CAST METAL CROWN PREPARATION

ADEX 2024

CRITICAL ERRORS			
Wrong tooth/surface treated	No	Yes	
Procedure not challenged	No	Yes	

NOTE: Those SUBs that are highlighted are part of the 3-SUB Rule

ACC = Adheres to Criteria SUB = Marginally Substandard DEF = Critical Deficiency CERVICAL MARGIN AND DRAW Margin/Extension ACC The cervical margin is at the level of or ≤ 1.5 mm occlusal to the simulated free gingival margin. **SUB** A. The cervical margin is over-extended > 0.5 mm below crest of the simulated free gingival margin. A. The cervical margin is over-extended > 0.5 mm below the crest of the simulated free gingival margin and causes visual dam-DEF age to the typodont. B. The cervical margin is under-extended > 1.5 mm above the simulated free gingival margin. Margin/Definition/Bevel The cervical margin is continuous but may be slightly rough and/or may lack some definition. The cervical bevel, when used, is ACC ≤ 1.5 mm and/or may lack some definition. A. The cervical bevel, when used, is > 1.5 mm but ≤ 2.0 mm. SUB B. The cervical bevel, when used, has very poor definition. A. The cervical bevel, when used, is > 2.0 mm in length. DEF B. The cervical margin has no continuity and/or definition. C. The cervical margin is cupped or J-shaped. Margin/Width ACC The margin varies slightly in width from visually and explorer detectable to ≤ 1.0 mm. The margin width is > 1.0 mm but ≤ 2.0 mm. SUB A. The margin width is > 2.0 mm. DEF B. The margin is not detectable and/or is feathered. Line of Draw ACC The path of insertion/line of draw deviates < 20° from the long axis of the tooth. The path of insertion/line of draw deviates 20° to < 30° from the long axis of the tooth. **SUB** The path of insertion/line of draw deviates $\geq 30^{\circ}$ from the long axis of the tooth. DEF WALLS, TAPER, AND MARGIN Axial Tissue Removal ACC The axial tissue removal is > 0.5 mm but ≤ 2.0 mm. A. The axial tissue removal is > 2.0 mm but $\le 2.5 \text{ mm}$. SUB A. The axial tissue removal is > 2.5 mm. DEF B. The axial tissue removal is < 0.5 mm. Axial Walls Smoothness/Undercut

There is an undercut, which, when blocked out, would compromise margin width criteria and/or is > 0.5 mm deep.

ACC

DEF

The walls may be slightly rough and may lack some definition.

Taper is present, from nearly parallel to ≤ 12°. There is excessive taper that is > 12° or ≤ 16°. The taper is grossly over-reduced > 16° per wall. Occlusal Reduction ACC Occlusal reduction is ≥ 1.0 mm but ≤ 2.0 mm. ACC Occlusal reduction is ≥ 2.0 mm but ≤ 2.5 mm. B. Occlusal reduction is > 2.5 mm. B. Occlusal reduction is > 2.5 mm. B. Occlusal reduction is > 1.0 mm. Internal Line Angles ACC Internal line angles and cusp tip areas may not be completely rounded and may show a slight tendency of being sharp. DEF Internal line angles or cusp tip areas are excessively sharp with no evidence of rounding. BRIDGE FACTOR Path of Insertion/Line of Draw ACC State of the first of draw or path of insertion is direct or may require altering the path of insertion from a direct vertical axis to allow full seating. DEF Internal line angles or cusp tip areas are excessively sharp with no evidence of rounding. BRIDGE FACTOR Path of Insertion/Line of Draw ACC The line of draw or path of insertion is direct or may require altering the path of insertion from a direct vertical axis to allow full seating. DEF Since of draw or path of insertion exists through any plane of rotation without the removal of additional tooth structure in the apical % of either/both of the preparations. INEATMENT MANAGEMENT Condition of Adjacent/Opposing Teeth ACC Any damage to adjacent tooth/teeth can be removed with polishing without adversely altering the shape of the contour and/or contact. B. Opposing hard tissue shows minimal evidence of damage and/or alteration inconsistent with the procedure. DEF A. There is gross damage to adjacent tooth/teeth, requiring a restoration. B. There is evidence of gross damage and/or alteration to opposing hard tissue inconsistent with the procedure.						
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