

CPD QUESTIONNAIRE 7.3.1

Article: Minimally invasive veneer restoration with ceramic-based restorative material. Watanabe, page 4

- Which, according to the author, is one possible aesthetic restoration treatment?
 - Composite fillings
 - Indirect composite veneers
 - Both of the above
 - Neither of the above
- In the case study described:
 - Orthodontic retreatment was an option
 - Orthodontic retreatment was not an option
- The material selected by the clinician contained:
 - Conventional methacrylate-based monomers
 - A ceramic matrix
- After applying a small quantity of each of the possible shades to the vestibular surface of one of the teeth to be restored and curing it, the shade selected was:
 - A2
 - A1
 - B2
- In order to clean and roughen the interior surfaces of the veneers, the surfaces were:
 - Sandblasted with aluminium oxide (60µm) at a pressure of 90psi
 - Sandblasted with aluminium oxide (90µm) at a pressure of 60psi

Article: Aesthetic rehabilitation and tissue preservation in the anterior region. Güth, Stecher, page 16

- In the case study described, the patient had:
 - Suffered an anterior tooth trauma
 - Suffered a posterior tooth trauma
- Which statement is true: during the initial treatment
 - Tooth 21 was preserved, while tooth 11 was not
 - Tooth 11 was preserved, while tooth 21 was not
 - Neither tooth 21 nor tooth 11 were preserved
 - Both tooth 21 and tooth 11 were preserved
- The decision by the prosthodontic team to place an all-ceramic adhesive bridge with two wings bonded to teeth 12 and 22 was due to
 - Minimal transversal and horizontal growth was still to be expected for the patient
 - The unfavourable prosthetic value of the abutment teeth
 - Both of the above
 - Neither of the above
- Alternatives to the selected treatment option were:
 - Two two-unit adhesive bridges with one wing each
 - Implants
 - A removable partial denture
 - a and b
 - a and c
- The restoration was planned as a:
 - Long-term temporary
 - Short-term temporary

CPD QUESTIONNAIRE 7.3.2

Article: Surgical soft tissue improvement in the course of implant therapy. Bäumer, Zuhr, Hürzeler, page 32

- According to the authors, which of the following new surgical techniques are implemented to achieve better results:
 - Tissue-conserving extraction methods
 - The application of modern incision and suturing techniques
 - Careful pre-implantation diagnostics
 - All of the above
 - None of the above
- Which statement is true: according to the authors, currently
 - Attention is paid more to the survival rate than the esthetic outcome
 - Attention is paid more to the esthetic outcome than the survival rate
- In the course of implant therapy, during which points in time is there the possibility of improving peri-implant soft tissue:
 - At implant placement
 - At the time of tooth extraction
 - At implant uncoverage
 - All of the above
 - None of the above
- "Socket seal surgery" is a method initially reported by:
 - Jung et al. 2004
 - Landsberg & Bichacho 1994
 - Carmagnola et al. 2003
- To avoid the need to harvest autologous tissue, which replacement materials were introduced to the market:
 - Xenogenous
 - Alloplastic

Article: Surgical soft tissue improvement in the course of implant therapy. Bäumer, Zuhr, Hürzeler, page 32

- Soft tissue augmentation can be done in terms of ridge preservation in conjunction with immediate implants if the buccal lamella is intact:
 - And appears to have a thickness of at least 0,5 mm
 - And appears to have a thickness of at least 1,5 mm
 - And appears to have a thickness of at least 1 mm
- The "modified double-layer technique" is recommended for sites:
 - With comparatively small defects
 - With large defects
 - With no defects
- According to Blanco et al. 2005, non-crosslinked membranes show a low complication rate of
 - 15%
 - 10%
 - 20%
- According to the authors: If a buccal tissue deficit is no longer present, a minimally invasive individualized mucosal punch procedure can be used to uncover the implant.
 - True
 - False
- Which statement is correct:
 - If the implant is uncovered by simple tissue punch, fabrication of the final restoration can begin 3 months later
 - If the implant is uncovered by simple tissue punch, fabrication of the final restoration should not begin until 5 months later