RESTORATION: ANTERIOR COMPOSITE

ADEX 2024

Tooth #:			
М	D	F	L

CRITICAL ERRORS

The restoration is debonded and/or movable in the preparation		Yes
The restoration is fractured	No	Yes

		ACC= Adheres to Criteria SUB= Marginally Substandard DEF= Critically Deficient	
MARGIN INTEGRITY AND SURFACE FINISH			
Margir	n Excess/De	eficiency	
ACC	 A. No marginal deficiency. There is no evidence of pits and/or voids at the cavosurface margin. B. Marginal excess ≤ 0.5 mm at the restoration-tooth interface, detectable either visually or with the tine of an explorer. 		
SUB	 A. DEFICIENCY: The restoration-tooth interface is detectable visually or with the tine of an explorer, and there is evidence of marginal deficiency ≤ 0.5 mm, which can include pits and/or voids at the cavosurface margin. B. EXCESS: The restoration-tooth interface is detectable visually or with the tine of an explorer, and there is evidence of mar ginal excess > 0.5 mm but ≤ 1.0 mm. There is flash with or without contamination underneath, but it is not internal to the cavosurface margin and could be removed by polishing or finishing. 		
DEF	open r	is evidence of marginal deficiency of > 0.5 mm, to include pits and voids at the cavosurface margin, and/or there is an margin, and/or there is internal contamination at the interface between the restoration and the teeth. is a margin excess (excluding bonding agent or unfilled resin) of > 1.0 mm.	
Adjace	nt Tooth S	itructure	
ACC		no or minimal evidence of unwarranted or unnecessary removal, modification, or recontouring of tooth structure adja- he restoration. (Enameloplasty)	
DEF	There is g	gross enameloplasty.	
CONTO	DUR, CONT	TACT, AND OCCLUSION	
Interpr	roximal Co	ntact	
ACC		kimal contact is visually closed, and the contact is adequate in size, shape, or position but may demonstrate little The to dental floss.	
DEF		terproximal contact is visually open or concave/irregular, allowing for food impaction. terproximal contact will not allow floss to pass.	
Centric	c/Excursive	e Contacts	
ACC	When che and inten	ecked with articulating ribbon paper, all centric and excursive contacts on the restoration are consistent in size, shape, nsity with such contacts on other teeth in that quadrant.	
SUB		ecked with articulating paper, the restoration is in hyper-occlusion, making it inconsistent in size, shape, and intensity occlusal contacts on surrounding teeth, and it requires adjustment.	
DEF	There is g	gross hyper-occlusion so that the restoration is the only point of occlusion in that quadrant.	

TREATMENT MANAGEMENT		
Adjacent Tooth Damage		
ACC	Any damage to adjacent tooth/teeth can be removed with polishing without adversely altering the shape of the contour and/or contact.	
DEF	There is evidence of gross damage and/or alteration to adjacent and/or opposing hard tissue inconsistent with the procedure.	
Soft Tissue Damage		
ACC	The soft tissue is free from damage, or there is tissue damage that is consistent with the procedure.	
DEF	There is gross iatrogenic damage to the soft tissue inconsistent with the procedure and pre-existing condition of the soft tissue.	

RESTORATION: POSTERIOR COMPOSITE

24

ADEX 2024



CRITICAL ERRORS

The restoration is fractured..... No Yes

ACC= Adheres to Criteria SUB= Marginally Substandard DEF= Critically Deficient

MARGIN INTEGRITY AND SURFACE FINISH		
Margin Excess/Deficiency		
ACC	 A. No marginal deficiency. There is no evidence of pits and/or voids at the cavosurface margin. B. Marginal excess ≤ 0.5 mm at the restoration-tooth interface, detectable either visually or with the tine of an explorer. 	
SUB	 A. DEFICIENCY: The restoration-tooth interface is detectable visually or with the tine of an explorer, and there is evidence of marginal deficiency ≤ 0.5 mm, which can include pits and/or voids at the cavosurface margin. B. EXCESS: The restoration-tooth interface is detectable visually or with the tine of an explorer, and there is evidence of marginal excess > 0.5 mm but ≤ 1.0 mm. There is flash with or without contamination underneath, but it is not internal to the cavosurface margin and could be removed by polishing or finishing. 	
DEF	 A. There is evidence of marginal deficiency of > 0.5 mm, to include pits and voids at the cavosurface margin, and/or there is an open margin, and/or there is internal contamination at the interface between the restoration and the tooth. B. There is a marginal excess (excluding bonding agent or unfilled resin) of > 1.0 mm. 	
Adjace	nt Tooth Structure	
ACC	There is no or minimal evidence of unwarranted or unnecessary removal, modification, or recontouring of tooth structure adja- cent to the restoration.	
DEF	There is gross enameloplasty.	
Bondin	g	
ACC	The restoration is bonded to the prepared tooth structure.	
DEF	The restoration is debonded and/or movable in the preparation.	
CONTC	OUR, CONTACT, AND OCCLUSION	
Interpr	oximal Contact	
ACC	Interproximal contact is visually closed, and the contact appears adequate in size, shape, or position, but may demonstrate little resistance to dental floss.	
DEF	 A. The interproximal contact is visually open or concave/irregular, allowing for food impaction. B. The interproximal contact will not allow floss to pass. 	
Centric/Excursive Contacts		
ACC	When checked with articulating paper, all centric and excursive contacts on the restoration are consistent in size, shape, and intensity with such contacts on other teeth in that quadrant.	
SUB	When checked with articulating paper, the restoration is in hyper-occlusion, making it inconsistent in size, shape, and intensity with the occlusal contacts on surrounding teeth, and it requires adjustment.	
DEF	There is gross hyper-occlusion so that the restoration is the only point of occlusion in that quadrant.	

TREATMENT MANAGEMENT		
Adjacent Tooth Damage		
ACC	Any minimal damage to adjacent tooth/teeth can be removed with polishing without adversely altering the shape of the con- tour and/or contact.	
DEF	There is evidence of gross damage and/or alteration to adjacent and/or opposing hard tissue inconsistent with the procedure.	
Soft Tissue Damage		
ACC	The soft tissue is free from damage, or there is tissue damage that is consistent with the procedure.	
DEF	There is gross iatrogenic damage to the soft tissue inconsistent with the procedure.	

RESTORATION: POSTERIOR AMALGAM

24

ADEX 2024

Toot	h #:	
MO	DO	MOD

CRITICAL ERRORS The restoration is fractured...... No Yes

ACC = Adheres to Criteria SUB= Marginally Substandard **DEF=** Critically Deficient MARGIN INTEGRITY AND SURFACE FINISH Margin Excess/Deficiency A. No marginal deficiency. There is no evidence of pits and/or voids at the cavosurface margin. ACC B. Marginal excess ≤ 0.5 mm at the restoration-tooth interface, detectable either visually or with the tine of an explorer. A. DEFICIENCY: The restoration-tooth interface is detectable visually or with the tine of an explorer, and there is evidence of marginal deficiency \leq 0.5 mm, which can include pits and/or voids at the cavosurface margin. SUB B. EXCESS: Any marginal excess is detectable visually or with the tine of an explorer, and the discrepancy is > 0.5 mm but ≤ 1.0 mm. A. There is evidence of marginal deficiency of > 0.5 mm which includes pits and voids at the cavosurface margin, and/or there DEF is an open margin. B. There is a marginal excess of > 1.0 mm. Adjacent Tooth Structure There is no or minimal evidence of unwarranted or unnecessary removal, modification, or recontouring of tooth structure ACC adjacent to the restoration. (Enameloplasty) DEF There is gross enameloplasty. CONTOUR, CONTACT, AND OCCLUSION Interproximal Contact Interproximal contact is visually closed, and the contact is adequate in size, shape, or position but demonstrates little resistance ACC to dental floss. A. The interproximal contact is visually open or concave/irregular, allowing for food impaction. DEF B. The interproximal contact will not allow floss to pass. Centric/Excursive Contacts When checked with articulating paper, all centric and excursive contacts on the restoration are consistent in size, shape, and ACC intensity with such contacts on other teeth in that quadrant. When checked with articulating paper, the restoration is in hyper-occlusion, making it inconsistent in size, shape, and intensity SUB with the occlusal contacts on surrounding teeth, and it requires adjustment. DEF There is gross hyper-occlusion so that the restoration is the only point of occlusion in that quadrant.

TREAT	TREATMENT MANAGEMENT	
Adjacent Tooth Damage		
ACC	Any damage to adjacent tooth/teeth can be removed with polishing without adversely altering the shape of the contour and/or contact.	
DEF	There is evidence of gross damage and/or alteration to adjacent and/or opposing hard tissue inconsistent with the procedure.	
Soft Tissue Damage		
ACC	The soft tissue is free from damage or there is tissue damage that is consistent with the procedure.	
DEF	There is gross iatrogenic damage to the soft tissue inconsistent with the procedure and pre-existing condition of the soft tissue.	