

# CONTINUING EDUCATION

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## Learning Objectives

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

1. Discuss the applications and advantages of extraction-guided “driftodontics” (EGD).
2. Utilize temporary anchorage device (TAD)-supported mechanics for controlled eruption of a palatally impacted central incisor.
3. Describe the use of robotic aligner-trimming machines in private practice.
4. Follow a protocol for using the Isoglide eruption spring.

## Article 1

El-Bokle D, Kravitz ND. *Clinical outcomes of extraction-guided driftodontics* (pp. 305-317).

1. The term “driftodontics” was coined in the 1980s by:
  - a) Vincent Kokich
  - b) R.G. “Wick” Alexander
  - c) Thomas Creekmore
  - d) Thomas Mulligan
2. An ideal candidate for EGD would be in the:
  - a) deciduous dentition stage
  - b) early mixed dentition stage
  - c) late mixed dentition to early permanent dentition stage
  - d) complete permanent dentition stage
3. The underlying mechanism of driftodontics has been attributed to:
  - a) reconstruction of transseptal fibers after the periodontal ligament is disrupted by extraction
  - b) labial displacement of the canine roots during extrusion with labial appliances

- c) serial extraction during the mixed dentition
  - d) fibroblast contraction within the developing periodontal ligament
4. The rate and amount of drift are influenced by:
    - a) pressure from the lips and cheeks
    - b) the anterior component of orthodontic force
    - c) the patient’s age
    - d) all of the above

## Article 2

Ku J, Yadav S, Chen PJ, Schoettger R, Gandhi V. *Controlled eruption of a palatally impacted central incisor with TAD-supported T-bar mechanics* (pp. 318-326).

5. Factors contributing to impaction of maxillary central incisors include all of the following except:
  - a) supernumerary teeth
  - b) trauma to the deciduous dentition
  - c) a mouthbreathing habit
  - d) an ectopic eruption path
6. The first clinical indicator of an impacted central incisor is often:
  - a) delayed eruption compared to the contralateral tooth
  - b) radiographic imaging
  - c) dental crowding
  - d) anterior open bite
7. Emergence of teeth through nonkeratinized mucosa may create a risk of:
  - a) inflammation
  - b) gingival recession
  - c) root resorption
  - d) either a or b
8. The advantage of skeletal anchorage in these

cases is in:

- a) preserving periodontal health
- b) preventing undesirable side effects on adjacent teeth
- c) allowing reorientation of the attachment on the impacted tooth
- d) all of the above

**Article 3**

Groth C, Kumra B, Kravitz ND. *Robotic aligner-trimming machines* (pp. 334-337).

9. In the Trimlign2 system, aligners are trimmed with a:

- a) rotating cutting bur
- b) CO<sub>2</sub> laser
- c) computer numerical control (CNC) rotary cutting tool
- d) proprietary automated trimming machine

10. In the Laser Aligner Cutter system, aligners are trimmed with a:

- a) rotating cutting bur
- b) CO<sub>2</sub> laser
- c) CNC rotary cutting tool
- d) proprietary automated trimming machine

11. Advantages of robotic aligner trimming include:

- a) increased throughput of aligners
- b) reduced variability in aligner margins
- c) less need for remakes or chairside adjustments
- d) all of the above

12. Disadvantages of robotic aligner trimming include:

- a) inability to customize aligner margins

- b) increased chairtime for fitting
- c) need for skilled operators
- d) all of the above

**Article 4**

Coleman GG. *Protocol for the Isoglide eruption spring* (pp. 339-347).

13. The most common type of maxillary canine impaction is:

- a) midalveolar
- b) labial
- c) buccal
- d) palatal

14. During activation, the Isoglide eruption spring delivers an eruptive force of:

- a) 30-50g
- b) 40-90g
- c) about 100g
- d) about 150g

15. Before surgical exposure of an impacted canine and placement of an Isoglide spring, the orthodontist should perform leveling and alignment, working up to an archwire of at least:

- a) .018" nickel titanium
- b) .016" × .022" nickel titanium
- c) .016" × .022" stainless steel
- d) .019" × .025" stainless steel

16. During forced eruption of the impacted tooth, the archwire should:

- a) not be changed
- b) be stepped back in size
- c) be changed at regular appointment intervals
- d) gradually be increased in size