

PRACTICAL CLINICAL COURSES

A Service of the Gordon J. Christensen
Career Development Program

V4757

Dr. Christensen's Clinical Failures and How to Avoid Them, 2nd Edition

Gordon J. Christensen, DDS, MSD, PhD

Materials Included

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PRACTICAL CLINICAL COURSES

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Gordon J. Christensen
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Sources of Products Discussed in

**V4757 Dr. Christensen's Clinical Failures and How to Avoid Them,
2nd Edition**

Presented by: Gordon J. Christensen, DDS, MSD, PhD

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(631)249-1134
www.parkell.com
2. **BruxZir**
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www.glidewell.com
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www.caulk.com
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www.3mespe.com
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(888)910-4490
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www.directcrown.com
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Various Manufacturers
8. **Fender Wedge**
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(888)437-0032
(616)842-2244
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9. **Filpin**
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10. **Fuji II LC**
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14. **Luxator**
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 196 North Salem Road
 P.O. Box 904
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 (800)284-3368
 (203)438-8832
www.jsdental.com
15. **Madame Butterfly Silk**
 Almore International, Inc.
 P.O. Box 25214
 Portland, OR 97298
 (800)547-1511
 (503)643-6633
www.almore.com
16. **Multilink Automix**
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 Amherst, NY 14228
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 (716)691-0010
www.ivoclarvivadent.us.com
17. **NeoDiamond**
 Microcopy
 3120 Moon Station Road NW
 P.O. Box 2017
 Kennesaw, GA 30144
 (800)235-1863
 (770)425-5715
www.microcopydental.com
18. **NX3 Nexus Third Generation Resin Cement**
 Kerr Corporation
 1717 West Collins Avenue
 Orange, CA 92867
 (800)537-7123
 (714)516-7400
www.kerrdental.com
19. **Occlusal Indicator Wax**
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 (714)516-7400
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20. **OptiBond XTR**
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www.kerrdental.com
21. **Oral-B Glide Floss**
 Procter & Gamble
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www.3mespe.com
23. **Polycarbonate Crowns**
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24. **Precise ATW**
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www.itldental.com
25. **Premier Implant Cement**
 Premier Dental Products Co.
 1710 Romano Drive
 Plymouth Meeting, PA 19462
 (888)670-6100
 (610)239-6000
www.premusa.com
26. **PreviDent 5000 Plus or Gel**
 Colgate Oral Pharmaceuticals
 300 Park Avenue
 New York, NY 10022
 (800)226-5428
 (212)310-2000
www.colgateprofessional.com
27. **Proximator**
 Karl Schumacher Dental
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 108 Lakeside Drive
 Southampton, PA 18966
 (800)523-2427
 (215)322-0511
www.karlschumacher.com
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www.3mespe.com

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(800)228-5166
(630)238-8300
www.sdi.com.au
31. **Scotchbond Universal**
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www.3mespe.com
32. **Snap-Stone**
Whip Mix Corporation
361 Farmington Avenue
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(800)626-5651
(502)637-1451
www.whipmix.com
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J. Morita USA
9 Mason
Irvine, CA 92618
(800)831-3222
(949)581-9600
www.morita.com/usa
34. **TempBond
(Original, Clear, NE)**
Kerr Corporation
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Orange, CA 92867
(800)537-7123
(714)516-7400
www.kerrdental.com
35. **Tofflemire Matrix**
Greater Curve
116 East Main Street
P.O. Box 337
Owensville, OH 45160
(866)493-3437
www.greatercurve.com
36. **Triad TruTray**
Dentsply Prosthetics
Ceramco-Trubyte-Austenal
570 West College Avenue
York, PA 17405
(800)243-1942
(717)845-7511
www.prosthetics.dentsply.com
37. **TrollFoil**
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661 Hayward Avenue North
Oakdale, MN 55128
(800)537-8765
(203)775-4342
www.trolldental.com
38. **Variolink II**
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(716)691-0010
www.ivoclarvivadent.us.com
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(651)575-5144
www.3mespe.com
40. **Wedge Guard**
Triodent Corporation
4431 Corporate Center Drive
Suite 107
Los Alamitos, CA 90720
(800)811-3949
www.triodent.com
41. **X-OTOMES**
A. Titan Instruments
97 Main Street
Hamburg, NY 14075
(877)284-8261
(716)648-9272
www.atitan.com

Product names, the products themselves, and company names change rapidly. Please contact the companies shown to confirm current information.

Gordon J. Christensen Practical Clinical Courses, 3707 North Canyon Road, Suite 3D, Provo, UT 84604
Toll Free (800) 223-6569 or Utah Residents (801) 226-6569

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PROGRAM

V4757 Dr. Christensen's Clinical Failures and How to Avoid Them, 2nd Edition

CLINICIAN RESPONSIBLE:

Gordon J. Christensen, DDS, MSD, PhD
CEO, Practical Clinical Courses
CEO, CR Foundation
Practicing Prosthodontist, Provo, Utah

GOALS & OBJECTIVES

At the completion of this video presentation, participants should be able to accomplish the following:

1. List reasons to identify the products, concepts, and techniques that have been proven to be good or bad and to learn from these experiences.
2. List and describe the products, concepts, and techniques in your own practice that have been successful or have not worked.
3. List and describe products, concepts, and techniques in **diagnosis and treatment planning** discussed in this presentation that have been clinical failures and how to overcome them.
4. List and describe products, concepts, and techniques in **endodontics** discussed in this presentation that have been clinical failures and how to overcome them.
5. List and describe products, concepts, and techniques in **esthetic dentistry** discussed in this presentation that have been clinical failures and how to overcome them.
6. List and describe products, concepts, and techniques in **implant surgery** discussed in this presentation that have been clinical failures and how to overcome them.
7. List and describe products, concepts, and techniques in **implant prosthodontics** discussed in this presentation that have been clinical failures and how to overcome them.
8. List and describe products, concepts, and techniques in **occlusion** discussed in this presentation that have been clinical failures and how to overcome them.
9. List and describe products, concepts, and techniques in **operative dentistry** discussed in this presentation that have been clinical failures and how to overcome them.
10. List and describe products, concepts, and techniques in **oral and maxillofacial radiology** discussed in this presentation that have been clinical failures and how to overcome them.
11. List and describe products, concepts, and techniques in **oral and maxillofacial surgery** discussed in this presentation that have been clinical failures and how to overcome them.
12. List and describe products, concepts, and techniques in **orthodontics** discussed in this presentation that have been clinical failures and how to overcome them.
13. List and describe products, concepts, and techniques in **pediatric dentistry** discussed in this presentation that have been clinical failures and how to overcome them.
14. List and describe products, concepts, and techniques in **periodontics** discussed in this presentation that have been clinical failures and how to overcome them.
15. List and describe products, concepts, and techniques in **fixed prosthodontics** discussed in this presentation that have been clinical failures and how to overcome them.
16. List and describe products, concepts, and techniques in **removable prosthodontics** discussed in this presentation that have been clinical failures and how to overcome them.
17. Identify and overcome the most failing procedure in your practice.

PROGRAM (Cont'd)

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18. Identify and enhance the best procedure in your practice.
19. Identify the areas of dentistry you want to deemphasize based on your lack of interest and failures that you have observed.
20. Identify the area of dentistry that you want to emphasize in your practice based on your success in that area.

OVERVIEW

V4757 Dr. Christensen's Clinical Failures and How to Avoid Them, 2nd Edition

This presentation is based on the clinical experiences and research over several decades of dental practice of Dr. Gordon J. Christensen. He has identified about 90 products, concepts, and techniques in the many areas of dentistry that have been failures. The presentation discussed these failures and makes suggestions on how to avoid them and/or overcome them. Examples of failures from the presentation are:

- Lack of a complete treatment plan before starting treatment
- Starting restorative dentistry on a currently painful tooth
- Leaving a weak tooth in the rehabilitation of a bruxer or clencher
- Perforating the external of a tooth with a post
- Not providing adequate retention for a build-up in an endodontically treated tooth
- Not showing a potential patient what can be achieved from an esthetic standpoint
- Being overly optimistic with a patient about treatment outcome
- Attempting to bleach tetracycline stains
- Over-bleaching causing excessive repeated bleaching
- Inadequate flap opening
- Placing implants around mobile teeth
- Loading implants too soon
- Using final cement for cementation of implant-supported crowns
- Not tightening implant abutment screws enough
- Too optimistic on TMD treatment
- No postoperative occlusal adjustment after comprehensive restorative dentistry
- Using aggressive or dull burs
- Leaving horizontal cracks in teeth receiving intra-coronal restorations
- Nicking adjacent teeth during restorative dentistry
- Total etching crown preparations
- Inadequate radiographs
- Creating air emphysema
- Using too much force during extractions
- Inadequate preventive care during orthodontic treatment
- Restoring primary teeth with intra-coronal restorations that are too large
- Expecting significant behavior change relative to oral hygiene
- Not bleaching surrounding teeth when doing piecemeal crowns
- Using dual cure cement for veneers
- Opening vertical dimension of occlusion too far on removable prostheses
- Leaving crowns too high or too low
- Not using implants with removable partial dentures
- Expecting removable partial denture clasps to serve for a long time

Each of the above situations and many more are discussed with potential solutions for each.

REFERENCES

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2. Christensen GJ. The Cracked Tooth Syndrome: A Pragmatic Treatment Approach. JADA 1993; 124(2):107-8.
3. Christensen GJ. Posts: Necessary or Unnecessary? JADA 1996; 127(10):1522-6.
4. Christensen GJ. Treatment of the edentulous mandible. JADA 2001; 132(2):231-3.
5. Christensen GJ. Treating Bruxism and Clenching. JADA 2000; 131(2):233-5.
6. Christensen GJ. Should resin cements be used for every cementation? JADA 2007; 138(6):817-9.
7. Christensen GJ. Should Teeth Be Built up for Crowns? JADA 1993; 124(6):93-4.
8. Christensen GJ. Choosing an all-ceramic restorative material -Porcelain-fused-to-metal or zirconia-based? JADA 2007; 138(5):662-5.
9. Christensen GJ. Thick or thin veneers? JADA 2008; 139(11):1541-3.
10. Christensen GJ. Making Class II resin-based composite restorations predictable and profitable. JADA 2010; 141(4):457-60.
11. Christensen GJ. Soft-tissue cutting with laser versus electrosurgery. JADA 2008; 139(7):981-4.
12. Christensen GJ. Why use resin cements? JADA 2010; 141(2):204-6.
13. Christensen GJ. Should resin-based composite dominate restorative dentistry today? JADA 2010; 141(12): 1490-3.
14. Christensen GJ. Improving interocclusal records for crowns and fixed prostheses. JADA 2011; 142(4):441-4.
15. Christensen GJ. Dentistry's forced return to its roots. JADA 2011; 142(12):1393-5.

POST TEST

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1. When a symptomatic endodontically treated tooth is present and you are planning to start restorative treatment, you should:
 - a. go ahead with restorative treatment on the tooth.
 - b. always re-treat the tooth before restoring it.
 - c. always extract the tooth and do another treatment plan.
 - d. consider all options, consult with the patient, and make a conclusion about treatment.

2. When you have perforated the external of an endodontically treated tooth while making a post hole, you should:
 - a. always extract the tooth.
 - b. place resin cement in the canal to seal the perforation.
 - c. place a product, such as MTA paste, in the perforation area and allow the site to heal.
 - d. make another post hole and cement the post as though the perforation was not present.

3. Bleaching striated tetracycline stained teeth:
 - a. is difficult, but can be done.
 - b. should not be attempted.
 - c. is best solved by using veneers.
 - d. should be solved by using full-ceramic crowns.

4. Antibiotics should:
 - a. routinely be provided preoperatively before oral surgery.
 - b. primarily be prescribed when infection is present.
 - c. always be provided after difficult surgery.
 - d. routinely be provided when doing extractions.

5. Implants should:
 - a. be loaded as soon as possible after they are placed.
 - b. not be loaded until 6 months after placement.
 - c. be loaded immediately only if the implants were placed in optimum dense bone, and the implant is solidly in place.
 - d. not be loaded immediately.

6. Cement for cementation of crowns over implant abutments:
 - a. should be final cement.
 - b. should be radiolucent.
 - c. should be radiopaque.
 - d. should be ZOE.

7. Bruxers should have an occlusal splint:
 - a. for use during sleeping.
 - b. after placement of full-ceramic crowns, such as e.max.
 - c. to reduce abnormal tooth wear during stressed times.
 - d. all of the above.

POST TEST (CONT'D)

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- 8. 557 burs:
 - a. do not have cross cut fissures on them.
 - b. can cause tooth cracks when cutting tooth preparations.
 - c. should be used routinely for class II tooth preparations.
 - d. are well proven as the most adequate bur for operative dentistry.

- 9. Air emphysema:
 - a. is not dangerous.
 - b. is caused by a rear exhaust handpiece.
 - c. can be caused during routine operative dentistry.
 - d. is a frequent occurrence.

- 10. When mobile periodontally treated teeth are present:
 - a. connect them to implants.
 - b. do not consider extracting them.
 - c. do not place implants around them.
 - d. always extract them before doing implants.

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