

## Dental Instruments and Use

Serrated periosteal elevator aka serrated bone curette	Single or double-ended serrated spoon shaped tool for removal of diseased tissue in alveolus and removal of jagged bone margins
LaGrange scissors 4.5in (curved)	Tissue Scissors (flap release, freshen edges, etc)
Iris scissors 4.5in (straight)	Suture ONLY scissors (planned replacement)
Mayo-Hager Needle holder with Tungsten Carbide inserts 4.5in	Needle driver - better grip with jaws of Tungsten Carbide; NO scissors as teeth prevent integrated scissor from reaching the correct location.
Bishop Harmon Tissue Forceps 3.5 in or Debakey 4.5in	Thumb forceps (pick ups, tissue handling)
Extraction forceps	Jaws close in parallel fashion, spring & short handle - use after elevation only
Periodontal Probe and Explorer	Double ended – UNC 15 marks = solid black 4-5mm, 9-10mm, 14-15mm; Explorer for finding soft spots (caries) on occlusal surface of maxillary molars
Scalpel Handle	Round scalpel handle - better control, ergonomic
Periosteal Elevator *	Single or double ended; sharp cutting edge - lifting tissues and periosteum from bone past the mucogingival junction; cutting sides aids lifting without tearing
“Zombie” (Tartar hoe)	Retracts/protects soft tissue when using bur; expect dings- is a dead instrument
Luxators *	Cut and wedge periodontal ligament, NO scooping/twisting, make your “box”
Elevators *	Fatigue periodontal ligament, SCOOP (not twist), advance vertically

\*Things indicated with an asterisk are instruments needing daily maintenance to ensure efficacy