

**Thematic plan of seminar-type classes
in discipline «Maxillofacial Surgery»
for students of 2021 year of admission
under the educational programme
cipher 31.05.03 Dentistry,
specialisation (profile) Dentistry
(Specialist's),
form of study full-time
for the 2025-2026 academic year**

№	Thematic blocks	Practical training within the framework of TB3	Hours (academic) 4
9 semester			
1.	<p>Abscesses and phlegmons of the face and neck.1 Classification. Etiopathogenesis. Changes in the immunological reactivity of the body in odontogenic inflammatory diseases. Principles of diagnosis.2</p> <p>Abscesses and phlegmons adjacent to the upper jaw. Abscesses and phlegmons of the infraorbital, zygomatic, and buccal regions.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative approach for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the upper jaw. Abscesses and phlegmons of the orbit.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p>	PII	6
2.	<p>Abscesses and phlegmons adjacent to the upper jaw. Phlegmons of the temporal region.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the upper jaw. Phlegmons of the subtemporal fossa.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the upper jaw. Phlegmons of the pterygopalatine fossa.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic,</p>	PII	6

	differential diagnosis. Operative access for drainage of the purulent focus.2		
3.	<p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the masseter muscle.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the parotid-mandibular region.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the retromandibular space.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p>	PII	6
4.	<p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the submandibular region.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the submandibular region.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the pterygomandibular space.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p>	PII	6
5.	<p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the parapharyngeal space.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p> <p>Abscesses and phlegmons adjacent to the mandible. Abscesses of the body and root of the tongue. Phlegmons of the root of the tongue.1 Topographic anatomy of the cellular spaces. Sources of infection. Possible routes of infection spread. Clinic, differential diagnosis. Operative access for drainage of the purulent focus.2</p>	PII	6

	<p>Abscesses and phlegmons adjacent to the mandible. Phlegmons of the oral cavity floor.1</p> <p>Topographic anatomy of the cellular spaces. Sources of infection. Possible ways of infection spread. Clinic, differential diagnosis. Operative access for purulent focus drainage.2</p>		
6.	<p>Principles of treatment of abscesses and phlegmons of the face and neck.1</p> <p>Features of pain relief in inflammatory diseases of the maxillofacial region: indications, contraindications, choice of method. Intensive care of patients with inflammatory diseases of the maxillofacial region. Transfusion, detoxification therapy, methods of efferent therapy. Physiotherapy and rehabilitation of patients with abscesses and phlegmons of the face and neck.2</p> <p>Putrefactive-necrotic phlegmons of the face and neck.1</p> <p>Etiology, pathogenesis. Features of the clinic, diagnostics and treatment. Distributed and progressing phlegmons.2</p> <p>Complications of odontogenic inflammatory processes of the face and neck. Sepsis. Septic shock. Odontogenic mediastinitis. Thrombophlebitis of the facial veins. Thrombosis of the cavernous sinus.1</p> <p>Causes, pathogenesis. Clinic, diagnostics, ways of infection spread. Principles of treatment.2</p>	PII	6
7.	<p>Injuries of the maxillofacial area.1</p> <p>Statistics and classification of injuries of the maxillofacial area. Methods of examination of patients with injuries of soft tissues and bones of the face.2</p> <p>Injuries of the maxillofacial area.1</p> <p>Surgical treatment of facial wounds: primary, primary-delayed, secondary.2.</p> <p>Injuries of the maxillofacial area.1</p> <p>Combat injuries of the soft tissues of the face. Thermal and combined injuries of the maxillofacial area. Features. Clinic, diagnostics. Scope and order of providing assistance to the wounded at the stages of medical evacuation.2</p> <p>Injuries of the maxillofacial area.1</p> <p>Surgical treatment of facial wounds: primary, primary-delayed, secondary.2.</p>	PII	6
8.	<p>Non-gunshot fractures of the mandible.1</p> <p>Classification, clinic. Modern methods of diagnostics. Differential diagnostics. Methods of temporary and permanent immobilization of mandibular fragments (conservative-orthopedic). Principles of treatment.2</p> <p>Non-gunshot fractures of the mandible.1</p> <p>Operative methods of immobilization of mandibular fragments (indications, types, technique). Features of pain relief. Prevention of complications. Rehabilitation.2</p> <p>Gunshot fractures of the mandible.1</p>	PII	6

	Features. Clinic, diagnostics. Scope and order of assistance at the stages of medical evacuation. Features of specialized treatment. Rehabilitation.2		
9.	<p>Non-gunshot fractures of the upper jaw and bones of the middle zone of the face.1 Fractures of the upper jaw. Classification, clinic, diagnostics. Fractures of the middle zone of the face (zygomatic bone, arc, bones of the nose). Classification, clinic, diagnostics. Methods of temporary and permanent fixation of fragments of the bones of the middle zone of the face (conservative-orthopedic). Principles of treatment.2</p> <p>Non-gunshot fractures of the upper jaw and bones of the middle zone of the face.1 Operative methods of fixing the fragments (indications, types, and techniques). Features of pain relief. Prevention of complications. Rehabilitation.</p> <p>Gunshot fractures of the upper jaw and bones of the middle facial zone.1 Features. Clinic, diagnostics. Scope and order of assistance at the stages of medical evacuation. Features of specialized treatment. Rehabilitation.2</p> <p>Control of independent work.</p>	<p>PII</p> <p>-</p>	6
10.	<p>Complications of soft tissue and facial bone injuries.1 Bleeding, hematomas. Asphyxia. Post-traumatic abscesses and phlegmons. Clinic, diagnostics, treatment, prevention.2 Combined and multiple maxillofacial and cranial injuries.1 Classification. Diagnostics. Principles of treatment.2</p> <p>Complications of soft tissue and facial bone injuries.1 Suppuration of the bone wound, traumatic osteomyelitis, delayed consolidation of the fragments, false joint, fractures consolidated in a malposition. Damage to nerves, traumatic maxillary sinusitis. Clinic, diagnostics, treatment, and prevention.2</p> <p>Combined and multiple maxillofacial and cranial injuries.1 Classification. Diagnostics. Principles of treatment.2</p>	PII	6
	Total in the 9th semester		60
10 semester			
11.	<p>Diseases and injuries of the nerves of the maxillofacial area.1 Lesions of the facial nerve. Paresis and paralysis of the facial muscles. Etiology. Pathogenesis. Clinic. Topical diagnosis.2</p> <p>Diseases and injuries of the nerves of the maxillofacial area.1 Lesions of the facial nerve. Paresis and paralysis of the facial muscles. Operative methods of treatment (decompression, neurolysis, nerve suturing, fascial, muscular, and skin plastic surgery). Indications and methods of treatment.2</p> <p>Diseases and injuries of the nerves of the maxillofacial region.1</p>	PII	6

	Auriculo-temporal syndrome (hemihidrosis). Glossopharyngeal nerve neuralgia. Clinic, diagnosis. Principles of treatment.2		
12.	<p>Diseases and injuries of the nerves of the maxillofacial region.1 Neuralgia of the branches of the trigeminal nerve. Clinical manifestations, differential diagnosis. Principles of treatment.2</p> <p>Diseases and injuries of the nerves of the maxillofacial region.1 Persistent idiopathic facial pain, dental plexalgia. Clinic, diagnosis. Principles of treatment.2</p> <p>Diseases and injuries of the nerves of the maxillofacial region.1 Neuralgia of the branches of the trigeminal nerve. Clinical manifestations, differential diagnosis. Principles of treatment.2</p>	PΠ	6
13.	<p>Temporomandibular joint diseases.1 Temporomandibular joint pain dysfunction syndrome. Etiology, pathogenesis, clinic, diagnostics, differential diagnostics, drug treatment. Application of physiotherapy and reflexology. Indications for orthopedic methods of treatment.2</p> <p>Temporomandibular joint diseases.1 Classification. Etiology, pathogenesis. Temporomandibular joint arthritis. Clinic. Diagnosis, differential diagnosis, treatment.2</p> <p>Temporomandibular joint diseases.1 Temporomandibular joint arthrosis. Classification. Etiology. Pathogenesis. Clinical, radiological and laboratory diagnostics. Medical, surgical and orthopedic treatment.2</p>	PΠ	6
14.	<p>Temporomandibular joint diseases.1 Temporomandibular joint contractures. Causes and types of contractures (scars of the oral mucosa, muscles, skin, and bone contractures). Prevention, methods of conservative and surgical treatment. Dissection and excision of scars, closure of defects, physiotherapy, and exercise therapy.2</p> <p>Temporomandibular joint diseases.1 TMJ ankyloses. Classification. Etiology, pathogenesis, and clinical manifestations. Studies of mandibular mobility and radiological diagnostics. Deformation of the mandible in ankylosis that develops during the growth period. Basic surgical techniques. Measures to prevent recurrence. Treatment of facial deformities in the management of ankylosis. Differential diagnosis of different types of persistent jaw clenching.2</p> <p>Temporomandibular joint disorders.1 Mandibular dislocations. Classification, etiology, pathogenesis, diagnosis, and treatment methods. Hippocrates' method of treating mandibular dislocation.2</p>	PΠ	6
15.	Defects and deformations of the maxillofacial region.1	PΠ	6

	<p>Analysis of the defect, assessment of anatomical, functional, and aesthetic disorders. Development of a treatment plan. Defects and deformations of the maxillofacial region resulting from injuries, gunshot wounds, burns, inflammatory diseases, and defects after the removal of facial and oral tumors. Characteristics and treatment planning.2</p> <p>Main types of plastic surgery. Local tissue plastic surgery.1 Plastics with flaps on a feeding stalk taken from nearby tissues. Advantages, disadvantages, indications, contraindications.2</p> <p>Plastics with local tissues.1 Mathematical justification for planning plastic surgeries with local tissues (A.A. Limberg). Application of symmetrical, asymmetrical, and combined figures.2</p>		
16.	<p>Plastic surgery with tissue flaps from distant areas.1 Development and introduction into practice of the round stalked flap (V.P. Filatov's flap). Biological substantiation of its application. Use of the round stalked flap for replacement of defects of various parts of the face and oral organs.2</p> <p>Plastic surgery with tissue flaps from distant areas.1. Plastic surgery with flaps on a nourishing stalk taken from distant areas of the body. Advantages, disadvantages, indications, contraindications.2</p> <p>Plastic surgery using free tissue transplantation. Free skin transplantation.1 Modern understanding of the biological processes occurring during free tissue and organ transplantation. Application of various types of skin flaps (thin, split, full thickness) to eliminate wound and granulating surfaces on the face and in the oral cavity.2</p>	PII	6
17.	<p>The main types of deformations of the upper and lower jaw: underdevelopment (micrognathia) or excessive development (macrognathia) of the jaw or its individual parts (prognathia and retrognathia), and open bite.1 Clinical manifestations, functional and aesthetic disorders. Analysis of the deformation, and refined diagnosis. Indications for surgical treatment.2</p> <p>The main types of deformations of the lower jaw.1 The main methods of surgery to correct the size and shape of the lower jaw. Features of operative technique, immobilization and postoperative management, prosthetics and rehabilitation of patients after intervention for jaw deformities.2</p> <p>The main types of deformations of the upper jaw.1 The main methods of operations for correcting the size and shape of the upper jaw. Features of operative technique, immobilization and postoperative management, prosthetics and rehabilitation of patients after intervention for jaw deformities.2</p>	PII	6
18.	Bone grafting of the jaws.1	PII	6

	Types and causes of defects of the mandible. Indications for bone grafting. Types of grafts. Biological justification of bone grafting. 2		
	Bone grafting of the jaws.1 Autografting to eliminate defects of the mandible. Preparation for surgery. Methods of fixation of grafts and fragments of the mandible in bone-plastic surgeries (titanium miniplates, titanium reconstructive rods, shape-memory metal, splints, positioners, bimaxillary dental splints, extraoral devices).2		
	Bone plastic of the jaws.1 Possibilities of application of preserved bone and methods of preservation. Advantages, disadvantages. Indications. Features of operative technique.2		
19.	Bone grafting of the jaws.1 Features of bone grafting of the mandible in case of fresh gunshot wounds and removal of tumors (primary bone grafting). Distraction method in the treatment of jaw defects.2	PII	6
	Combined bone grafting.1 Definition of the concept. Indications. Features of operative technique.2		
	Contour grafting to correct the shape of the face and jaws.1 Definition of the concept. Possibilities of using auto- and allografting of various tissues, implants, and endoprostheses in maxillofacial surgery. Indications. Features of surgical techniques.2		
	Control of independent work		
20.	Aesthetic surgery.1 Definition of the concept of aesthetic surgery. Aesthetic proportions of the face. Indications and contraindications to aesthetic operations on the face.2	PII	6
	Wrinkles of the face and neck.1 Clinic, diagnostics, classification, treatment.2		
	Deformities of the auricles. Deformities of the nose.1 Clinic, diagnostics, classification, treatment.2		
	Control of knowledge, skills, and abilities		
	Total in the 10th semester		60
	Total for the discipline		120

¹ – тема

² – сущностное содержание

³ – РП – работа с пациентом

⁴ – один тематический блок включает в себя несколько занятий, продолжительность одного занятия 45 минут, с перерывом между занятиями не менее 5 минут

Рассмотрено на заседании кафедры хирургической стоматологии и челюстно-лицевой хирургии, протокол от «17» мая 2025 г., № 9.

Заведующий кафедрой

Е.Н.Ярыгина