

PRACTICAL CLINICAL COURSES
*A Service of the Gordon J. Christensen
Career Development Program*

X4356
Making Perio a Successful Part of Your Practice

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Materials Included:
C.E. Instruction Sheet
AGD Post-Test

Gordon J. Christensen
PRACTICAL CLINICAL COURSES

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POST-TEST

X4356 Making Perio a Successful Part of Your Practice

1. Periodontitis is a public health concern that can affect patients with consequences of:
 - a. Tooth loss
 - b. Oral disability
 - c. Compromised chewing
 - d. Compromised aesthetics
 - e. All the above

2. For appropriate patient assessment, periodontal charting is advised to be taken:
 - a. For every new patient exam
 - b. At the 4- to 6-week re-evaluation
 - c. Annually
 - d. All the above

3. The new American Academy of Periodontology Disease Classification system has HOW MANY STAGES of disease severity for PERIODONTITIS?
 - a. 1
 - b. 2
 - c. 3
 - d. 4

4. Periodontitis is a disease characterized by WHICH of the following features:
 - a. Progressive
 - b. Multifactorial
 - c. Chronic
 - d. Elicits an inflammatory response
 - e. All the above

5. When we assess patient hygiene compliance and use plaque disclosing assessment scores (aka the "O-Leary Index"), what is the score to be considered ideal plaque control or effective hygiene?
 - a. <20%
 - b. <40%
 - c. <75%
 - d. <100%

6. INITIAL PERIODONTAL therapy for DISEASE CONTROL can include all, EXCEPT:
 - a. Scaling and root planing
 - b. Occlusal adjustment
 - c. Implant placement
 - d. Oral hygiene instructions

POST-TEST

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7. Implements that are commonly recommended by dental clinicians as a successful part of periodontal patient oral HOME CARE include all, EXCEPT:
 - a. Toothbrush
 - b. Oral irrigator
 - c. Flashlight
 - d. Interdental brush
 - e. Floss

8. The BEST time to provide patient home care instructions during a dental visit to hold their attention (and have a greater chance of compliance) is:
 - a. Never
 - b. At the start of the appointment
 - c. At the end of the appointment
 - d. Over the phone

9. Which antimicrobial oral rinse is approved by the Food and Drug Administration for antiplaque/antibacterial action with a scientifically proven benefit in treating gingivitis (and of periodontal benefit)?
 - a. Chlorhexidine
 - b. Cetylpyridinium Chloride
 - c. Phenols and Essential Oils
 - d. All the above

10. Which of the following is TRUE for OIL PULLING practice?
 - a. It is a holistic technique based on ancient Ayurvedic medicine.
 - b. The American Dental Association does not endorse it as a hygiene measure.
 - c. Scientifically proven benefit is controversial or absent.
 - d. To be practiced correctly, it must be implemented for at least 15 minutes a day.
 - e. All the above.

11. Ways the operator can improve effective scaling and root planing include all, EXCEPT:
 - a. Magnification
 - b. Adequate Local Anesthesia
 - c. Asking the patient to text and use their cell phone during the entire appointment
 - d. Adequate time allotted for the appointment

12. Which periodontal pocket depths are MOST likely for the clinician to be able to remove the GREATEST degree of accessible calculus and etiology from a root surface during scaling and root planing?
 - a. 4mm
 - b. 5mm
 - c. 6mm
 - d. 7mm

POST-TEST

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13. Which parameter is considered an ideal ENDPOINT of INITIAL THERAPY upon re-evaluation?
- a. Firm, pink gingiva
 - b. Pocket depths < 6mm
 - c. No or reduced bleeding upon probing
 - d. Excellent oral hygiene
 - e. All the above
14. Local delivery antibiotics, like Arestin, are indicated for which clinical situation?
- a. Localized, recurrent pockets ≥ 5mm with inflammation following conventional therapy
 - b. All periodontal pockets in a full-mouth case
 - c. Pockets <3mm with firm, pink gingiva
 - d. Extraction sockets
15. Which category of bone graft is sourced from a separate individual of the SAME species?
- a. Autograft
 - b. Allograft
 - c. Xenograft
 - d. Alloplast

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