A 27-year-old patient went to the dental department with complaints about the partial absence of teeth in the upper jaw, the mobility of the removable prosthesis when chewing food and talking, as well as the aesthetic appearance of the prosthesis.

It was found out from the anamnesis that six months ago, after an accident, the patient had a complete dislocation of teeth as a result of an impact of the upper jaw on the steering wheel 1.2 1.1 2.1. In the polyclinic at the place of residence, the patient had a partial removable plate prosthesis for the upper jaw.

Objectively: the condition is satisfactory, the consciousness is clear, oriented in time and space, the behavior is adequate to the situation. The face configuration has not been changed. The skin of the face and neck is of normal color without damage. Regional lymph nodes are palpable, not enlarged, mobile, painless. Mouth opening is free. The mucous membrane of the oral cavity and vestibule is moistened, pale pink in color. Bite: partial secondary loss of teeth. There is a partial removable plate prosthesis on the upper jaw, replacing the missing 1.2 1.1 2.1 teeth. The prosthesis is not stable under load, artificial teeth are very different from the native ones in color. The alveolar process of the upper jaw in the area of missing teeth is thinned due to a lack of bone tissue on the vestibular side. The gum in the specified area has not been changed. The teeth of the upper and lower jaw are intact, but teeth 4.1 and 3.1 are changed in color. When removing the prosthesis, there is a strong sinking of the upper lip.

The orthopantomogram shows a decrease in the height of the alveolar process of the upper jaw by 2 mm and an increase in its transparency, in the area of the tips of the roots of the teeth 4.1, 3.1, a rarefaction of bone tissue with clear contours in the form of flames is determined.

Questions

1. What is the preliminary diagnosis that can be made to the patient?

2. What may be the survey plan and is it necessary to conduct additional research?

3. Formulate a clinical diagnosis and specify diagnostic criteria.

4. Prescribe treatment and justify it.

5. Evaluate the extent of the surgical injury in order to choose an adequate method of anesthesia.