## PREPARATION: POSTERIOR COMPOSITE

## 2025 DENTAL THERAPY EXAM

Tooth #: \_\_\_\_\_

CRITICAL ERRORS			
Wrong Tooth/Surface Treated	No	Yes	
Unrecognized Exposure	No	Yes	

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

ACC = Adheres to Criteria SUB= Marginally Substandard **DEF= Critically Deficient EXTERNAL OUTLINE FORM** Proximal Clearance Proximal contact is either closed or visibly open, and, at the height of contour, proximal clearance may extend ≤ 1.0 mm beyond ACC either one or both proximal walls. Proximal clearance at the height of contour extends > 1.0 mm but  $\le 2.0$  mm beyond either one or both proximal walls. SUB Proximal clearance at the height of contour extends > 2.0 mm beyond either one or both proximal walls. Gingival Clearance ACC The gingival clearance is visually open but  $\leq 1.0$  mm. SUB A. The gingival clearance is > 1.0 mm but  $\le 2.0$  mm. A. The gingival clearance is > 2.0 mm. B. The gingival contact is not visually open. Outline Shape/Continuity/Extension The outline form may be sharp and irregular. ACC A. The outline form is inappropriately over-extended, compromising the remaining marginal ridge and/or cusp(s). SUB A. The outline form is grossly over-extended, compromising and undermining the remaining marginal ridge to the extent that DEF the cavosurface margin is unsupported by dentin. B. The width of the marginal ridge is  $\leq 1.0$  mm. Isthmus ACC The isthmus may be between 1.0 mm - 2.0 mm in width but  $\leq 1/3$  the intercuspal width. SUB The isthmus is > 1/3 the intercuspal width but  $\leq 1/2$  the intercuspal width. DEF The isthmus is > 1/2 the intercuspal width or the isthmus width is < 1.0 mm. Cavosurface Margin The external cavosurface margin meets the enamel at 90°; The gingival floor is flat, smooth, and perpendicular to the long axis ACC of the tooth. The proximal cavosurface margin deviates from 90° and is likely to jeopardize the longevity of the tooth or restoration. This **SUB** would include unsupported enamel and/or excessive bevel(s). Sound Marginal Tooth Structure The cavosurface margin terminates in sound tooth structure. There is no previous restorative material, excluding sealants, at ACC the cavosurface margin. The cavosurface margin does not terminate in sound natural tooth structure. **SUB** 

A. There is explorer-penetrable decalcification remaining on the cavosurface margin.

B. There are large or multiple areas of unsupported enamel which are not necessary to preserve facial aesthetics.

DFF

## Preparation: Posterior Composite - continued

DEF

INTERNAL FORM			
Axial V	Valls		
ACC	MOLARS: The depth of the axial wall extends beyond the DEJ $\leq$ 1.5 mm. PREMOLARS: The depth of the axial wall extends beyond the DEJ $\leq$ 1.0 mm.		
SUB	MOLARS: The axial wall extends beyond the DEJ > 1.5 mm but $\leq$ 2.5 mm. PREMOLARS: The axial wall extends beyond the DEJ > 1.0 mm but $\leq$ 1.5 mm.		
DEF	A. MOLARS: The axial wall extends beyond the DEJ > 2.5 mm. A. PREMOLARS: The axial wall extends beyond the DEJ > 1.5 mm B. MOLARS & PREMOLARS: The axial wall is entirely in enamel.		
Pulpal	Floor		
ACC	The pulpal floor depth is $\geq$ 0.5 mm but $\leq$ 3.0 mm in all areas; there may be remaining enamel.		
SUB	A. The pulpal floor depth is $>$ 3.0 mm but $\le$ 4.0 mm from the cavosurface margin.		
DEF	A. The pulpal floor is > 4.0 mm from the cavosurface margin. B. The pulpal floor depth is < 0.5 mm.		
Caries	Remaining Material		
ACC	All caries and/or previous restorative material are removed.		
DEF	A. Caries has not been accessed and/or remains in the preparation. B. Previous restorative material remains in the preparation.		
Retent	ion control of the co		
ACC	Retention, when used, is well defined, in dentin, and does not undermine enamel.		
SUB	Retention, when used, undermines the enamel.		
Proxin	nal Box Walls		
ACC	The proximal walls are parallel or convergent occlusally but may be slightly divergent and are not likely to jeopardize the longevity of the tooth or restoration.		
SUB	The proximal walls are too divergent.		
TREAT	MENT MANAGEMENT		
Adjace	ent 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.		
SUB	Damage to adjacent tooth/teeth requires re-contouring that changes the shape and/or contour and/or contact.		
DEF	There is gross damage to adjacent tooth/teeth which requires a restoration.		
Soft Ti	ssue Damage		
ACC	The soft tissue is free from damage, or there is tissue damage that is consistent with the procedure.		

There is gross iatrogenic damage to the soft tissue inconsistent with the procedure and pre-existing condition of the soft tissue.