

Syrian Private University Faculty of Dentistry Department of Oral Medicine

Extraoral projections



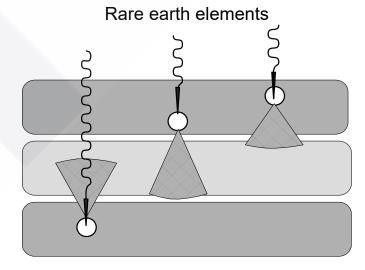


lmad Brinjikji

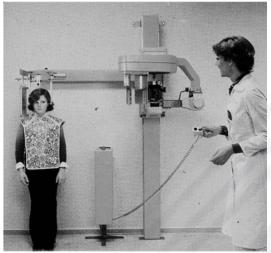
- In extraoral projections, the X-ray source, the receptors and the patient remain static.
- However, in some digital devices, the receptors and/or the source move during the exposure.
- This is the result of using digital detectors with smallarea to reduce the cost of the device.
- Film with intensifying screens may also be used in this technique.

Cassette/Film

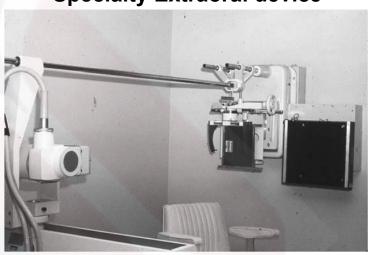




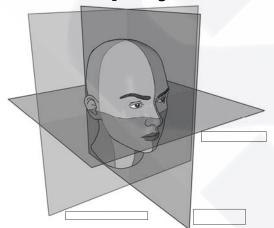
Panoramic / Cephalometric device



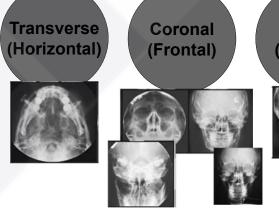
Specialty Extraoral device



Extraoral projections



Extraoral projections







Nonorthogonal planes

TMJ projections

Oblique mandibular projections

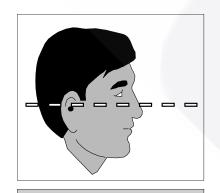
The main use of extraoral projections

- Evaluation of cranium, face, or cervical spine for diseases, trauma, or abnormalities.
- Lateral cephalometric radiograph is used for evaluating growth and development of the face, or treatment progression.

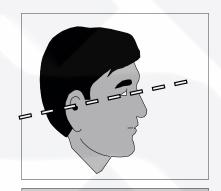


Canthomeatal line is important in extraoral projections.

- This line extent from the central point of the external auditory canal to the outer canthus of the eye.
- This line forms approximately 10⁰ with Frankfort plane (which extends from the superior border of the external auditory canal with the infraorbital rim.
- Usually we change head position in the different projections. Receptors and X-ray source remain static.



Frankfort plane



Canthomeatal line

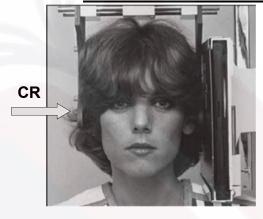
Sagittal (Median) plane

Lateral Cephalometric

extraoral x-ray unit film horizontal film at set distance from MSP

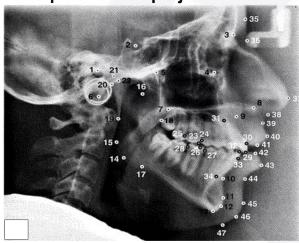
- o Film is parallel to midsagittal plane.
- o Central ray (CR) is centered over the external auditory meatus.

Lateral Cephalometric





The lateral cephalometric projection



Coronal (Frontal) plane

I. Posteroanterior (PA) Skull

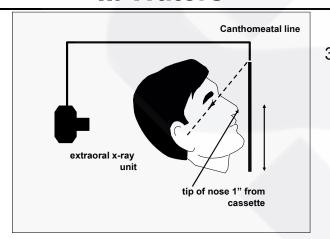
MSP Canthomeatal line 100 extraoral x-ray unit

I. Posteroanterior (PA) Skull

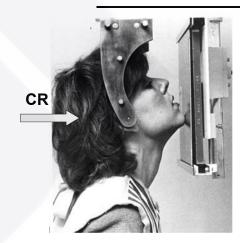




II. Waters



II. Waters

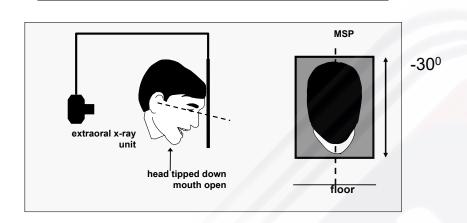




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III. Reverse Townes

III. Reverse Townes

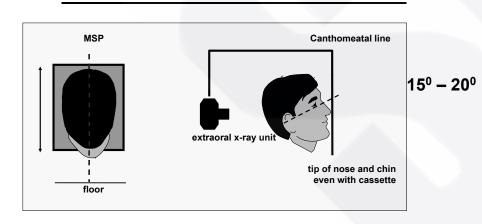


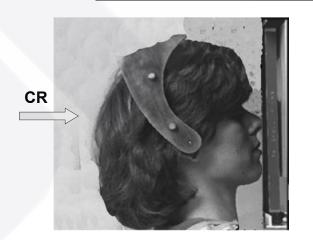




IV. Caldwell

IV. Caldwell

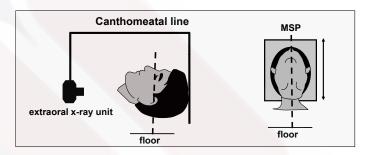


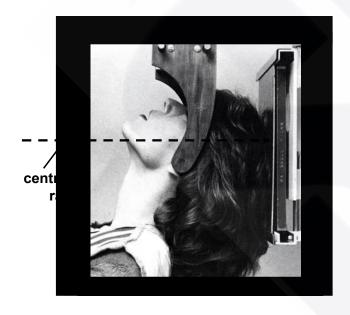




Submentovertex

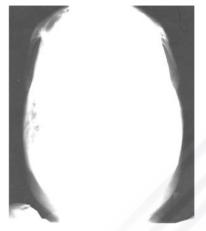
Transverse (Horizontal) plane







Zygomatic Arch View



Reduce exposure by one-third





Water's



Caldwell



PA



Reverse Townes



Submentovertex



Lateral Ceph

Mandibular oblique lateral projections

Mandibular oblique body projection

Mandibular oblique body projection

The beam is directed a the premolar-molar area.







Mandibular oblique ramus projection

The beam is directed a the ramus area.

CR



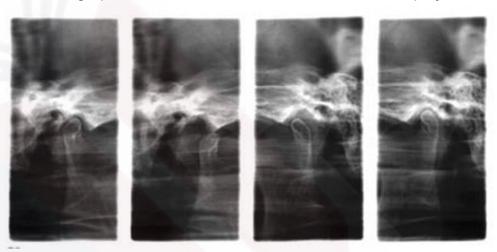
Mandibular oblique ramus projection





	Lateral Ceph	SMV	Waters	PA Ceph	Reverse Towne	Oblique Body	Lateral Ramus	Panoramic	
Anterior mandible]
Mandibular body						100			
Ramus									Low usefulness Medium usefulness
Coronoid process									High usefulness
Condylar neck									No symbol: not recommended
Condylar head									
Anterior maxilla									
Posterior maxilla									
Orbit									
Zygoma									
Zygomatic arch									
Nasal bones									
Nasal cavity									
Maxillary sinus									
Frontal sinus			- 20						
Ethmoid sinus									
Sphenoid sinus		100							

This radiograph is more common for TMJ instead of TMJ projections



SHE END

	Lateral Ceph	SMV	Waters	PA Ceph	Reverse Towne	Oblique Body	Lateral Ramus	Panoramic
Anterior mandible								
Mandibular body								
Ramus								
Coronoid process								
Condylar neck								
Condylar head								
Anterior maxilla								
Posterior maxilla								
Orbit								
Zygoma								
Zygomatic arch								
Nasal bones								
Nasal cavity								
Maxillary sinus								
Frontal sinus								
Ethmoid sinus								
Sphenoid sinus								

Low usefulness

Medium usefulness

High usefulness

No symbol: not recommended