

June 2022 Continuing Education

CE Editor: Dr Allen H. Moffitt

Instructions: To submit your answers to this test and earn 3 hours of CE credit, go to www.aaoinfo.org and log in as a member. Select the Education tab, then AJO-DO Tests. Purchase the current test, or the test for any issue published in the preceding 12 months. The fee for each test is \$20. You will take the test online but can download and print a PDF version of the test. Results are tabulated immediately. To earn 3

hours of CE credit, you must answer 75% of the questions correctly. If you do not receive a passing score the first time, you can take the test again, free of charge, until you pass. Upon successful completion of the test, your CE credits will be added to the AAO's online CE Credit Manager, and you can use the CE Credit Manager to print a certificate.

JUNE 2022 LEARNING OBJECTIVES

After completing this course, the participant will have:

1. An understanding of how the 6-month survival rate for infra-zygomatic crest bone screws is influenced by several defined parameters.
2. Knowledge concerning the available space posterior to second molars in the maxillary and mandibular arches of adult patients.
3. Awareness of factors that may influence treatment planning decisions for the orthodontic treatment of Class II malocclusion.
4. Familiarity with what has been learned since 1992 concerning orthodontics and its relationship to temporomandibular disorder.

Article 1: Success of infrazygomatic crest bone screws: patient age, insertion angle, sinus penetration, and terminal insertion torque, by Chris H. Chang et al

1. The purpose of this study was to investigate infrazygomatic temporary anchorage devices (TADs) survival (success) relative to TAD insertion angle, sinus penetration, and terminal insertion torque.
 1. True
 2. False
2. One hundred consecutive patients requiring bilateral infrazygomatic anchorage were prospectively selected for the sample population.
 1. True
 2. False
3. The authors reported the incidence of sinus penetration increases with a more upright insertion angle of an infrazygomatic crest (IZC) TAD and in adults aged .30 years.
 1. True
 2. False
4. The authors concluded that sinus penetration is an acceptable complication for 2 mm diameter stainless steel TADs because it has no significant effect on TAD survival.
 1. True
 2. False

Article 2: A cone-beam computed tomography evaluation of posterior available space in both arches relative to various skeleton patterns, by Ki-Jun Kim et al

5. This study aimed to evaluate the posterior available space (PAS) in both dental arches of adult patients with varying skeletal patterns using cone-beam computed tomography.
 1. True
 2. False

6. The exclusion criteria for selecting sample participants were as follows: ectopic eruption of the second molars in both arches, previous orthodontic treatment, and skeletal asymmetry.
 1. True
 2. False
7. The authors reported that PAS was similar in the maxillary and mandibular arches.
 1. True
 2. False
8. The authors concluded that facial height ratios demonstrated no difference between the PAS of the maxilla or the mandible when comparing normovergent or hyperdivergent and hypodivergent subjects.
 1. True
 2. False

Article 3: Factors influencing the orthodontic treatment plan in Class II malocclusion, by Doaa H. Alsaggaf et al

9. This study aimed to investigate the influence of orthodontists' demographic and patient characteristics on the orthodontic treatment plan decision for borderline Class II Division 1 malocclusion in adult patients.
 1. True
 2. False
10. The response to the study's survey comprised 113 orthodontists.
 1. True
 2. False
11. The authors reported that the orthodontists in the study used the patient profile as the most appraised factor regardless of their selected treatment plan.
 1. True
 2. False
12. The authors concluded that the orthodontic treatment plan formulation for growing patients with Class II malocclusion is a product of an interplay of many factors, but those factors related to the patient's malocclusion were primary.
 1. True
 2. False

Article 4: Temporomandibular disorders and orthodontics: What have we learned from 1992 to 2022?, by Sanjivan Kandasamy et al

13. Dentistry and orthodontics were influenced by the gnathological philosophy of harmonizing occlusal relationship with jaw function by establishing canine-protected occlusion and attaining the coincidence of maximum intercuspation with centric relation of the mandible.
 1. True
 2. False
14. In 1992, the January issue of the American Journal of Orthodontics and Dentofacial Orthopedics was dedicated to orthodontics and the temporomandibular joint (TMJ). One of the 7 conclusions from the available evidence purported that the potential for the development of temporomandibular disorder (TMD) can be predicted using appropriate diagnostic methods.
 1. True
 2. False
15. The Orofacial Pain: Prospective Evaluation and Risk Assessment trials in the first part of this century have confirmed that a dental and mechanical-based model of TMD care has merit.
 1. True
 2. False
16. The authors recommended several suggestions that a contemporary orthodontist should consider on the basis of currently available evidence. One of those suggestions was to conduct a thorough TMD examination and/or screening before commencing orthodontic treatment.
 1. True
 2. False