The following is a summary of responses from 24 dental schools and one AEGD residency program to the following questions:

1) For Class II amalgam preparations are buccal, lingual, and/or gingival walls extended to break contact with the adjacent tooth if not dictated by caries or penetrable decalcification?
2) For Class II composite preparations are buccal, lingual, and/or gingival walls extended to break contact with the adjacent tooth if not dictated by caries or penetrable decalcification?
3) For anterior Class III composite preparations (lingual approach) are facial, incisal, and/or gingival walls extended to break contact with the adjacent tooth if not dictated by caries or penetrable decalcification?

In some cases responses were paraphrased or simplified for correlative purposes, but every attempt was made to ensure the completeness and accuracy of responses. It is important to note that the questions were designed to explore philosophies governing proximal extensions other than for caries and/or penetrable decalcification.

The main rationales cited for breaking proximal contact were [1] visual verification that all cavosurface margins are placed in sound tooth structure and [2] convenience of access for margination, finishing, polishing, etc. Retaining contact was espoused to [1] conserve tooth structure and [2] better ensure proximal contact. Schools that pointed to extension differences between amalgam and composite described amalgam preparations as material-specific and composite preparations as lesion-specific.

Some uniform observations: All "yes" responses further emphasized that contact is broken by as minimal an amount as possible (0.2mm to 0.5mm maximum). Many schools that subscribe to the WREB examination admit to modifying their teaching philosophies somewhat to satisfy WREB scoring criteria. All "no" responses further stated or strongly suggested that location/extent of the lesion or unsound tooth structure was the primary governing factor; if breaking contact was required due to caries or decalcification, a "yes" response is assumed.

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Boston	Gingival: yes Buccal & lingual: Mostly yes, but based on caries risk assessment and amount of good structure needing removal to break contact.	No Extension for prevention virtually ignored as a governing concept.	No
Case Western	Yes (as minimal as possible)	No	No
Connecticut	No	No	No
Creighton	Yes; primarily for convenience and access	Yes; primarily for convenience and access	Gingival & facial: yes Incisal: no
Florida	Yes	No	Gingival: yes Facial: yes (very minimal) Incisal: no
Georgia	Gingival & lingual: yes Buccal: no	Not necessarily; dictated by convenience for finishing/polishing	Gingival: yes Facial: yes (very minimal) Incisal: not without good reason
Howard	No	No	No
Illinois, Chicago (UIC)	Gingival: yes, most of the time Buccal & lingual : no	Gingival: yes, most of the time Buccal & lingual : no (more conservative than amalgam)	Gingival: yes Facial & incisal: no
Iowa	Gingival: yes (if caries is in traditional location) Buccal & lingual: no	Gingival: yes (if caries is in traditional location) Buccal & lingual: no	No

Loma Linda	Gingival: yes Buccal & lingual: no (if tooth structure sound both visually and tactilely)	Yes, as a practical matter. Difficult to retain contact when placing obtuse angles [bevels] on facial & lingual margins.	Gingival: yes Facial & incisal: no
Maryland	Yes	Gingival: yes Buccal & lingual: no	Gingival: yes Facial & incisal: no
Minnesota	No	No	No
Nevada (AEGD, Nellis AFB)	Gingival: yes Buccal & lingual: no	No	No
NYU	Gingival: yes Buccal & lingual: no	No	No
Oklahoma	Yes (minimally in all extensions)	Yes (minimally in all extensions)	Gingival: yes Facial: yes (minimally) Incisal: no
Pittsburgh	Yes, but extensions are case-specific	No	Gingival: yes Facial & incisal: no
South Carolina	Yes	No	Gingival: yes Facial & incisal: no
Temple	Yes	Yes, but more conservative than amalgam	Gingival: yes Facial: yes (minimally) Incisal: no
Texas, Houston	Yes (but not in slot preparations)	Yes, but more conservative than amalgam	Gingival: yes Facial: yes (minimally) Incisal: no
Texas, San Antonio	No	No	No
UCLA	Yes	Yes	Gingival: yes Facial: yes (minimally) Incisal: no
UMKC	Yes	Gingival & lingual: yes Buccal: no	Gingival: yes Facial & incisal: no
USC	Yes (minimally in all extensions)	No (although long shallow bevels at cavosurface usually break contact)	No (although long shallow bevels at cavosurface usually break contact)
Washington	Yes (minimally in all extensions)	Yes (minimally in all extensions)	NA

Grateful appreciation is extended to Dr. Larry Haisch, National Director of CODE (Consortium of Operative Dentistry Educators), for facilitating the dissemination of these questions by posting them on the CODE ListServe. Thanks also to all schools and programs that responded. If I have misrepresented any of the data, I sincerely apologize and trust that the pertinent schools will inform me so that I can publish appropriate correction. I am hopeful that this information will serve as an impetus to further expand on this topic through CODE's annual regional meetings.

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