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Learning Objectives

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

- 1. Discuss the career and treatment philosophy of Dr. David Sarver.
- 2. Describe a new customized prescription system for passive self-ligating brackets.
- 3. Plan miniplate anchorage to correct a skeletal anterior open bite in an adult patient.
- 4. Perform a technique for superimposing a digital occlusal plane over the patient's occlusal plane in natural position.

Article 1

Sarver, D.M. and Sinclair, P.M.: *Master Clinician: David M. Sarver, DMD, MS* (pp. 147-158)

- 1. The intrusion utility arch is effective because it:
 - a) bypasses the premolars
 - b) generates less force than a continuous wire
 - c) has a long lever arm
 - d) all of the above
- 2. Tonal gradation refers to incremental but proportionate changes in any of the following except:
 - a) shade
 - b) size
 - c) color
 - d) saturation
- 3. The oblique view of the patient's smile can also be referred to as the:
 - a) social view
 - b) side view
 - c) esthetic view
 - d) smile arc
- 4. Interdisciplinary treatment to improve smile

esthetics may include:

- a) interdental corticotomy
- b) laser gingivectomy
- c) periodontal crown lengthening
- d) any of the above

Article 2

Tocolini, D.G.; Topolski, F.; Moro, A.; and Correr, G.M.: *The T-Control Philosophy and Prescription for Passive Self-Ligating Brackets* (pp. 159-169)

- 5. In a passive self-ligating system with .022" slots and an .019" \times .025" archwire, the play between bracket and slot ranges from:
 - a) 2.9° to 7.8°
 - b) 2.9° to 8.4°
 - c) 7.8° to 23.9°
 - d) 8.4° to 23.9°
- 6. The T-Control prescription is an individualized modification of the:
 - a) Roth prescription
 - b) MBT prescription
 - c) Pitts prescription
 - d) Damon prescription
- 7. In this system, to achieve more physiological transverse remodeling using low-force copper nickel titanium wires from the beginning of treatment:
 - a) the upper archform is used in both arches
 - b) the lower archform is used in both arches
- c) intermaxillary elastics are used in the early treatment stages
- d) bite-raising devices are used to unlock the occlusion
- 8. To avoid being misled by a posterior crossbite resulting from pseudoprognathism:

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- a) tomographic images should be superimposed over the facial images
- b) model surgery should be performed with the casts positioned in a Class I molar relationship
- c) compensatory treatment should be planned to correct the anteroposterior discrepancy
 - d) all of the above

Article 3

Sousa, R.L.D.S.; Ertty, E.; Portes, M.I.P.; Meloti, F.; and Cardoso, M.D.A.: *Miniplate Anchorage for Correction of Skeletal Anterior Open Bite in an Adult* (pp. 175-184)

- 9. A long-face syndrome is characterized by:
 - a) alveolar hyperplasia
 - b) counterclockwise mandibular rotation
 - c) skeletal anterior open bite
 - d) both a and b
- 10. When the oral cavity remains open due to an altered breathing pattern:
- a) the tongue assumes a lower and more anterior resting position
- b) the tongue may lose contact with the upper posterior teeth
 - c) an anterior or posterior open bite may result
 - d) all of the above
- 11. The SYM Protocol is based on:
 - a) anteroposterior radiography
 - b) cone-beam computed tomography
 - c) digital intraoral scanning
 - d) model surgery
- 12. The term "tensegrity" describes the:
 - a) patient's smile esthetics at rest
- b) ability to achieve optimal results without extractions or orthognathic surgery

- c) long-term stability of a system's morphology
- d) effectiveness of a bracket prescription

Article 4

Bruni, A.; Serra, F.G.; Martinetti, F.; and Di Gioia, M.: *Orientation of the Occlusal Plane in Virtual Treatment Planning* (pp. 185-186)

- 13. In virtual treatment-planning software, the occlusal plane is usually oriented:
 - a) parallel to the floor
 - b) parallel to the Frankfort horizontal plane
 - c) to the patient's natural head position
- d) by superimposing it on the patient's lateral cephalogram
- 14. Images needed to perform the authors' technique include all of the following except:
 - a) lateral radiograph of the skull
- b) full-face frontal photograph with cheek retractors in place, or anteroposterior (AP) radiograph of the skull
 - c) profile photograph in posed smile
- d) full-face frontal photograph in posed smile 15. Sagittal orientation of the digital model requires importation into the treatment presentation software of the lateral radiograph and the:
 - a) frontal view of the digital model
 - b) right view of the digital model
 - c) AP radiograph
 - d) full-face frontal photograph
- 16. In the final step, the frontal view of the oriented model is superimposed over the:
 - a) frontal view of the digital model
 - b) right view of the digital model
 - c) AP radiograph
 - d) full-face frontal photograph

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