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A Service of the Gordon J. Christensen Career Development Program

X4111 Extraction Techniques for the General Dentist

Karl R. Koerner, DDS, MS Gordon J. Christensen, DDS, MSD, PhD

Materials Included:

C.E. Instruction Sheet
Products List
AGD Post-Test

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Sources of Products Discussed in

X4111 Extraction Techniques for the General Dentist

Presented by Karl R. Koerner, DDS, MS

Product Name	Company Name	Phone Number
Arkansas Sharpening Stone, Conical	HuFriedyGroup	800-483-7433
Contemporary Oral and Maxillofacial		
Surgery, 7 th Edition by Hupp, Ellis, and	Elsevier	800-545-2522
Tucker INSTRUMENTS MENTIONED:		
#30 Hedstrom file	Various Companies	
Elevators – 34, mini Cryer	HuFriedy and Various Companies	800-483-7433
Forceps – 150, 53 R, 88 R	HuFriedy and Various Companies	800-483-7433
Root Tip Pick	<u>HuFriedy</u> and Various Companies	800-483-7433
Serrated Molt Curette #2	HuFriedy and Various Companies	800-483-7433
Luxator	Directa Inc.	203-491-2273
OMS Handpiece	Bien-Air USA, Inc.	800-433-2436
Oral & Maxillofacial Surgery Review: A Study Guide by Lam and Laskin	Amazon and Various Sellers	
OraPlug	Salvin Dental Specialties, Inc.	800-535-6566
OsteoGen Plugs	Impladent Ltd.	800-526-9343
<u>Piezo</u>	Osada, Inc.	800-426-7232
Surgical Burs – 8 round, 10 round, 702, 701, 703	Various Companies	
SURGICEL Powder	Ethicon (Part of Johnson & Johnson)	877-384-4266
SURGIFOAM Gelatin Powder Kit	Ethicon (Part of Johnson & Johnson)	877-384-4266
WoundClot	Core Scientific North America, Inc.	805-225-4920
Zimmer Collagen Plug	Zimmer Biomet	800-342-5454

Product names, the products themselves, and company names change rapidly. Please contact the companies shown to confirm current information.

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POST-TEST

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- 1. When preparing a patient for a surgical procedure, which is NOT indicated?
 - a. Pre-op vital signs
 - b. Consent form
 - c. Not updating health history
 - d. Good radiographs
- 2. To avoid fracturing facial/buccal bone, Dr. Koerner recommends using all BUT the following:
 - a. radiographs.
 - b. excessive force with forceps.
 - c. feeling with fingers as you go.
 - d. gauging pressure as you go.
- 3. Which instrument should be used into the PDL following the troughing with a skinny bur?
 - a. Explorer
 - b. Composite placement instrument
 - c. Tissue forcep
 - d. 3mm Luxator
- 4. Which of the following burs is **NOT** recommended for surgical use?
 - a. #8 round
 - b. Periotome bur
 - c. #701
 - d. #072 Lab carbide
- 5. Which technique should be applied when using a Luxator?
 - a. Place in PDL, push and wiggle 4mm down, turn clockwise/counterclockwise and hold for 8-10 seconds with sustained pressure.
 - b. Pry back forcefully while moving the luxator apically.
 - c. Use same technique as a large Cryer elevator.
 - d. Luxator use is not recommended.
- 6. Dr. Koerner describes an example of "excessive force" as:
 - a. a firm handshake.
 - b. lifting a small box.
 - c. arm wrestling.
 - d. pushing a door open.

POST-TEST

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- 7. According to Hupp J. et al. Contemporary Oral and Maxillofacial Surgery 7th ed., which size opening should you acquire primary closure?
 - a. Primary closure is not recommended
 - b. >5-6 mm or a chronic sinus condition
 - c. <2mm
 - d. Any suspected sinus perforation
- 8. Which product would <u>NOT</u> be a good replacement for Gelfoam, which is no longer available?
 - a. OsteoGen Plug (Impladent Ltd.)
 - b. WoundClot (Core Scientific Creations)
 - c. 2-inch cotton rolls
 - d. Surgifoam (Ethicon)
- 9. Which is the desired and attainable goal with a surgical site?
 - a. An absolutely sterile surgical field
 - b. Use of non-sterile water or saline
 - c. There is no need for infection control while doing surgery
 - d. To prevent any organisms from the surgical staff or other patients from entering the patient's wound.
- 10. The coolant/irrigant recommended while performing surgical procedures is:
 - a. bottled, non-sterile water.
 - b. non-sterile saline.
 - c. unfiltered dental unit water.
 - d. sterile saline or sterile water.
- 11. If a root is broken and the decision is made to leave, which should occur?
 - a. Inform the patient.
 - b. Record well in chart.
 - c. Take radiograph for documentation.
 - d. All the above.
- 12. Which is NOT a concern when extracting a canine?
 - a. The degree of wear on the crown.
 - b. Is the crown of the canine present and can I use a forcep?
 - c. How wide is the interseptal bone on each side?
 - d. Are there teeth adjacent to the canine to be extracted?
- 13. Which characteristic(s) of a canine contribute to the difficulty of its removal?
 - a. A long root
 - b. Ligament toughened by stronger occlusal forces
 - c. Dense bone, especially in older patients
 - d. All the above

POST-TEST

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- 14. For less trauma, which could be used instead of a bur in the PDL before forceps are used?
 - a. Rongeurs
 - b. Bone file
 - c. A bone chisel
 - d. Piezo blade
- 15. When a maxillary posterior root tip is deep in the socket, what is <u>NOT</u> recommended for helping to remove?
 - a. Serrated Molt #2 Curette
 - b. #30 Hedstrom file, 31 mm length
 - c. #151 lower universal forceps
 - d. Root tip pick

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