



# OSCE Lens Card

## BLUE SET: CONGENITAL SYPHYLIS CASE

Cluster 1: Clinical Information Gathering

## Key Words

1

### HISTORY

- HOPC: Any pain symptoms? Any concerns mentioned by the child?
- Medical history - medical conditions, medications and allergies.
- Dental history - Previous dental visits/ records.
- Oral hygiene history - Toothbrushing, flossing, supervision, toothpaste.
- Social history-
  - i. Diet: Frequency, sugars, and consistency.
  - ii. Water: Water consumption, tap water/ tank water.

2

Congenital syphilis triad.

3

### INVESTIGATIONS:

- E/O - Swelling over the face.
  - I/O - Detailed examine all teeth and count.
- X-rays: Bitewings and OPG.

## Diagram





# OSCE Lens Card

## BLUE SET: SINUSITIS CASE

Cluster 1: Clinical Information Gathering

## Key Words

1

### HISTORY

- HOPC: SOCRATES of pain history.
- Medical history - medical conditions, medications and allergies. Blocked/ dripping nose?
- Dental history - Previous dental visit? When was the tooth extracted?
- Social history - Grinding? Habit of biting on anything hard?

2

### DIFFERENTIAL DIAGNOSIS:

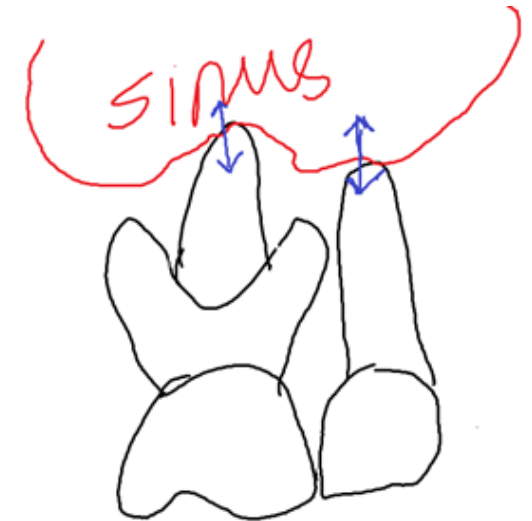
Maxillary sinusitis, cracked tooth or sinusitis post OAC.

3

### INVESTIGATIONS:

- E/O - Swelling over the face and inspecting grinding (by checking jaw joints and the muscles of mastication).
- I/O - Detailed examination of all teeth in the area and also check the area with missing teeth.  
X-rays: Periapical x ray.  
Crack test (Using Fracfinder)  
Probing.  
Cold test (if no RCT)

## Diagram





# OSCE Lens Card

## BLUE SET: PEG LATERAL CASE

Cluster 2: Diagnosis and Management

## Key Words

- 1** HOPC:  
Any pain, bleeding or sensitivity?
- 2** EXPLANATION OF FINDINGS AND DIAGNOSIS:  
Microdont (Peg lateral) - Genetic predilection/  
trauma(rare).
- 3** RELEVANT HISTORY:  
Stress related to grinding, lifestyle, new  
relationship and diet (associated with composite).
- 4** TREATMENT AND EVALUATION:
  - No treatment.
  - No prep veneers (composite)
  - Lumineers (prefabricated veneers).
  - Permanent options - Porcelain veneers, crown.
  - Stress management.
- 5** HEALTH PROMOTION ASPECTS:
  - Regular dental visits.
  - Oral hygiene routine (Brushing twice daily and  
flossing).

## Diagram

Explain with x-ray given.  
No need for diagrams, focus on  
health promotional aspects more



# OSCE Lens Card

## BLUE SET: PERIODONTITIS CASE

Cluster 2: Diagnosis and Management

### Key Words

- 1** HOPC:  
Any discharge/ bad taste/ pimple over the gums?  
Any wobbly teeth?
- 2** EXPLANATION OF FINDINGS AND DIAGNOSIS:  
Chronic localised severe periodontitis/ Periodontal abscess along with chronic generalised moderate-severe periodontitis.
- 3** CORRELATE WITH RELEVANT HISTORY:  
Stress associated with profession, smoking, medical history, dental history, oral hygiene history and family history.
- 4** TREATMENT AND EVALUATION:
  - No treatment.
  - Immediate options: Fibre-reinforced bridge, Essix retainer, immediate denture.
  - Permanent options: Stabilising periodontal condition before - removable denture.
  - Stress management/ Health promotion on positive risk factors.

### Diagram





# OSCE Lens Card

## BLUE SET SPORTS TRAUMA ASSOCIATED WITH INCISORS CASE

Cluster 3: Clinical Treatment & Evaluation

## Key Words

- 1** HOPC: Pain and swelling extent? Fever?  
Understanding severe spreading odontogenic infection features.
- 2** **EXPLANATION OF FINDINGS:**  
Post surgical infection - previous episodes.  
Broken down tooth.
- 3** **MANAGEMENT:**
  - Local anesthesia followed by possible suturing for lip laceration. X-ray of the lip.
  - Lateral luxated tooth - Splinting for 4 weeks, RCT after that.
  - Uncomplicated fractured tooth - Temporary GIC filling now and to replace with composite after 1 week.
  - Monitoring for traumatic teeth is very crucial.
- 4** **POST-OPERATIVE:**
  - Soft diet, optimising oral hygiene, mouthguard for contact sports.
  - Recalls: Weeks - 2, 4, 8, 12. Months - 6 and 1 year until 5 years.
  - Symptoms to watch out for: Pimple on the gums, discoloration, mobility and severe pain.
  - Regular dental visits along with X-ray monitoring.

## Diagram

In this case, refer to the photo and x-ray given on the screen



# OSCE Lens Card

## BLUE SET: POST SURGICAL INFECTION

Cluster 3: Clinical Treatment & Evaluation

### Key Words

- 1** HOPC: Concussion symptoms? Whereabouts of broken tooth pieces or coughing? Medical clearance and any need for booster tetanus dose?
- 2** **EXPLANATION OF FINDINGS:**  
Lateral luxated tooth and uncomplicated fractured tooth.
- 3** **CORRELATE WITH RELEVANT HISTORY:**  
Changes within medical history, last blood test, instructions followed after extraction, possibility of portion of tooth or bone impeding healing.
- 4** **POST-OPERATIVE:**
  - No treatment.
  - Saline water rinse and Understanding on PA x-ray: manage accordingly. (Ref to oral; surgeon for a complicated case or hospital for an emergency).
  - Prescribe antibiotics and analgesics:
  - Rx
    - i. Clindamycin 300 mg 8 hourly for 5 days.
    - ii. Ibuprofen 400 mg 8 hourly for 5 days.
    - iii. Paracetamol 1000 mg 6 hourly for 5 days.

### Diagram

