CPD QUESTIONNAIRE 12.4.1

Article: Masterclass in Implant Dentistry: The importance of keratinized tissue around dental implants. Van Zyl, Snyman, page 6

- True or false: The alveolar mucosa is firmly bound to the underlying lamina propria and is therefore immobile.
- a True
- b False
- 2. The width of the band of attached gingiva around teeth varies from site to site and the range of variation is between?
- a 1-3 mm
- b 2-6 mm
- c 1-9 mm
- d 3-12 mm
- True or false: Compared to natural teeth, the soft tissue around dental implants provides less of an anatomical barrier as it does not have inserting fibers attaching to the implant or abutment.
- a True
- b False
- 4. A reduced width of keratinized tissue around dental implants is associated with?
- a Soft-tissue inflammation
- b Greater patient discomfort
- Mucosal recession, marginal bone loss and an increased prevalence of periimplantitis
- d All of the above
- 5. When can an epithelial palatal transplant be performed to increase the width and thickness of keratinized tissue around implants?
- a Before implant placement
- b Simultaneous with implant placement
- c After implant placement
- d All of the above

Article: Masterclass in Endodontics: Magnification in Endodontics. Van der Vyver, Vorster, page 10

- 6. Which of the following are considered advantages of using the dental operating microscope in endodontics?
- a Illumination

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- b Documentation and patient communication
- c Improved ergonomics
- d All of the above
- 7. According to Burton et al., at which age does vision physiologically to deteriorate?
 - 60 years b 30 years
- d Between 50-60 years
- The ideal magnification for locating and identifying canal orifices in endodontics is?
- a > 4 times b 2-3 times
- c 1-2 times d None of the above
- 9. High level magnification refers to which of the following?
- a 3-8 times magnification
- b 8-16 times magnification
- c 16-30 times magnification
- d None of the above
- 10. Magnification is considered essential in which of the following procedures?
- a File fracture removal
- b Placement of MTA plug in apical portion of roots
- c Identifying cracks and fractures
- d All of the above

CPD QUESTIONNAIRE 12.4.2

Article: Simple adhesive luting in everyday practice Zorzin, page 18

- 11. Which statement is correct:
- a. When using self-adhesive resin cements, no pre-treatment of the hard tooth substances is necessary
- When using self-adhesive resin cements, pre-treatment of the hard tooth substances is necessary
- 12. In Case 1, which tooth had to be extracted?
- a. Tooth 23
- b. Tooth 24
- c. Tooth 25
- 13. Which cleaning agent is not recommended by the author?
- a Alcohol
- b Phosphoric acid
- c Both of the above
- 14. What, according to the author, are the advantages of using rubber dam?
- a Infection prophylaxis for the treatment team
- b Increased patient comfort
- c Time-saving
- d All of the above
- 15. After pre-treatment of the restorations in Case 2, the enamel surfaces of the cavity were etched with
- a 35% phosphoric acid gel for at least 15 sec
- b 5% hydrofluoric acid for 20 seconds
- c 35% hydrofluoric acid for 20 seconds
- d 5% phosphoric acid gel for at least 15 sec

Article: Deep shape in endodontics. Machtou, West and Ruddle, page 40

- 16. According to the authors, MIE stands for:
- a Mandibular incisor extraction
- b Minimally invasive endodontics
- c Micro instrumentation endodontics
- According to Zahner, 2006, the most difficult zone to clean and disinfect is:
- a The apical third
- b The middle third
- c The cervcial third
- 18. Following Kerekes and Tronstad's (1979) studies, who were the first to advocate extensive reaming in the apical region to reduce the endodontic source of bacterial infection?
- a Rollison, Barnett and Stevens in 2002
- b Dalton and colleagues in 1998
- Ørstavik, Kerekes and Molven in 1991
- 19. What is the main drawback of larger apical preparations?
- a The increased risk of creating adverse introgenic errors
- b Reduced apical periodontitis healing
- c An increase in post-operative pain.
- 20. In the Toronto study phase four (de Chevigny et al, 2008), what was the healing rate of the Schilder shaping technique with warm vertical compaction of gutta percha compared with the standardised technique with lateral condensation?
- a 77% versus 87%
- b 87% versus 77%
- c 67% versus 77%