RESTORATION: POSTERIOR COMPOSITE

2025 DENTAL THERAPY EXAM

| Toot | h #: | |
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| МО | 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 ≤ 0.5 mm, which can include pits and/or voids at the cavosurface margin. SUB 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. 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 DFF 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. **Adjacent Tooth Structure** There is no or minimal evidence of unwarranted or unnecessary removal, modification, or recontouring of tooth structure adjacent to the restoration. DEF There is gross enameloplasty. Bonding ACC The restoration is bonded to the prepared tooth structure. The restoration is debonded and/or movable in the preparation. CONTOUR, CONTACT, AND OCCLUSION **Interproximal Contact** Interproximal contact is visually closed, and the contact appears adequate in size, shape, or position, but may demonstrate little ACC resistance 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

with the occlusal contacts on surrounding teeth, and it requires adjustment.

There is gross hyper-occlusion so that the restoration is the only point of occlusion in that quadrant.

SUB

DEF

Restoration: Posterior Composite - continued

| 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 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. | | |