt 46



Preop Image



Preop Radiograph



Composite Build Up



Tooth Preparation



Etching



Silane Application



Overlay Cementation



Post Op Image

CASE NO.4 – MANAGEMENT OF DISCOLOURATION OF ANTERIOR TEETH WITH NON VITAL BLEACHING TECHNIQUE

Chief complaint-Discolouration irt 11,12

Proedure-RCT Followed by intracoronal bleaching irt 11,12



Preop radiograph



WL determination



Master cone placement



Obturation



2 mm below CEJ



Preop image



Placement of intracoronary barrier



Placement of bleaching agent and temporary restoration



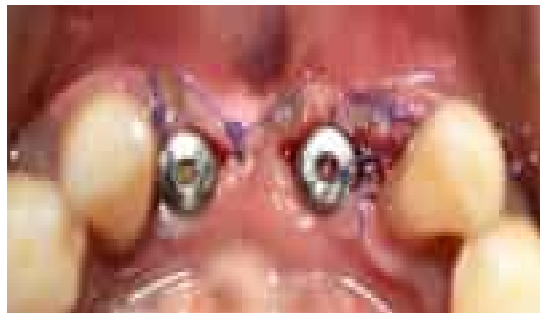
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DEPARTMENT OF PERIODONTICS AND IMPLANTOLOGY
SPECIAL CASES AUGUST 2026

RANI GANESH OP NO. 10557/26

PATIENT RECALLED FOR SECOND STAGE IMPLANT SURGERY. ON EXAMINATION PATIENT DIAGNOSED WITH INADEQUATE KERATINIZED GINGIVA UNDERWENT SECOND STAGE IMPLANT SURGERY WITH VESTIBULOPLASTY USING KAZHANJANS TECHNIQUE.





PT NAME: ANJU

AGE/SEX:26/F

OP NUMBER:1493/26

GUMMY SMILE CORRECTION USING ESTHETIC CROWN LENGTHENING AND LIP REPOSITIONING.

PATIENT COMPLAINS OF GUMMY SMILE CORRECTED USING INTERNAL BEVEL GINGIVECTOMY AND LIP REPOSITIONING AND SUTURING DONE USING VICRYL SUTURES



DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

- 15 years old male patient came to the department with chief complaint of forwardly placed upper front teeth. Angle's Class II Subdivision malocclusion with Edge to Edge canine relation on the right and left side with Class II incisor relation. Proclination and mild spacing in upper anteriors. Proclination and mild crowding in lower arch. on class II skeletal jaw base with Average growth pattern. Treatment plan was Fixed appliance therapy, PAE MBT 0.022 along with fixed functional appliance ADVANSYNC 2 for the correction of retrognathic mandible



Fixed appliance therapy along with Advansync 2 fixed functional appliance

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

- *11 years old male patient referred from Dept of Pedodontics for the treatment of constricted upper arch.. Angle's Class I malocclusion with class I molar relation on the right and left side, canine relation cant be assessed on the right and left side with Class I incisor relation. Mild Proclination and spacing irt upper anteriors. Retroclination and spacing irt to lower arch. Deciduous teeth irt 73,74,75,83,84,85, 53,54,55,63,64,65 Treatment plan was 3-D expansion appliance for expansion of upper arch,Expansion with jackscrew for expansion of lower arch,Fixed appliance therapy, PAE MBT 0.022 to be done later.*



3D expansion appliance in upper arch and expansion appliance in lower arch

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

- 15 years old male patient came to the department with chief complaint of malaligned upper and lower front teeth. British Incisor relation Class I with Class I canine relation on the left side ,on a skeletal class I with vertical growth pattern, Proclination and crowding irt upper and lower arch. Cross bite irt 16,17,26 and 27. rotation irt 43.cross bite irt 43,12 and Highly placed 13. Upper midline shifted to right by 3mm.Treatment plan was Bondable Rapid maxillary Expansion appliance for expansion of upper arch followed by fixed appliance therapy, PAE MBT 0.022.



Rapid maxillary Expansion

DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS

13 years old male patient came to department with the complaints of forwardly placed lower front teeth. Patient has Super Class I molar relation on both sides with Class I canine relation on left sides and Cross bite canine relation irt 13,43, Anterior Crossbite, Proclination of upper anteriors, mild crowding of upper anteriors and lower midline shift towards right side by 2mm on Class III skeletal jawbase with horizontal growth pattern Treatment plan was Phase 1- Facemask therapy with RME , Phase 2- Fixed appliance therapy.



RME with Facemask therapy

Annoor Dental College and Hospital

Department of OMFS

**Special Cases
August 2026**

56 yr/Male

Chief Complaint: Pain and swelling in the left palatal region

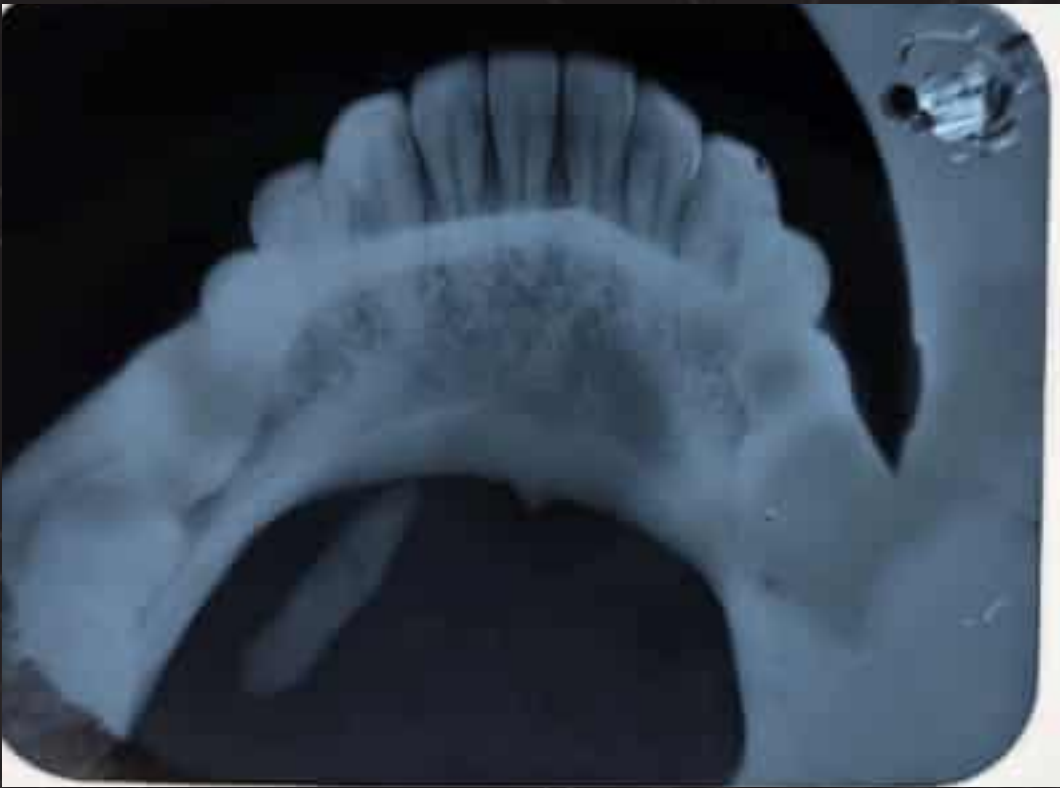
Procedure: Extraction of 24 and incision and drainage under LA



23 yr/Male

Chief Complaint: pain while eating food

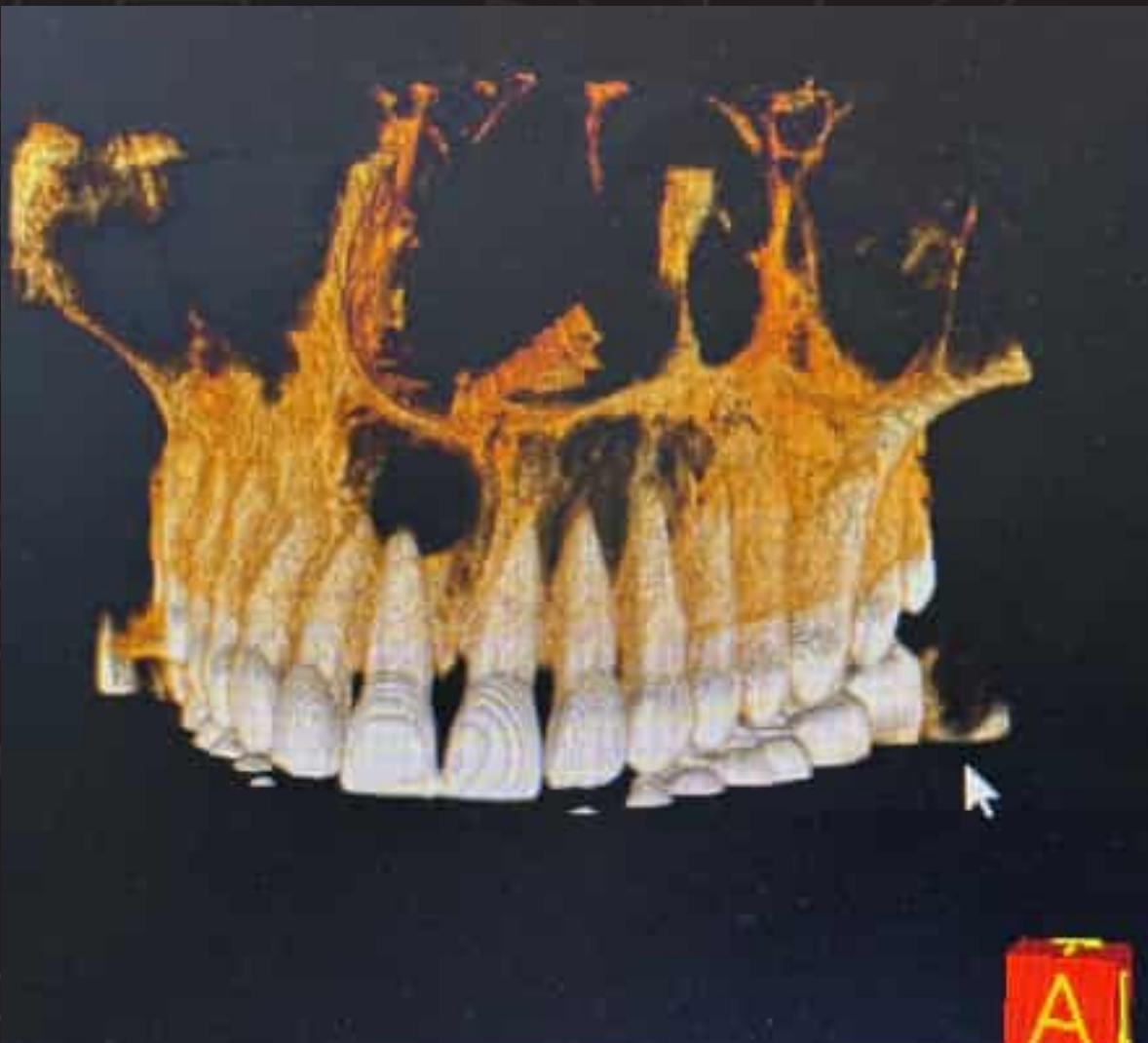
Procedure: Sialolith removed from submandibular gland duct



35 yr/Male

**Chief Complaint: pus discharge
from the anterior maxilla**

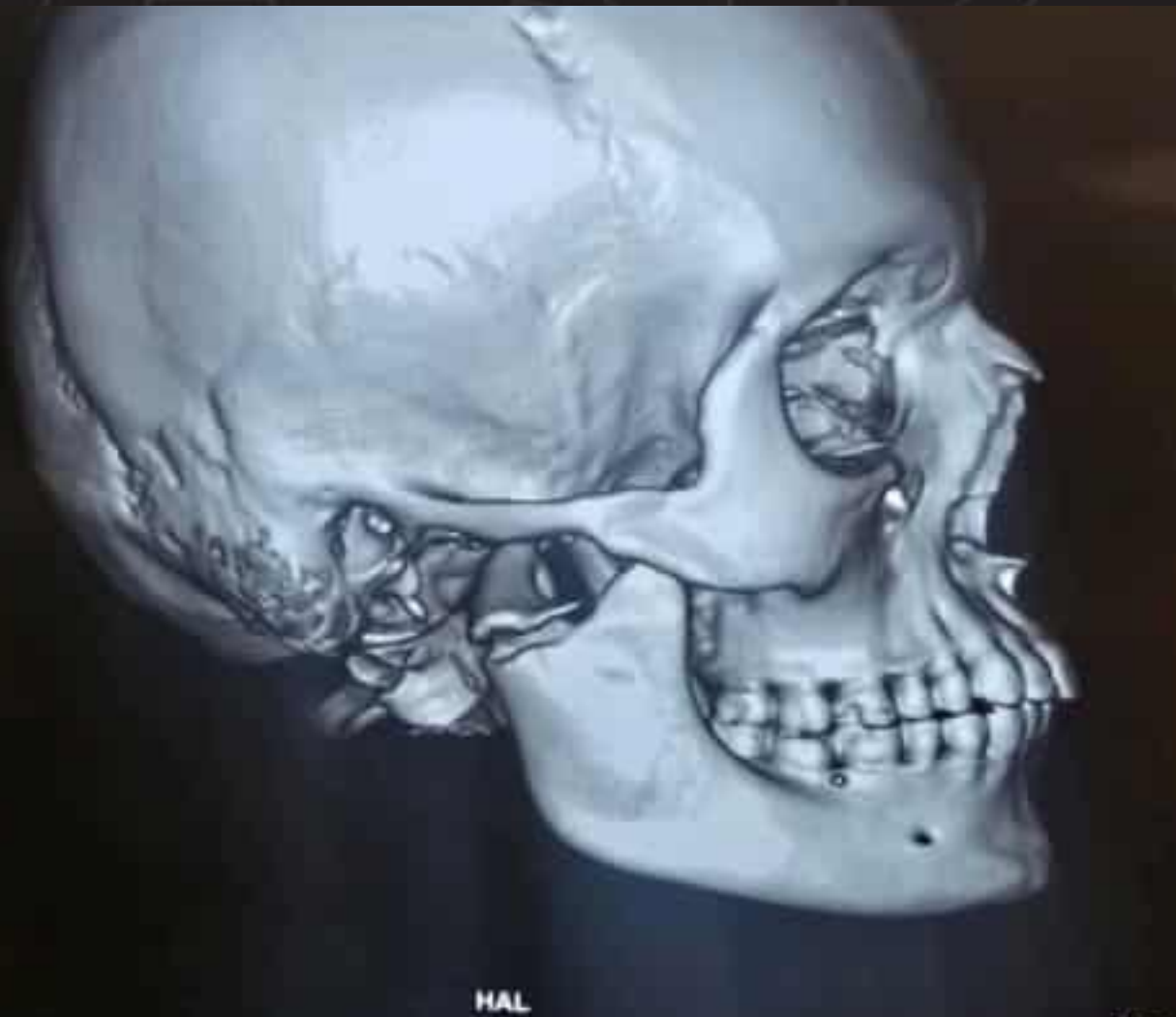
**Procedure: Cyst enucleation
under GA**



25yr/ Female

Chief Complaint: Right condylar fracture following RTA

Procedure: Open reduction and fixation under GA





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DEPARTMENT OF PUBLIC HEALTH DENTISTRY

REPORT for August 2026

1. **Oral health screening and treatment Camp** was held on **9th August 2026** at Kappatikaavu Guru Maheshwara temple, Eroor. The programme was organized in association with the Puthenkulangara residents association, Shanthibhavan Palliative Hospital and the Department of Public Health Dentistry, Annoor Dental College and Hospital.

- Total no of patients screened- **64 patients.**
- Total no. of treatments done- **7 patients**

The camp aimed to promote oral health awareness and provide dental screening and treatment services for general public. Participants received dental examinations, oral health education, and guidance on maintaining good oral hygiene. The initiative was well received and highlighted the importance of preventive dental care in ensuring overall health and well-being.





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2. Oral health education and Dental screening camp on 19th August 2026
at Government Women's Polytechnic college, Kalamassery. The programme was organized by the Government Women's Polytechnic college in association with Shanthibhavan Palliative Hospital and the Department of Public Health Dentistry, Annoor Dental College and Hospital.

- Total no of patients screened—**49 patients**

The camp was organized with the objective of providing accessible healthcare services to the community and creating awareness about the importance of regular health check-ups and preventive care





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