

# CONTINUING EDUCATION

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## Learning Objectives

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

1. Describe a protocol for orthodontic closure of missing lower second-premolar spaces using skeletal anchorage.
2. Discuss the effects of the Carriere Motion Appliance in Phase I treatment of young Class II patients.
3. Adapt a Storino Leash to help upright the incisors during the finishing stage.
4. Evaluate various options for treatment of an ankylosed permanent molar.

## Article 1

Kasssieh, S.; Bodirolga, N.; and Gousman, J.: *Space Closure for Congenitally Missing Lower Second Premolars Using Temporary Anchorage Devices* (pp. 268-284)

1. Lower second premolars are the most common congenitally missing teeth next to:
  - a) upper second premolars
  - b) lower canines
  - c) lower second molars
  - d) third molars
2. Under the authors' protocol, temporary anchorage devices are placed:
  - a) in the midpalate
  - b) in the edentulous areas
  - c) between the lower canines and premolars
  - d) in the retromolar regions
3. Care is taken to prevent supraeruption of the opposing second molars by using:
  - a) a lingual holding arch

- b) a vacuum-formed upper retainer
  - c) an anterior anchorage unit
  - d) a reverse-curve archwire
4. Viable treatment options for patients with congenitally missing lower second premolars include all of the following except:
    - a) intentional ankylosis of the retained deciduous premolar
    - b) extraction of the deciduous premolar with subsequent implant placement
    - c) extraction of the deciduous premolar followed by orthodontic space closure
    - d) autotransplantation of another tooth

## Article 2

Clermont, A.; Albert, A.; and Bruwier, A.: *Effects of the Class II Carriere Motion Appliance in Phase I Treatment: A Randomized Controlled Trial* (pp. 285-293)

5. The Carriere Motion Appliance can be considered for Phase I treatment of Class II patients with:
  - a) cooperation issues
  - b) severe retrognathia
  - c) tongue or lip habits
  - d) anterior open bite
6. The mean pretreatment age of patients in the present study was:
  - a) 7.6
  - b) 8.2
  - c) 9.4
  - d) 11.0
7. Overjet and overbite remained stable in the control group and:
  - a) remained stable in the appliance group

- b) increased slightly in the appliance group
  - c) decreased slightly in the appliance group
  - d) decreased significantly in the appliance group
8. Adverse effects of the appliance included:
- a) proclination of the lower incisors
  - b) formation of upper anterior diastemas
  - c) clockwise rotation of the occlusal plane
  - d) all of the above

### Article 3

Kravitz, N.D.; Attkisson, B.; and Storino, D.: *A Modification of the Storino Leash* (pp. 297-298)

9. The Storino Leash was invented to control incisor flaring from:
- a) passive self-ligating brackets
  - b) active self-ligating brackets
  - c) standard ligated brackets
  - d) clear aligners
10. In its original application, the Storino Leash is placed with a:
- a) round nickel titanium archwire
  - b) rectangular nickel titanium archwire
  - c) stainless steel archwire
  - d) titanium molybdenum archwire
11. In the authors' modification, the Storino Leash is placed with a:
- a) round nickel titanium archwire
  - b) rectangular nickel titanium archwire
  - c) stainless steel archwire
  - d) titanium molybdenum archwire
12. The Storino Leash is primarily designed to apply:
- a) lingual crown tip
  - b) labial crown tip

- c) lingual crown torque
- d) labial crown torque

### Article 4

Takagi, T.; Shimizu, S.; and Tanaka, E.: *Alveolar Corticotomy for Extrusion of an Ankylosed Lower First Molar* (pp. 299-307)

13. The majority of ankylosed teeth are:
- a) maxillary incisors
  - b) mandibular canines
  - c) deciduous molars
  - d) permanent molars
14. Definitive diagnosis of ankylosis requires:
- a) radiographic evaluation of the periodontal ligament space
  - b) application of orthodontic force
  - c) percussion of the tooth
  - d) surgical extrusive luxation
15. Single-tooth osteotomy of an ankylosed molar has the advantages of:
- a) allowing rapid movement of a tooth with a bony block
  - b) enabling the soft-tissue pedicle to remain attached to the cortices
  - c) avoiding gingival recession
  - d) all of the above
16. Corticotomy of an ankylosed molar has the advantages of:
- a) being less invasive than other common surgical techniques
  - b) enabling bone augmentation
  - c) shortening treatment time
  - d) all of the above