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After completing this course, the participant will have:

1. Knowledge concerning the accuracy of the ClinCheckPro to measure tooth widths and determine Bolton ratios.
2. An appreciation for the potential equivalency of planned ClinCheck predictions with achieved clinical outcomes in correcting winged maxillary central incisors in Invisalign appliance therapy.
3. Awareness of the size of the patient's buccal corridors that may be noticeable to the nonprofessional observer.
4. Familiarity with the effect of piezocision on maxillary extraction space closure.

Article 1: Accuracy and reliability of tooth widths and Bolton ratios measured by ClinCheck Pro, by Arun Shailendran et al

1. This study aimed to assess the accuracy and reliability of tooth widths and Bolton ratios measured in ClinCheck Pro.
 1. True
 2. False
2. This study assessed the accuracy of tooth widths by using 5 sets of clinically scanned casts.
 1. True
 2. False
3. The authors reported that ClinCheckPro has clinical unreliability when estimating Bolton ratios.
 1. True
 2. False
4. The authors concluded that the ClinCheck Pro systematically underestimates tooth widths compared with 3-dimensional optical profilometry, and this discrepancy progressively worsens moving distally in the arch.
 1. True
 2. False

Article 2: Clinical expression of programmed rotation and uprighting of bilateral winged maxillary central incisors with the Invisalign appliance: A retrospective study, by Ame-sha Maree et al

5. This study aimed to quantitatively assess the clinical correction of rotation and uprighting of winged maxillary central incisors, comparing Invisalign therapy with fixed appliance therapy.
 1. True
 2. False

6. The interlabial angle was assessed in a conventional method adapted from Gengitano et al, measuring the angle between planes on the labial surface of each incisor at T1, T2, and T3 using Geomagic Control X software.
 1. True
 2. False
7. The authors reported a mean shortfall of 5.38° (standard deviation, 5.88°; 95% confidence interval, 3.58-6.67; $P < 0.001$) for individual incisor rotation.
 1. True
 2. False
8. The authors concluded that the Invisalign appliance mostly under-corrects programmed rotation and uprighting tooth movement of winged maxillary central incisors.
 1. True
 2. False

Article 3: Perceptions of orthodontists, laypersons, and patients regarding buccal corridors and facial types, by Yingyi Huang et al

9. The purpose of this study was to analyze the perception of orthodontists and orthodontic patients regarding the size of buccal corridors in people with brachyfacial, mesiofacial, and dolichofacial types.
 1. True
 2. False
10. The study surveyed 60 orthodontists and 60 orthodontic patients, and they evaluated the attractiveness of the study's facial photographs by recording on a visual analog scale.
 1. True
 2. False
11. The authors reported that orthodontic patients are more sensitive to the buccal corridors than laypersons or orthodontists.
 1. True
 2. False
12. The authors concluded that it is only necessary for the orthodontists to consider reducing the buccal corridors when the patient's buccal corridor linear ratio is $\geq 15\%$.
 1. True
 2. False

Article 4: The effect of piezocision vs no piezocision on maxillary extraction space closure: A split-mouth, randomized controlled clinical trial, by Vanessa Margaret Hawkins et al

13. This 2-arm, parallel, split-mouth trial aimed to investigate the effects of piezocision compared with no piezocision on maxillary canine distalization and evaluate the patient's perception of the surgical procedure.
 1. True
14. The amount of canine distalization was calculated by measuring the distance between the distal contact point of the canine and the mesial contact point of the second premolar at T0, T1, T2, and T3.
 1. True
 2. False
15. The authors stated that participants in this study reported minimal discomfort after piezocision and would highly recommend the procedure if it would reduce treatment time.
 1. True
 2. False
16. The authors concluded that a minimally invasive piezocision technique with 1 vertical cut distal to the maxillary canine is not associated with greater canine retraction during space closure when performed on healed extraction sockets.
 1. True
 2. False