

QUESTIONS AND ANSWERS RCA PLAYBOOK ONLINE SELF-STUDY

PREGAME TEST

- 1) What type of standard root canal cases may be recommended to refer out to an Endodontist? Answer: Extreme curvature, Long roots, Large apical lesion, difficult patients
- 2) Describe the sequence of pulpal testing. Answer: Test multiple teeth in the quadrant. Start with a visual exam of the teeth looking for caries or cracks. Proceed with percussing each cusp tip, then check mobility, check perio probing, buccal and/or palatal or lingual apical palpation (feel for swelling or any tenderness), perform the Bite Stick test on each cusp tip, then use Endo Ice spray on a medium size cotton pellet and place on the buccal. Record all findings in a +, ++, +++ sequence.
- 3) T or F It is best to test the presumed diseased tooth first verses adjacent teeth. False: Always test healthy teeth first to gauge the patient's normal reaction to pulpal tests.
- 4) After performing pulpal tests on a patient, you note that the lower right first molar responded percussion (+++), bite stick (+++) and responded (+++) with lingering pain with Endo Ice (Coltene) spray. What is the endodontic diagnosis of the tooth? Answer: #30 Irreversible pulpitis- Symptomatic/Symptomatic apical periodontitis

QUARTER 1 TEST

- 1) T or F Using a rubber dam is optional during the root canal procedure. Answer: False
- 2) T or F Which rubber dam clamps do I recommend for a maxillary molar and a mandibular molar? Answer: #12A- Left Maxillary Molar, #13A- Right Maxillary Molar, #56- Mandibular Molar
- 3) If after a mandibular block is administered and the patient is still not fully anesthetized, what is the next step? Answer: Administer 3/4 carpule of Septocaine in B infiltration adjacent to the mandibular molar and then administer 1/4 carpule of Septocaine in a buccal and lingual PDL injections
- 4) Which anesthetics are considered safe for administration to pregnant patients? Answer: Lidocaine and Citanest

QUARTER 2

- 1) T or F A glide path is recommended prior to shaping the canal with nickel titanium files. Answer: True
- 2) T or F An electronic apex locator is not very accurate in deterring true working length. Answer: False

3) Once all canals are located how do you perform a coronal flare (open orifice)? Answer: First, perform coronal negotiation 10-15mm down the canal with a #10 and #15 hand file. Then use an nickel titanium orifice opener and place gently into the canal no more than 10-15mm down in. Perform a gentle brushing to the outer wall four to five times.

4) If you are unable to negotiate the full canal length (negotiate to patency) and are 5mm short of the radiographic apex, what is a recommended course of action? A. Obturate 5mm short B. Refer to an Endodontist C. Place calcium hydroxide and re-appoint for a second visit. D. Extract the tooth. Answer: B,C

QUARTER 3

1) T or F The WaveOne Gold (DentsplySirona) reciprocating shaping file has a higher resistance to cyclic fatigue when compared to standard nickel titanium. Answer: True

2) T or F The WaveOne Gold (DentsplySirona) protocol states that the WaveOne Gold small file should be the first file used. Answer: False (start with the the WaveOne Gold Primary file)

3) T or F It is recommended that during shaping, the canals should be filled with sodium hypochlorite. Answer: True

4) What is the recommended final irrigation solution to use once shaping is completed to remove the smear layer? A. Sodium hypochlorite B. 17% EDTA C. Sterile Saline D. Chlorhexidine. Answer: B. 17% EDTA

QUARTER 4

1) Name three different techniques to obturate cleaned canals. Answer: Warm Vertical Condensation, Carrier based Obturation (GuttaCore, Thermafill), Single Cone Obturation using Calcium silicate sealers such as Bioceramic sealer (Brassler) or BioRoot (Septodont). Lateral condensation is also acceptable.

2) Explain why shaped and cleaned canals need to be obturated. Answer: Obturation seals the canal and prevents microbes from entering and exiting the canal space. If a canal is left unfilled there is potential for microbial regrowth.

3) What is the approximate success (apical lesion has healed with bone fill) rate for a root canal procedure on a necrotic tooth with an apical lesion? Answer: 80% (average success rate of multiple studies)

4) What is the appropriate course of action if a sodium hypochlorite accident occurs while you are treating a tooth? Answer: Irrigate with saline, Prescribe antibiotics and narcotics, Recommend off and on ice packs for the affected area and recall daily. Inform patient of probable facial bruising and call your attorney.