

# Community dentistry

## Practical 2

### Patient's setting and examination



**Three important things should be taken care of before starting a dental procedure are :-**

**a)Dental chair position**

**b)Patient position**

**c)Dentist (operator position)**



# Proper workstations include:

- Dentist's or patient's chair height.
- Lumbar, thoracic or arm support in dentist's chair.
- Position of instrument table.
- Adequate lighting.
- Edges of work surfaces should be comfortable.
- Proper ventilation.
- Pleasant temperature.

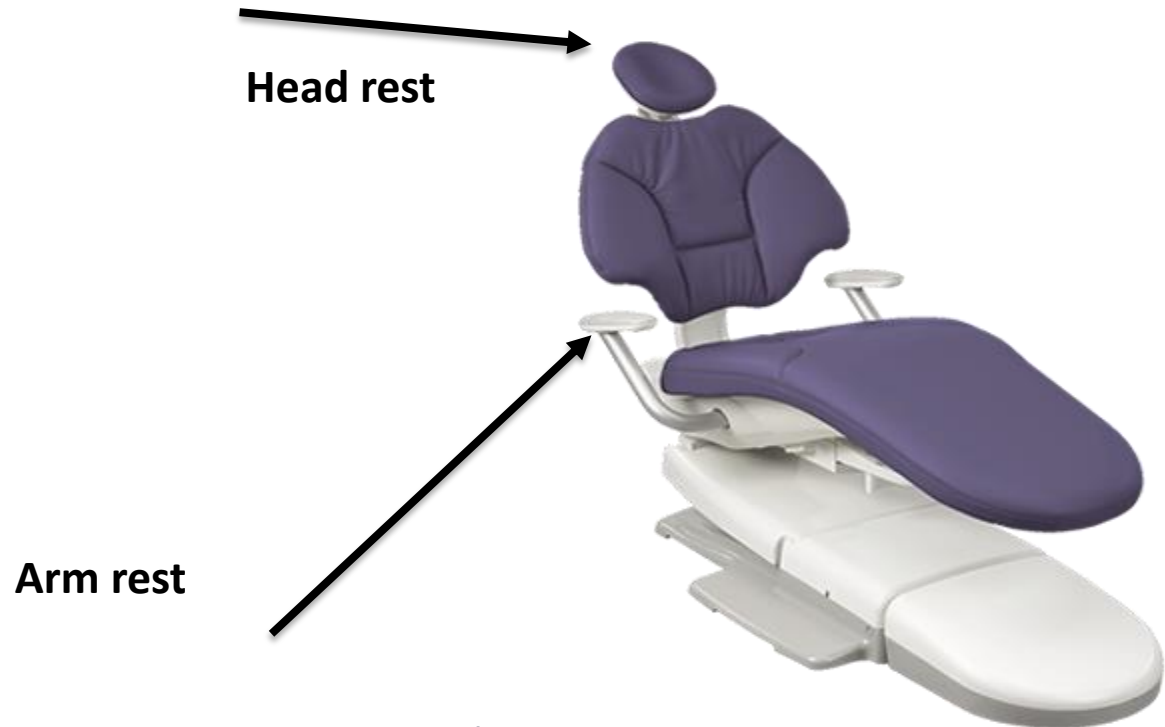
\*Lumbar the lower back region of your spinal column or backbone



# Dental chair position

- ✓ Modern dental chairs are designed to provide total body support.
- ✓ Chair design and adjustment permit maximal operator access to the work area.
- ✓ To improve infection control, chairs with **foot switch** for patient positioning are recommended.





- The patient should have direct access to the chair. The chair should be low,
- the back/head rest upright
- the arm rest adjusted to allow the patient to get into the chair.

❑ After the patient is seated, the arm rest is returned to its normal position.

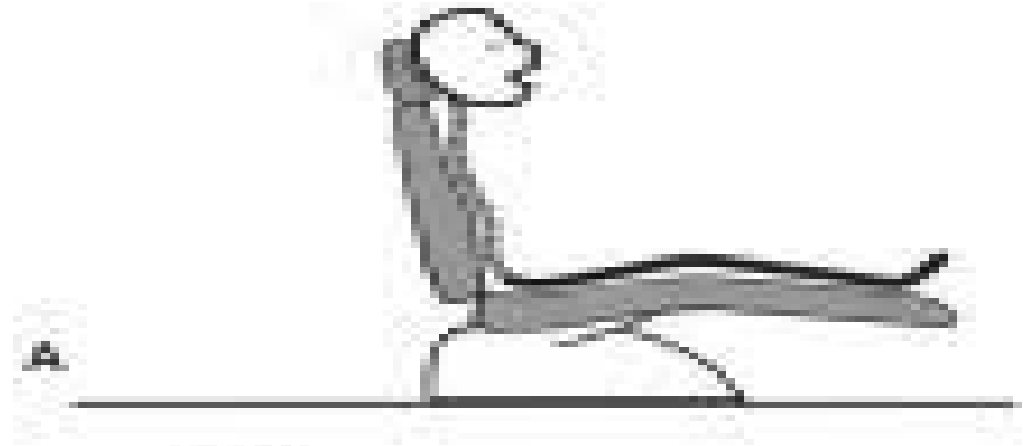
❑ The headrest cushion is positioned to support the head and elevate the chin slightly away from chest so that neck muscle strain is minimal and swallowing is facilitated.

❑ The chair is then adjusted to place the patient in a recline position.

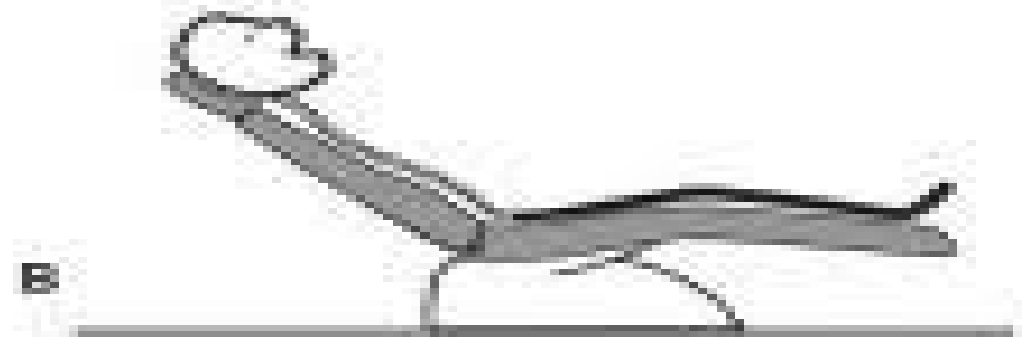


# Patient positions

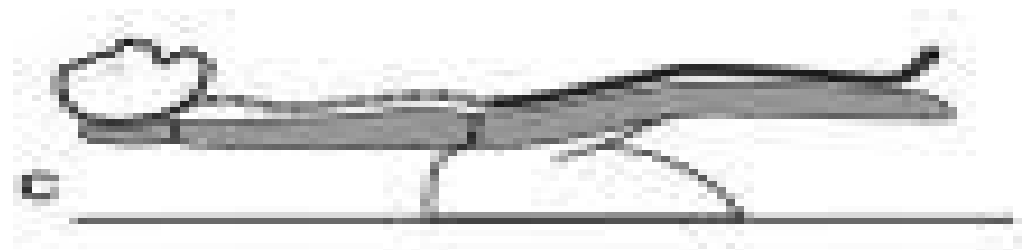
Upright position



Reclined position



Supine position

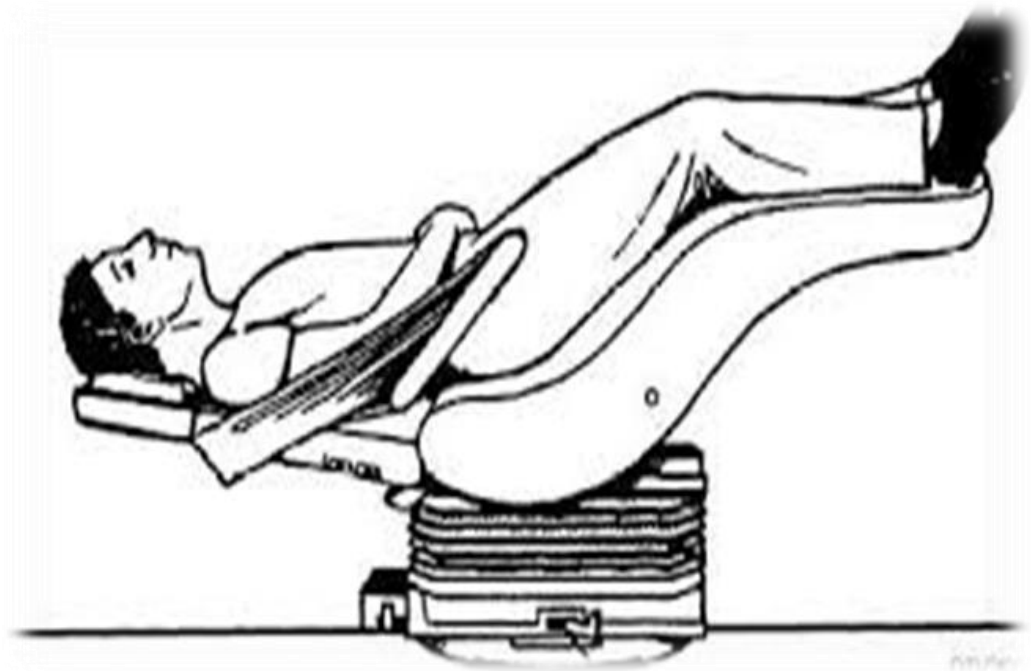


❖ In supine position the patient's head knees and feet should be approximately at the same level.





In general, Head should not be lower than feet.  
But only in **emergency** conditions like  
**Syncope** , Patient's head should be  
positioned lower than the feet.



**After completing the procedure, chair should be placed in **upright position**. So that patient can leave the chair easily and gracefully .**

The choice of patient position varies with the

- \*operator,
- \*type of procedure,
- \*area of the mouth involved

# Objectives of a Favorable Patient Positions

- **Ensures access to the operative field**
- **Prevent operator and patient fatigue and discomfort**
- **Good visibility**
- **Relative comfort and safety for the patient**
- **Allows easy access of instruments to the teeth**
- **Saves time**

# Operating positions

## For right handed operator

- Right front position(7-o'clock)
- Right position (9-o'clock)
- Right rear/posterior position (11-o'clock)
- Direct rear position(12-o'clock)

## For left handed Operators

- 1) Left front (5- o'clock)
- 2) Left (3-o'clock)
- 3) Left rear (1or 2-o'clock)

**Direct Rear Position  
(12 o' clock)**



**Right Rear Position  
(11 o' clock)**



**Left Rear Position  
(2 o' clock)**



**Direct Right Position  
(9 o' clock)**



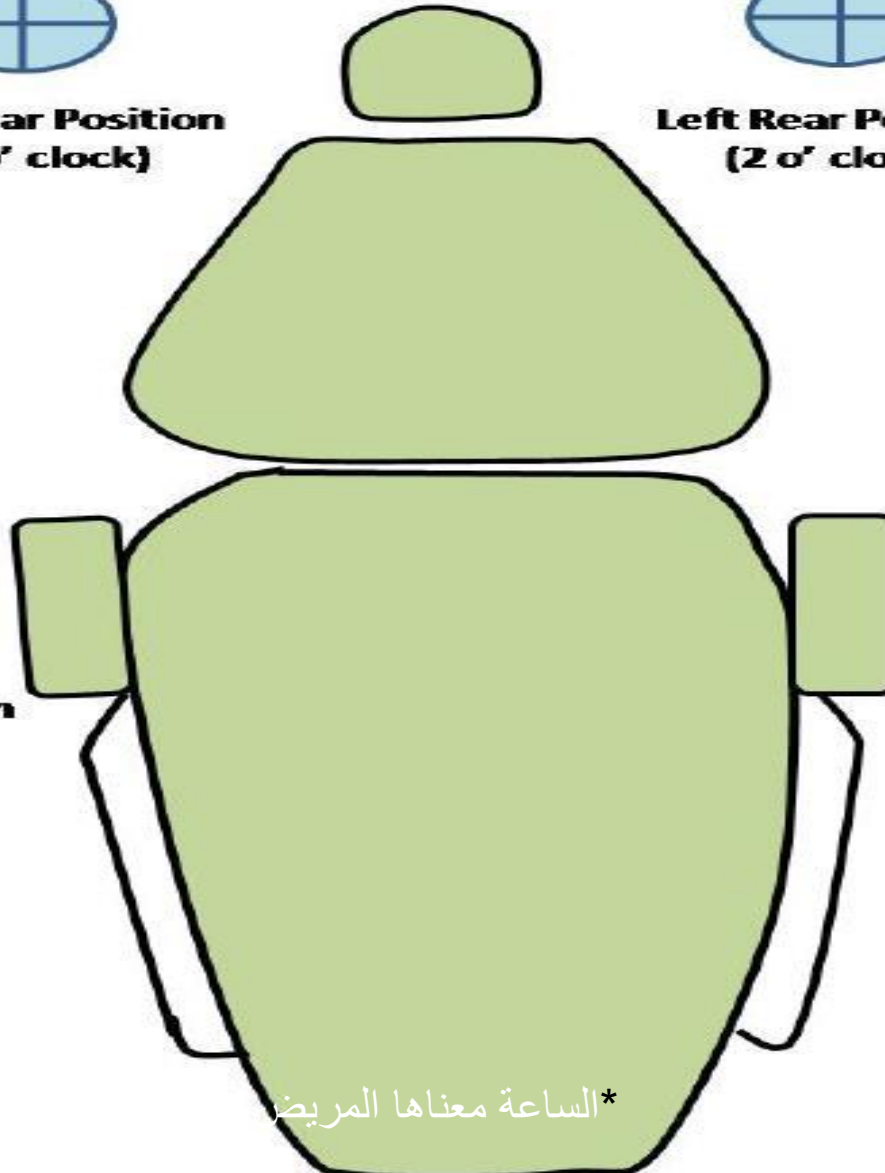
**Direct Left Position  
(3 o' clock)**



**Right Front Position  
(7 o' clock)**



**Left Front Position  
(5 o' clock)**



\*الساعة معناها المريض

# Right front position (7-o'clock position)

❑ Facilitates examination and work on Mandibular anterior teeth, mandibular posterior teeth (especially on the right side), maxillary anterior teeth.

❑ Patient seated in reclined 45 degrees.

❑ It is often advantageous to have the patient's head rotated slightly towards the operator.



# Right position (9-o'clock position)

- The operator is directly to the right of the patient.
- This position is convenient for operating on the buccal surfaces of the maxillary and mandibular right posterior teeth and occlusal surfaces of the mandibular right posterior teeth.





# Right rear position(11-o'clock)

- Most areas of mouth are accessible and can be viewed directly or indirectly using a mouth mirror.
- The operator is behind and slightly to the right of the patient.
- The left arm is positioned around the patient's head.
- The lingual and incisal surfaces of maxillary teeth are viewed in the mouth mirror.
- Direct vision may be used on the mandibular teeth.



# Direct rear position (12-o'clock position)

- ❑ Used primarily for operating on the **lingual surfaces of mandibular anterior teeth**.
- ❑ The operator sits behind the patient and looks down over the patient's head.



# NOTES

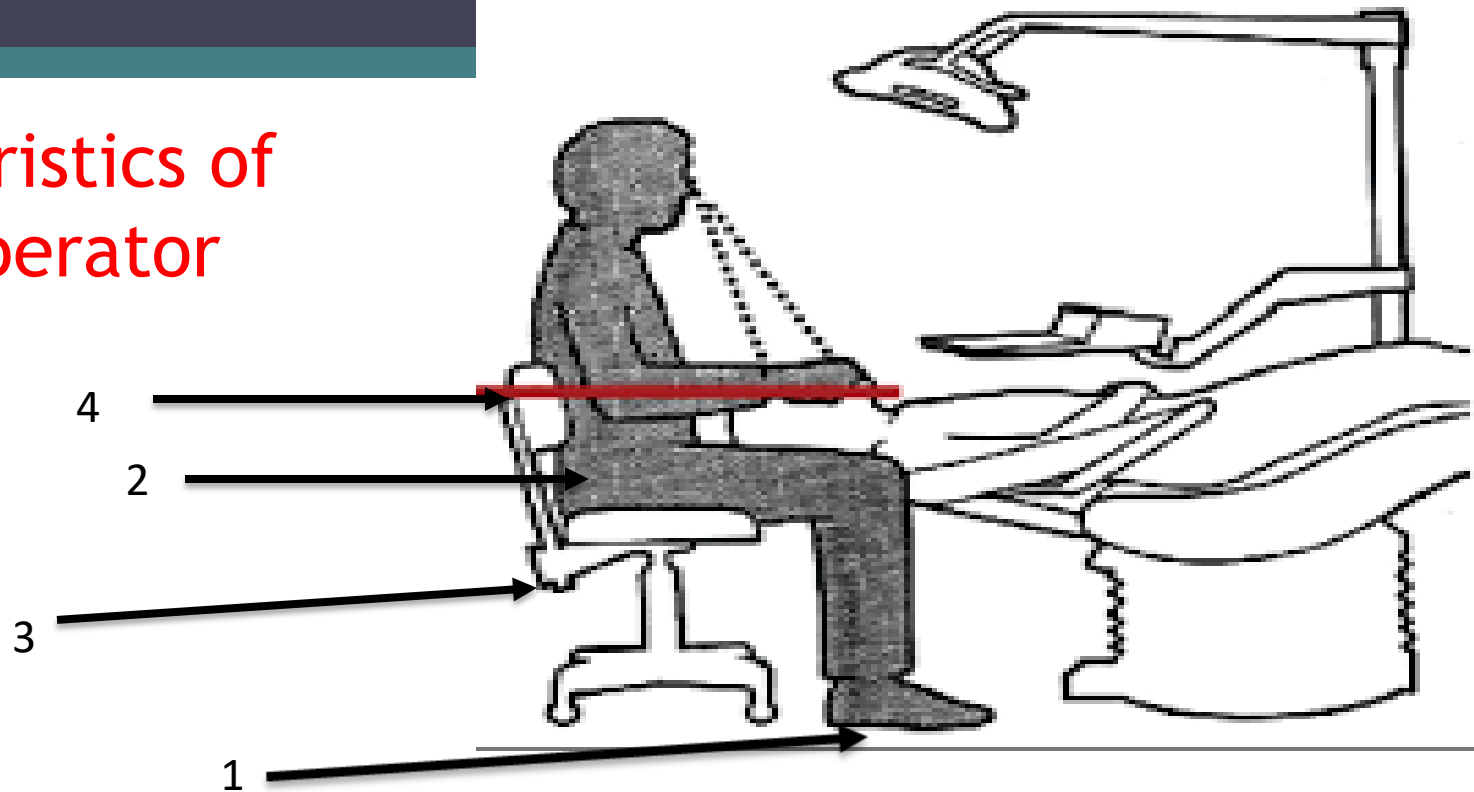
- ☐ When operating in the maxillary arch, the maxillary occlusal surfaces should be oriented approximately perpendicular to the floor.
- ☐ When operating in the mandibular arch, the mandibular occlusal surfaces should be oriented approximately 45 degrees to the floor.
- ☐ A proper operator does not rest forearms on the patient's shoulders or hands on the patient's face.

# NOTES

- ☐ Patient in a comfortable position is more relaxed, with less muscular tension.
- ☐ Dentist in comfortable position will experience less physical strain and fatigue, and reduce the possibilities of developing musculoskeletal disorders.



## Characteristics of restful operator position

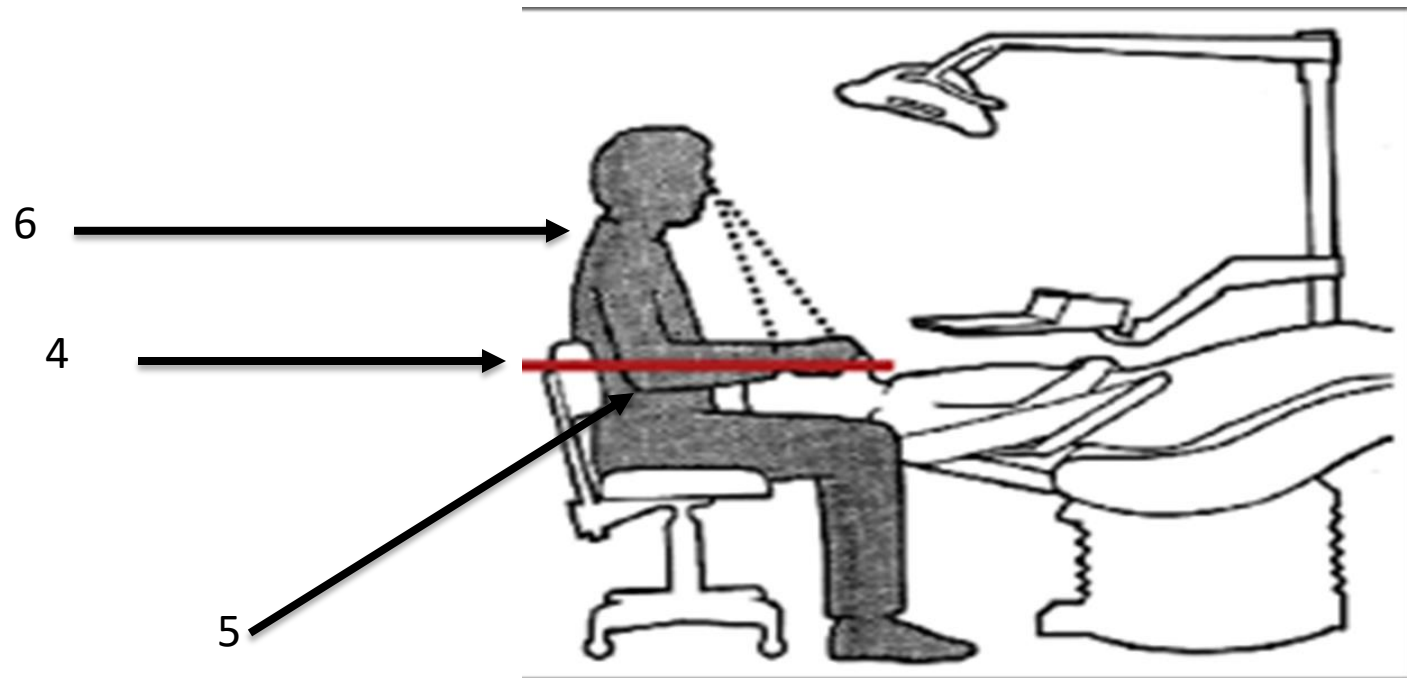


1-Position the feet flat on the floor

2-Operators thighs should be parallel to floor

3- Entire surface of seat are used to support weight

4- Backrest supports back without interference



4-Forearms should be parallel to floor when hands are in working (Arms at waist level)

5-Elbows should be close to the body

6-Back and neck should be in upright with top of shoulders parallel to floor











# Lightning:

- The operator should be well illuminated either by natural or artificial light.
- If the light is kept too close, it impairs the physical movement of operator, **and** increases patient discomfort due to heat production.
- If the light is kept far away, it reduces the illumination.



## **As a rule for**

- **mandibular arch the light is kept in a higher position**
- **for maxillary arch it is kept in a lower position.**

**Thanks for listening**