Approach to oral examination

Clinical Examination

• Perform routine clinical history and examination
  – Underlying disease?
  – Recent weight loss
  – Coat changes
  – Previous dental history

Extra-oral Examination

• Watch the horse eat
  – Chew with both sides?
  – Take longer to chew?
  – Quidding?

• Observe
  – Deviations in nose
  – ‘Hamster’ pouching of food
  – TMJ swelling
  – Facial asymmetry

• Palpate
  – Cheeks
  – Masseter muscles
  – SMLN
  – TMJs

Extra-oral examination

• Lateral excursion to molar contact
  – Symmetrical?

• Rostro-caudal mobility of mandible

• Assess temperament
Oral Examination Equipment

• Minimum Level of Equipment
  – Bright light source
  – Speculum
  – Gloves
  – Dental syringe
  – Dental mirror
  – Pulpar Explorer
  – Diastema forceps
  – Periodontal probe
  – (Headstand)

Other Ancillary Aids

• Incisor Speculum
• Cheek Retractor
• Basket forceps

Speculum

• Incisor Speculum
• Cheek Retractor
• Basket forceps

Light Source

• Headlight

Oral Examination Equipment

• Aids oral examination
  • Safety
    – Yourself
    – Horse
    – Handler
  • Alpha-2 agonist
    – Romifidine
    – Detomidine
    – Xylazine
  • Opiate
    – Butorphanol
    – Morphine

Sedation
Incisor Examination

• Without gag in place
  • From side
    ─ Overbite/jet
    ─ Underbite
    ─ Care that performed in neutral position
  • From front
    ─ Slant mouth/smile mouth
    ─ Evidence of cribbing
• Count teeth!
  ─ Supernumery incisors
  ─ Missing incisors
  ─ Retained deciduous incisors

• Check for calculus
• Check mobility
• Look for draining tracts
  ─ Apically
  ─ Gingival margin
• Diastemata

Canines and Wolf Teeth

• Place speculum and wash mouth
• Check for calculus formation particularly around lower canines
• Check for fractured canines
• Palpate bars of mouth for wolf teeth
  ─ Displaced Wolf Teeth
  ─ Blindly erupted Wolf Teeth
  ─ Mandibular Wolf Teeth

CT Examination

• Initially wash mouth out and look
• Palpate
  ─ Occlusal surface of every tooth
  ─ Edges of all teeth particularly the buccal aspect of upper teeth and lingual aspect of lowers
  ─ Buccal mucosa
  ─ Tongue adjacent to the teeth
  ─ Every inter-dental space
• Palpating for:
  ─ Dental overgrowths and associated soft tissue trauma
  ─ Dental fractures
  ─ Displaced teeth
  ─ Supernumery Teeth
  ─ Diastemata

Oral Examination

• Look in the mouth
• Without mirror
  ─ Count teeth!
  ─ Overgrowths
  ─ Soft Tissue Trauma
  ─ Dental fractures

Use of a dental mirror

• Cheap piece of equipment
• Use cannot be over-stated!
• If you don’t look you can’t see!
• If you can’t see you can’t do
Use of a dental mirror

- Need good light source
- Technique is easy to learn
- Systematic approach!

Mirror Examination

- Triadan rows 1-4
- Every occlusal surface
  - Pulps/infundibulae
- Every interdental space
  - Buccally and palatally/lingually

Use of pulpar explorers

- Often overlooked
- Tests the integrity of the secondary dentine over the pulp cavities
- Can be important diagnostically in apical infection cases

Which teeth to probe?

- Don’t routinely probe every pulp on every tooth
- Base on
  - Pulp appearance
  - Food packing
  - Clinical signs
- Any infundibulum that has food material emanating

Probing teeth
Evaluating the periodontium

- Ensure mouth clean
- Use of dental mirror
  - Evaluate interdental spaces
  - Buccal and lingual
- May need to clean out periodontal pockets of food

Documentation

- Always document findings
- Keep a record for yourself
- One for the owner
- Plan follow-up treatments