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Learning Objectives

After completion of this exercise, the participant will be able to:

1. Describe the use of Invisalign First in treating Phase I cases in the early mixed dentition.

2. Compare records obtained from photographs to those from plaster or digital study models.

3. Discuss possible extraction options in patients with asymmetrical impairment of the first molars.

4. Contrast various systems for pretreatment observation and recall.

Article 1

Blevins, R.: *Phase I Orthodontic Treatment Using Invisalign First* (pp. 73-83)

1. A successful Phase I treatment:

a) sets up an optimal environment for the remaining dental development

- b) makes Phase II relatively straightforward
- c) establishes a baseline for patient expectations
- d) all of the above

2. Compared with traditional fixed appliances, Invisalign First clear aligners:

a) have fewer dietary restrictions

- b) can be used in any age group
- c) allow treatment to be started earlier
- d) all of the above

3. The most common problem among the author's Invisalign First patients was:

- a) poor oral hygiene
- b) lack of compliance
- c) loss of aligners
- d) the need for emergency appointments

4. The author found the ideal time to start Phase I treatment with clear aligners was:

a) after loss of the first deciduous molars

b) when the first and second deciduous molars would be stable for eight to 12 months

c) when the second deciduous molars were becoming mobile

d) shortly after the permanent upper canines had erupted

Article 2

Jerrold, J.; Schulte, M.; and Isaacs Henry, J.: *Can Intraoral Photography Replace Plaster and Digital Models in Clinical Practice? A Preliminary Investigation* (pp. 84-99)

5. The term "standard of care" incorporates all of the following concepts except the:

a) degree of care and skill possessed by the average practitioner in good standing

- b) clinimetrics of risk-benefit analysis
- c) degree of knowledge available at the time

d) acts performed by a "respectable minority" of practitioners

6. Drawbacks of plaster casts include:

a) dimensional deformation caused by variations in moisture absorption or loss

b) the time and effort spent by clinicians in hand-measuring models

c) storage space, proximity, and cost

d) all of the above

7. The standard proposed for clinically adequate dental photography is:

a) whether more than 10% of the photographs

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need to be retaken

b) .1mm for every 1cm of distance from the focal point

c) accuracy of data within 1mm of the actual measurements

d) validity for pre-authorization and reimbursement by third-party payers

8. In routine cases from the authors' preliminary clinical study, the examiners who measured data from photographs were within 1mm of the actual cast measurements for all of the following except:

- a) overbite and overjet
- b) upper and lower anterior crowding
- c) posterior crossbite
- d) palatal soft-tissue contact

Article 3

Campos, M.J.D.; Caetano, P.L.; Lupatini, P.M.; Campos, J.D.F.D.; and Vitral, R.W.F.: *Asymmetrical First Molar Extractions* (pp. 107-113)

9. The teeth most commonly indicated for extraction are the:

- a) first premolars
- b) second premolars
- c) first molars
- d) lower incisors

10. The first molars are the permanent teeth that tend to display the most structural damage because they are:

- a) the first permanent teeth to erupt
- b) the widest teeth to erupt
- c) the most posterior teeth to erupt early
- d) both a and c

11. Extraction of first permanent molars tends to produce:

a) clockwise mandibular rotation

b) marked mesiolingual inclination of the second molars

- c) a dental midline deviation
- d) both a and b
- 12. In this case, anchorage was reinforced by: a) mini-implants
 - a) mini-implants 1
 - b) a transpalatal bar and headgear
 - c) a lip bumper
 - d) Class II elastics

Article 4

Sinclair, P.M.: *The Readers' Corner* (pp. 117-121) 13. In this informal survey, completely computerized observation and recall systems were used by:

- a) 10% of the respondents b) 48% of the respondents
- b) 48% of the respondentsc) 84% of the respondents
- d) 97% of the respondents

14. The most common standardized recall interval reported was:

- a) six months
- b) nine months
- c) 12 months
- d) 18 months

15. The most common method of contacting parents to set up recall appointments was:

- a) e-mail
- b) mailed note or postcard
- c) text message
- d) telephone call

16. The mean percentage of recall patients who eventually started treatment was:

- a) 50%
- b) 67%
- c) 74%
- d) 80%