



DENTAL FORCEPS

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EXTRACTION FORCEPS

- **The extraction forceps are instruments used for removing the tooth from the alveolar bone**
- **These forceps are designed in many styles and configurations to adapt to the variety of teeth for which they are used**

Forceps Components

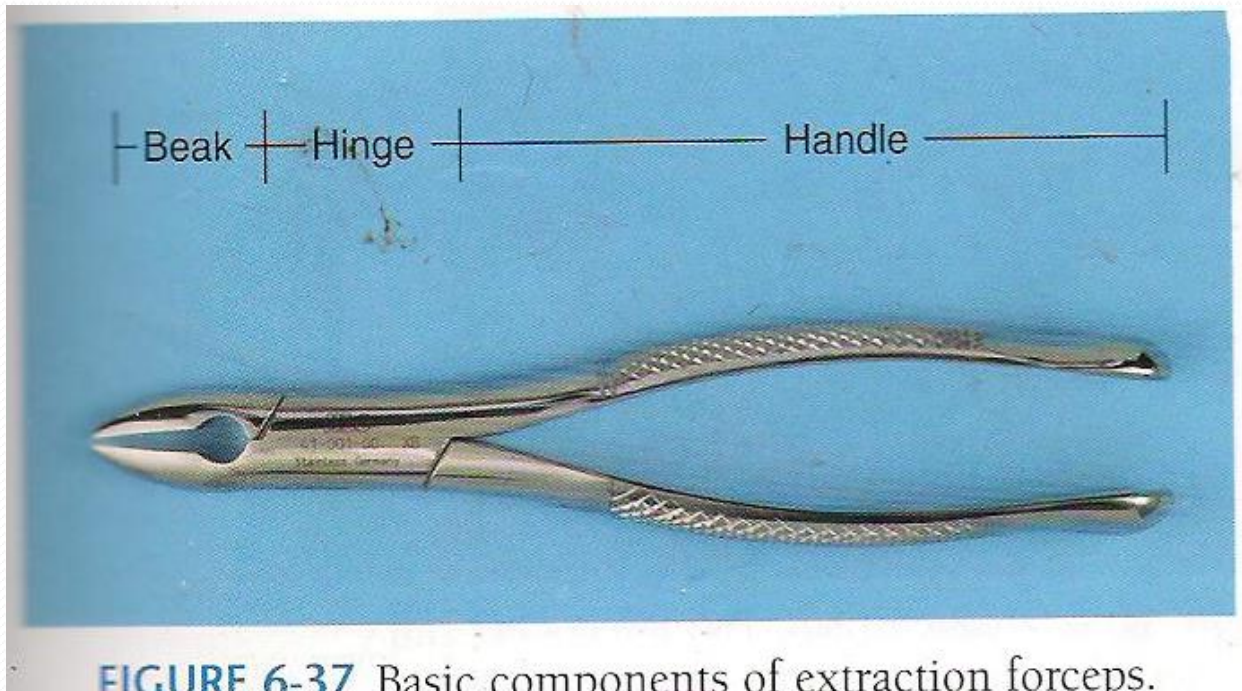


FIGURE 6-37 Basic components of extraction forceps.

The handles are usually of adequate size to be handled comfortably and deliver sufficient pressure and leverage to remove the required tooth. The handles have a serrated surface to allow a positive grip and to prevent slippage.

Holding of the forceps

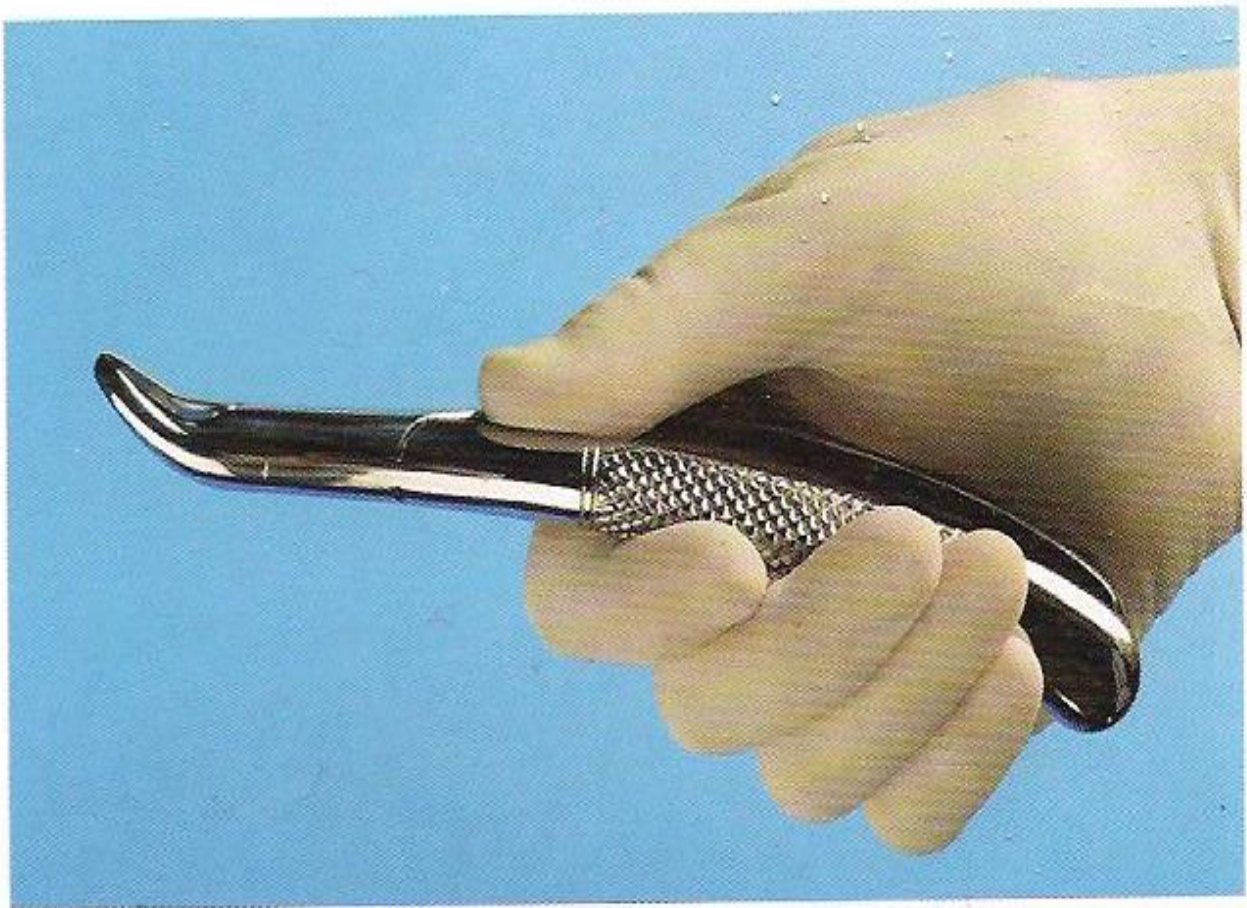


FIGURE 6-38 Forceps used to remove maxillary teeth are held with palm under handle.

Holding of the forceps

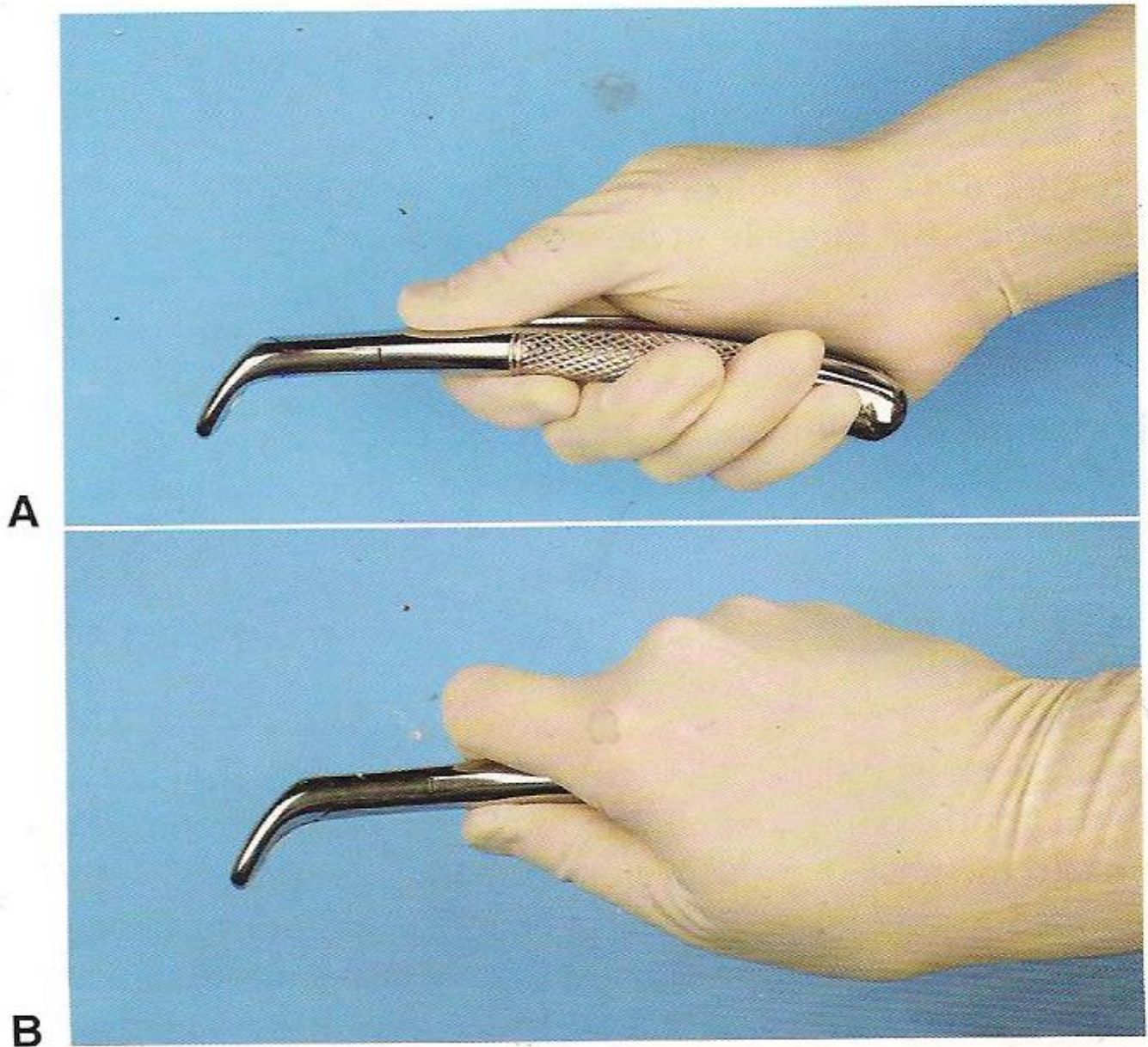


FIGURE 6-39 A, Forceps used to remove mandibular teeth are held with palm on top of forceps. B, Firmer grip for delivering greater amounts of rotational force can be achieved by moving thumb around and under handle.



FIGURE 6-40 Straight handles are usually preferred, but curved handles are preferred by some surgeons.

Maxillary forceps

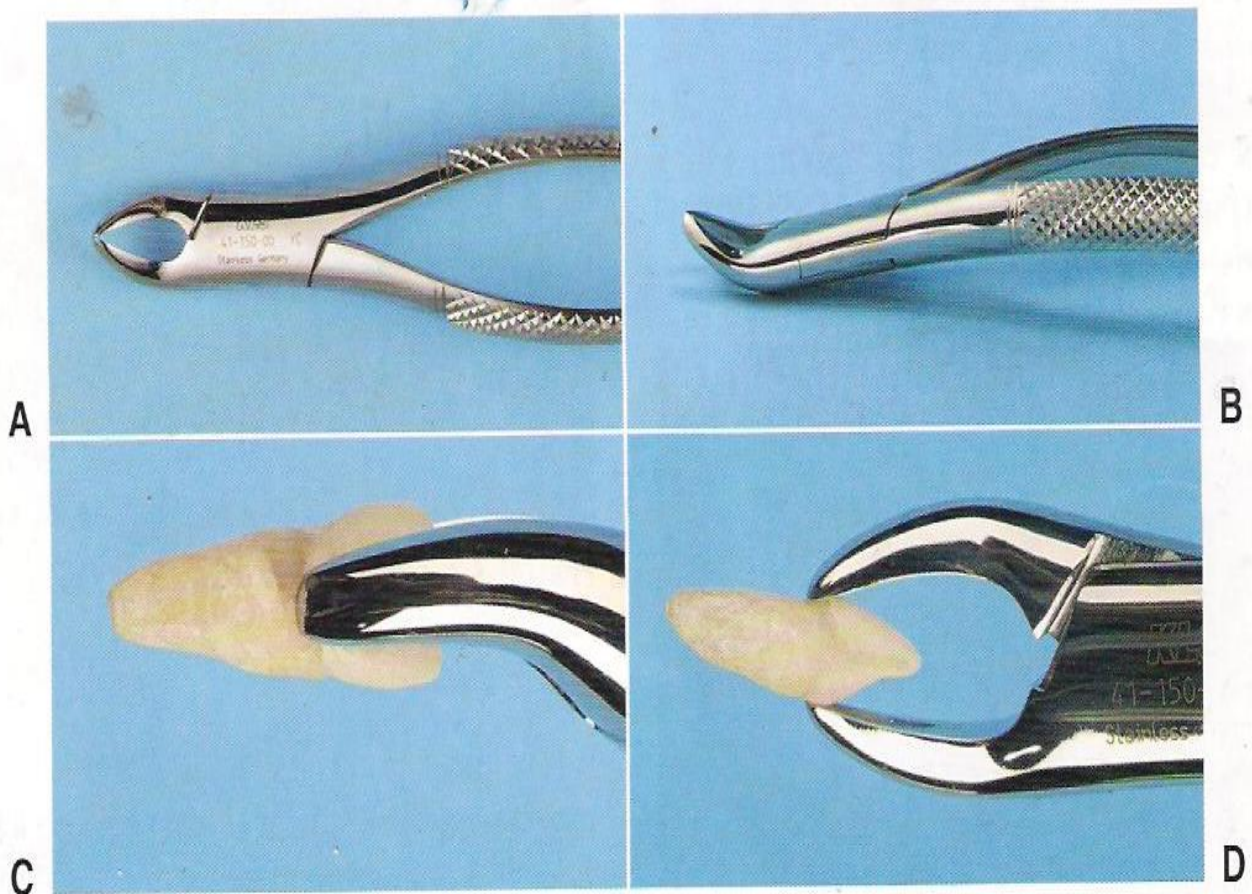


FIGURE 6-42 A, Superior view of No. 150 forceps. B, Side view of No. 150 forceps. C and D, No. 150 forceps adapted to maxillary central incisor.

UPPER STRAIGHT FORCEPS



Maxillary Forceps

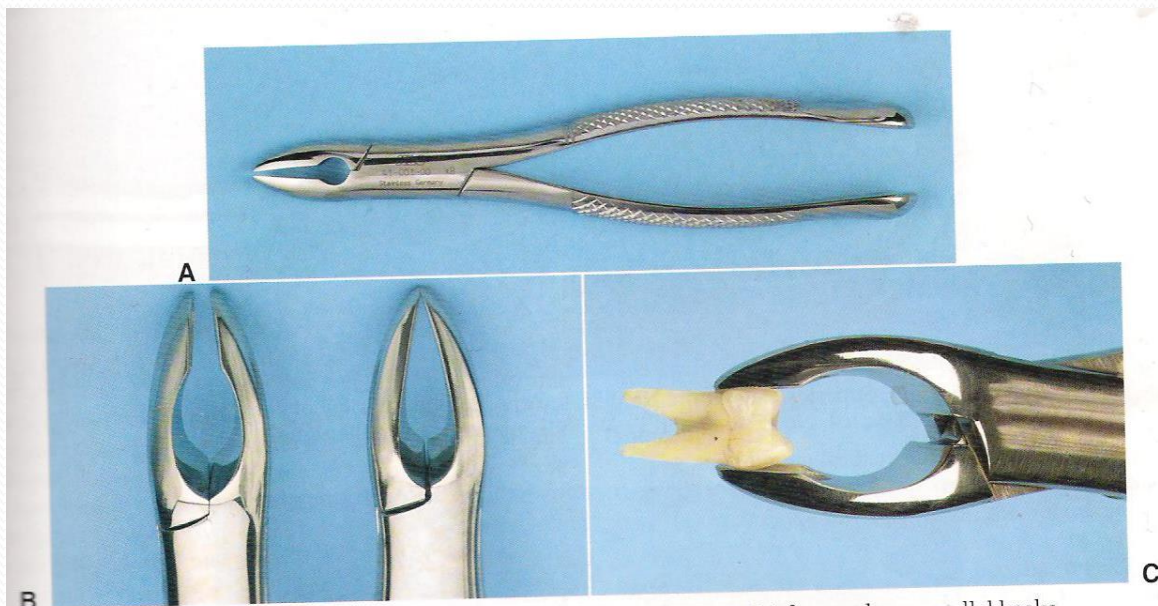


FIGURE 6-43 A, Superior view of No. 150A forceps. B, No. 150A forceps have parallel beaks that do not touch in distinction from 150 forceps beak. C, Adaptation of No. 150A forceps to maxillary premolar.

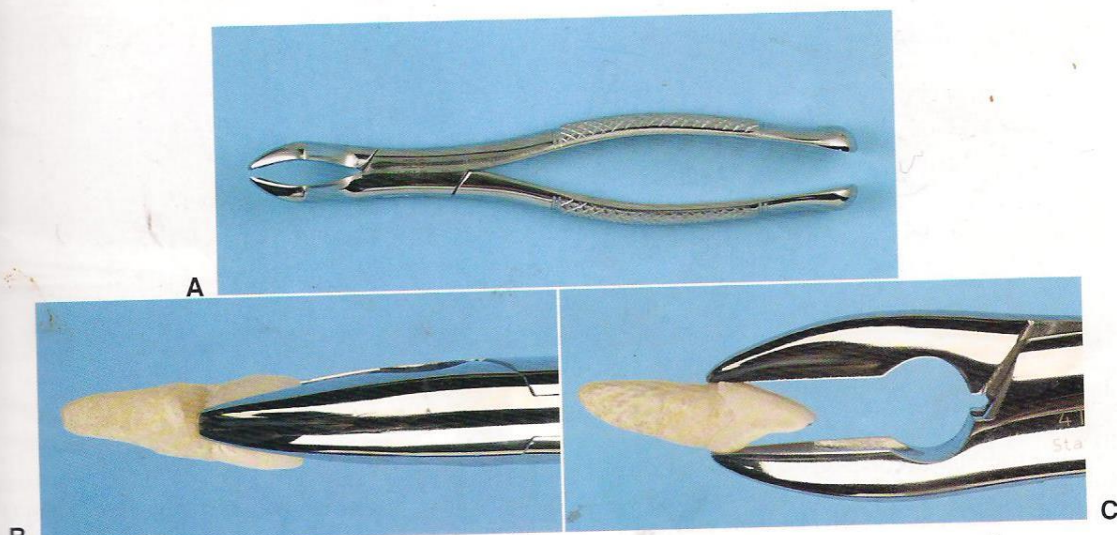


FIGURE 6-44 A, Superior view of the No. 1 forceps. B and C No. 1 forceps adapted to incisor.

UPPER PREMOLAR FORCEPS



The forceps of maxillary premolar are slightly S-shaped when viewed from the side and essentially straight when viewed from above. The beak of forceps curve, first to be away from lower teeth and lower lip, second to be with the long axis of the tooth.

Maxillary Forceps

Upper Molar

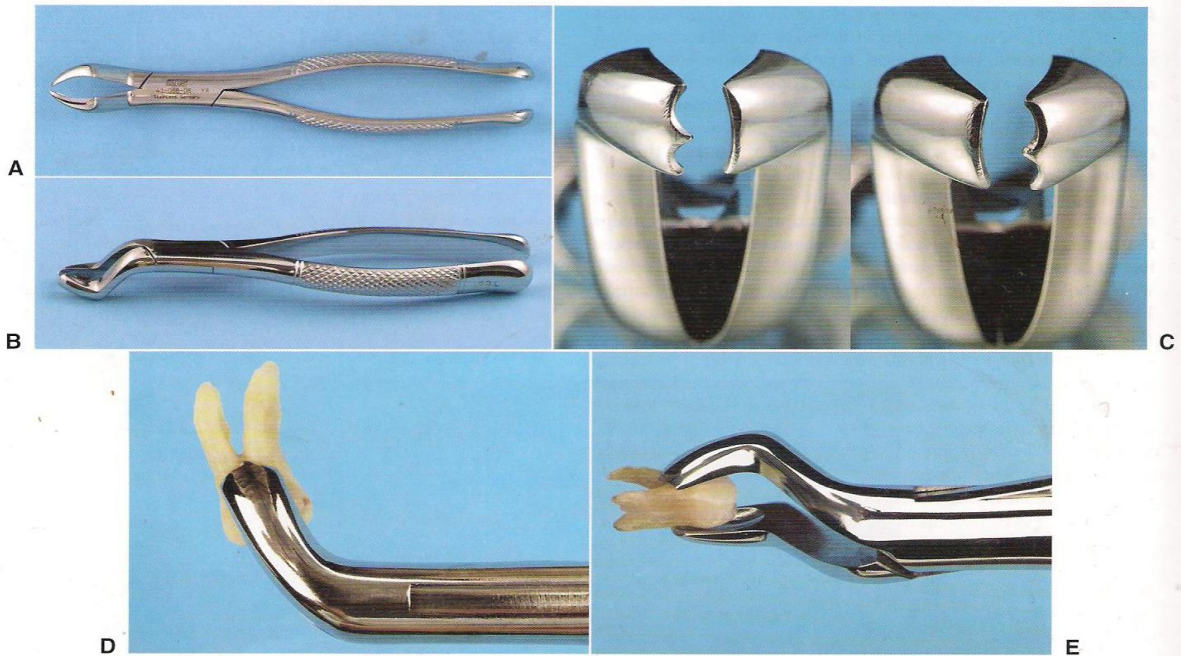


FIGURE 6-45 A, Superior view of the No. 53L forceps. B, Oblique view of No. 53L forceps. C, Right, No. 53L; left, No. 53R. D and E, No. 53L adapted to maxillary molar.



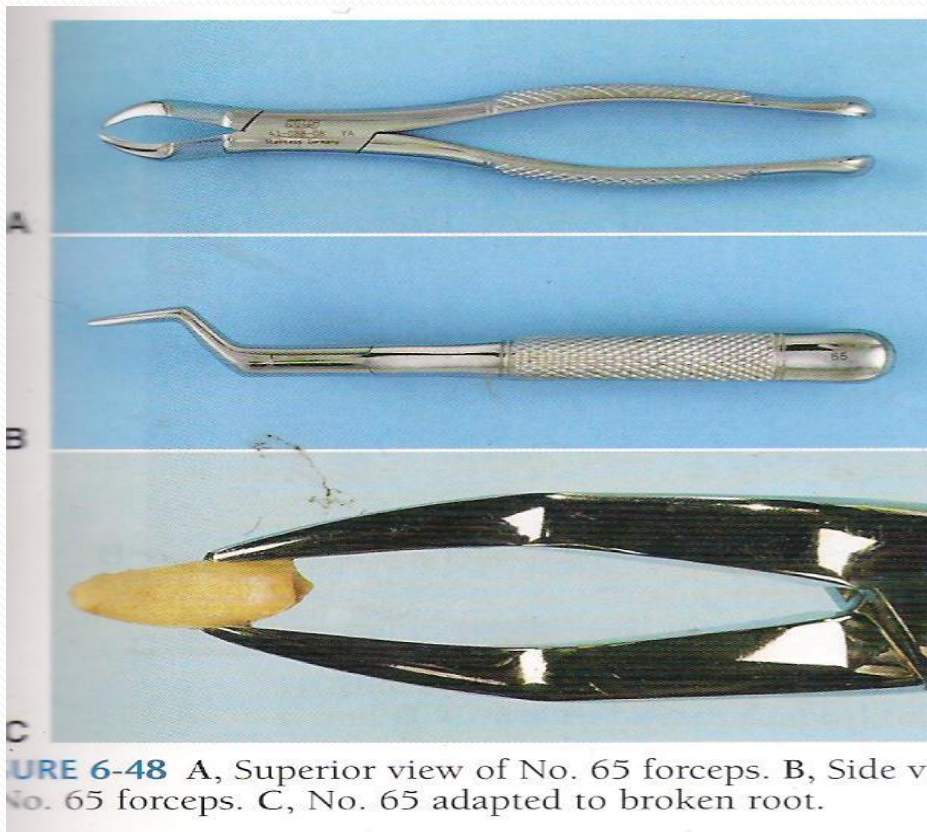
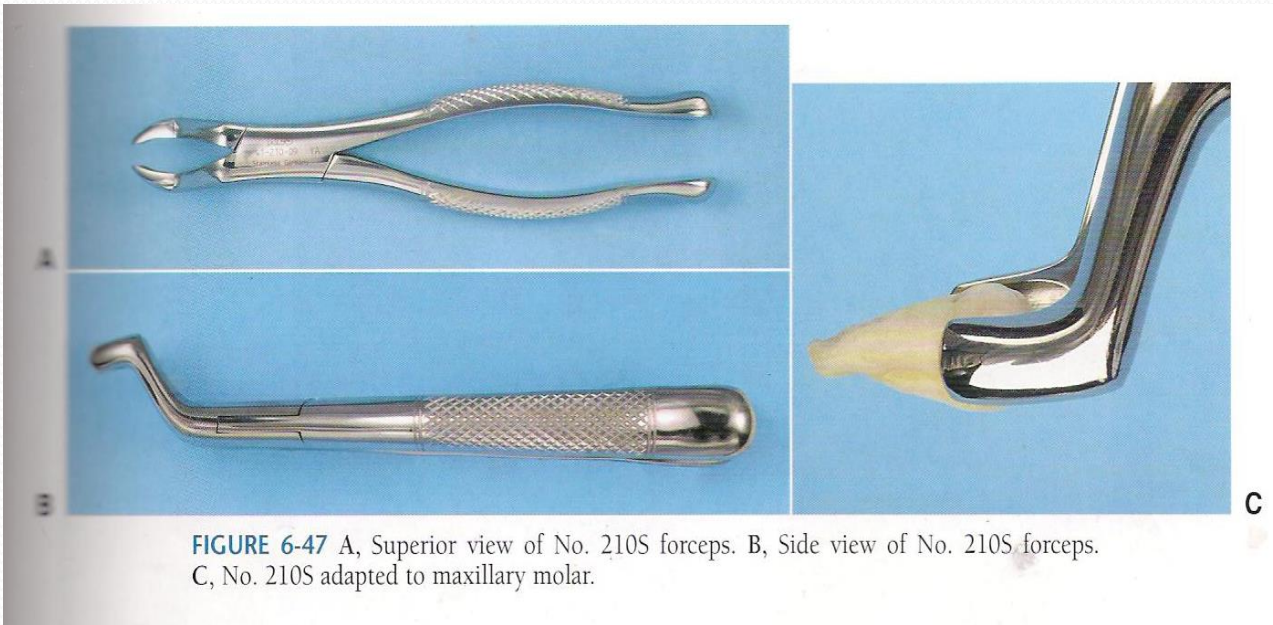
FIGURE 6-46 A, Superior view of No. 88L forceps. B, Side view of No. 88L forceps. C, No. 88R adapted to maxillary molar.

UPPER MOLAR FORCES



The forceps have smooth, concave surface for the palatal root and a beak with a pointed design that will fit into the buccal bifurcation. This requires that the molar forceps come in pairs: a left and a right.

ROOTS FORCEPS TO THE MAXILL



Forceps to maxillary primary teeth



FIGURE 6-49 No. 150S (*bottom*) is smaller version of No. 150 forceps (*top*) and is used for primary teeth.

Mandibular forceps

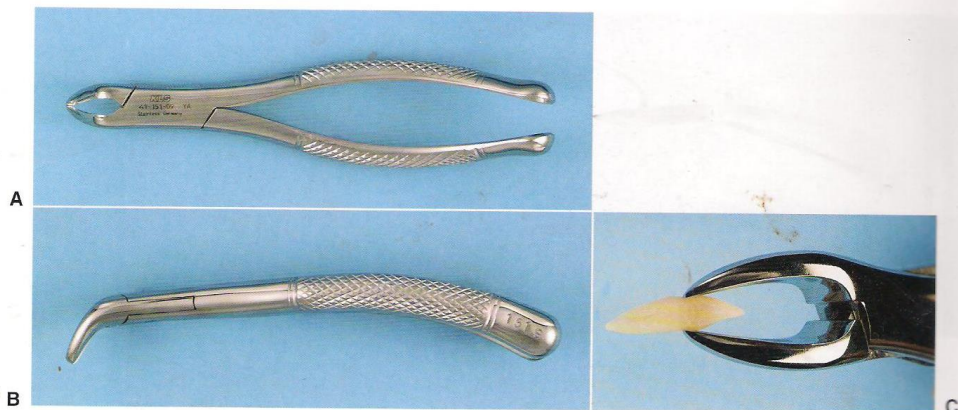


FIGURE 6-50 A, Superior view of No. 151 forceps. B, Side view of No. 151 forceps. C, No. 151 forceps adapted to mandibular incisor.



FIGURE 6-51 A, No. 151A forceps have beaks that are parallel and do not adapt well to roots of most teeth in contradistinction to the No. 151 forceps beaks. B, No. 151A forceps adapted to a lower premolar tooth. The lack of close adaptation of tips of beak to root of tooth is visualized.



FIGURE 6-52 A, Side view of English style of forceps. B, Forceps adapted to lower premolar.

LOWER ANTERIOR FORCEPS



LOWER PREMOLARS FORCEPS



Forceps for Mandibular Molars



FIGURE 6-53 A, Superior view of No. 17 molar forceps. B, Side view of No. 17 molar forceps. C and D, No. 17 forceps adapted to lower molar.

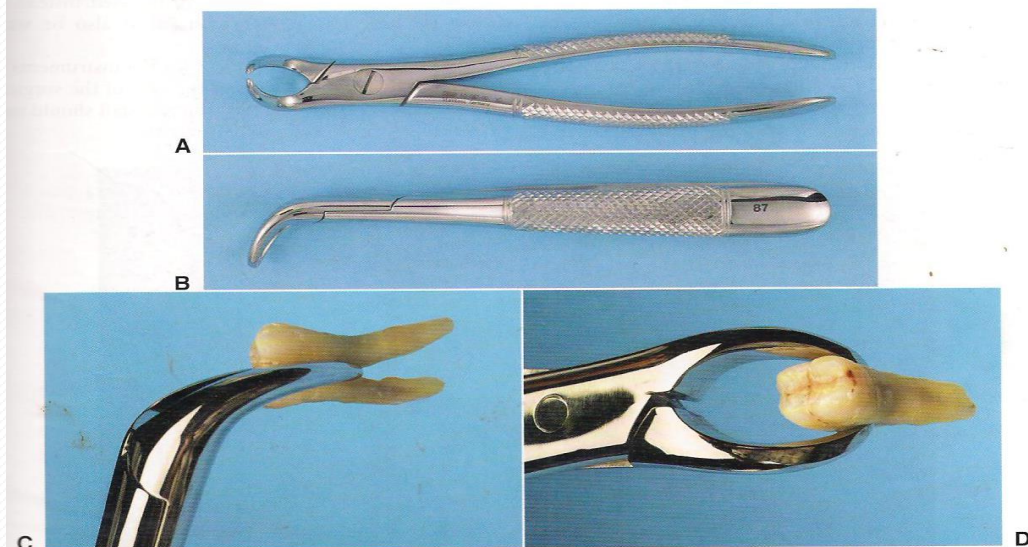


FIGURE 6-54 A, Superior view of cowhorn No. 87 forceps. B, Side view of cowhorn forceps. C and D, Cowhorn forceps adapted to lower molar tooth.

MOLAER MOLARS FORCEPS



LOWER ROOTS FORCEPS



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