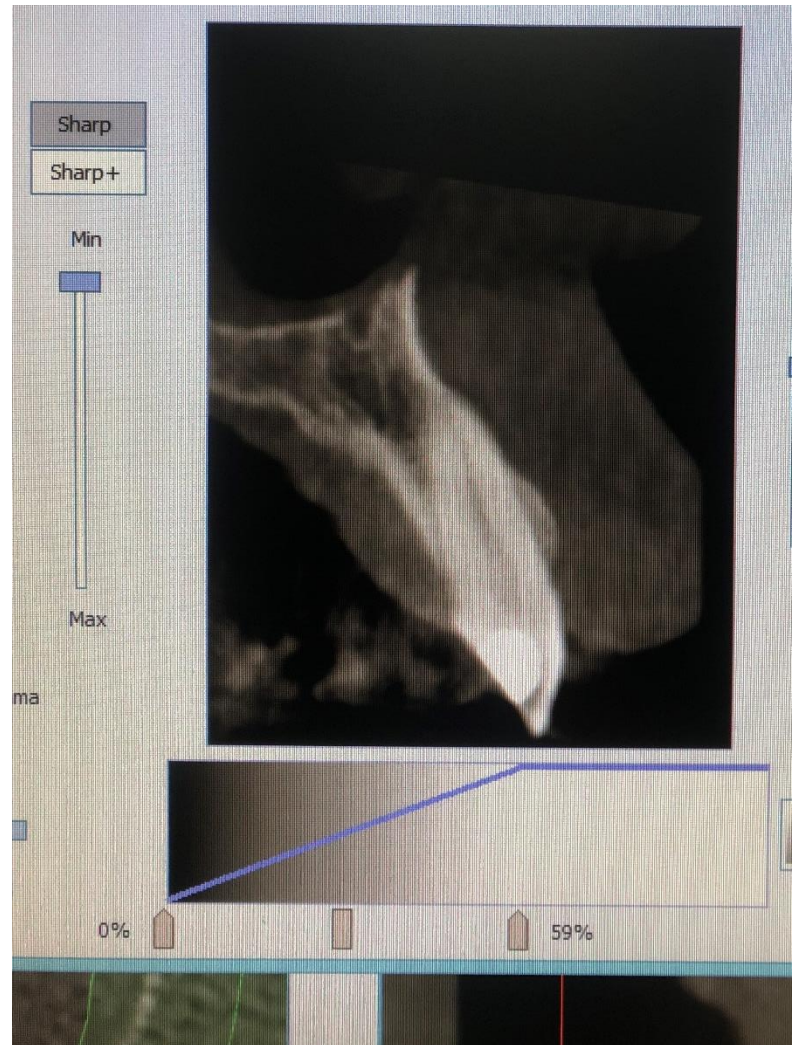
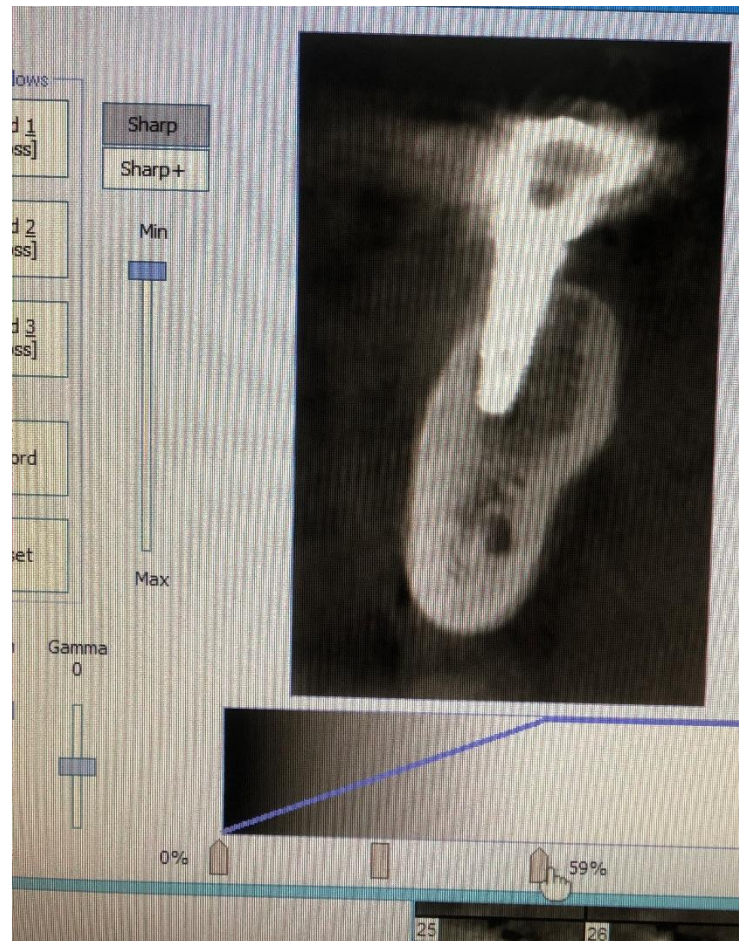
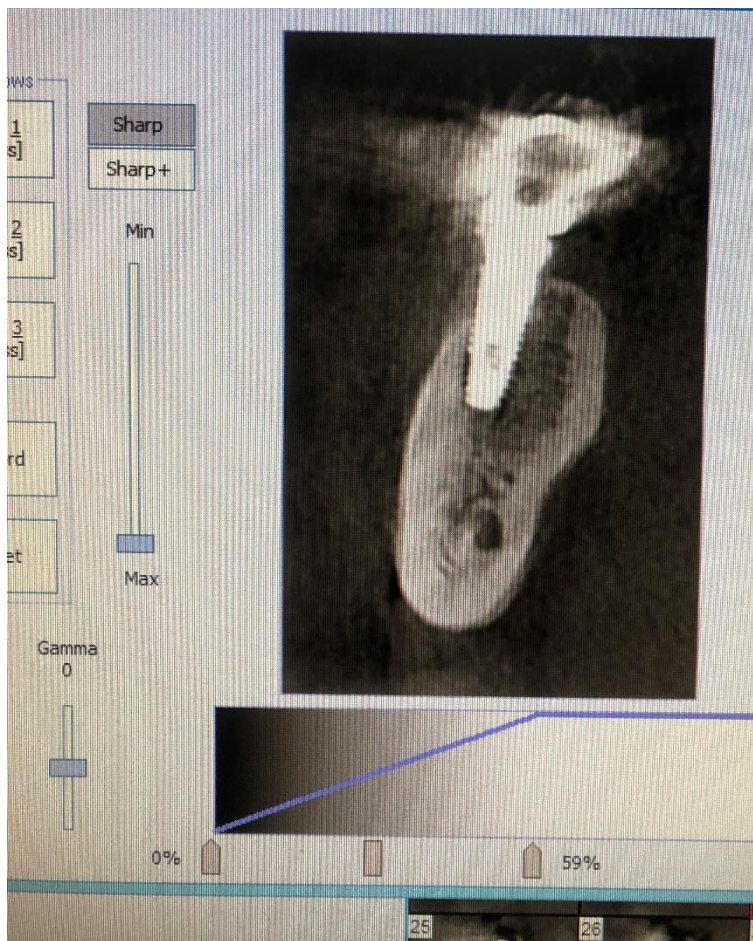
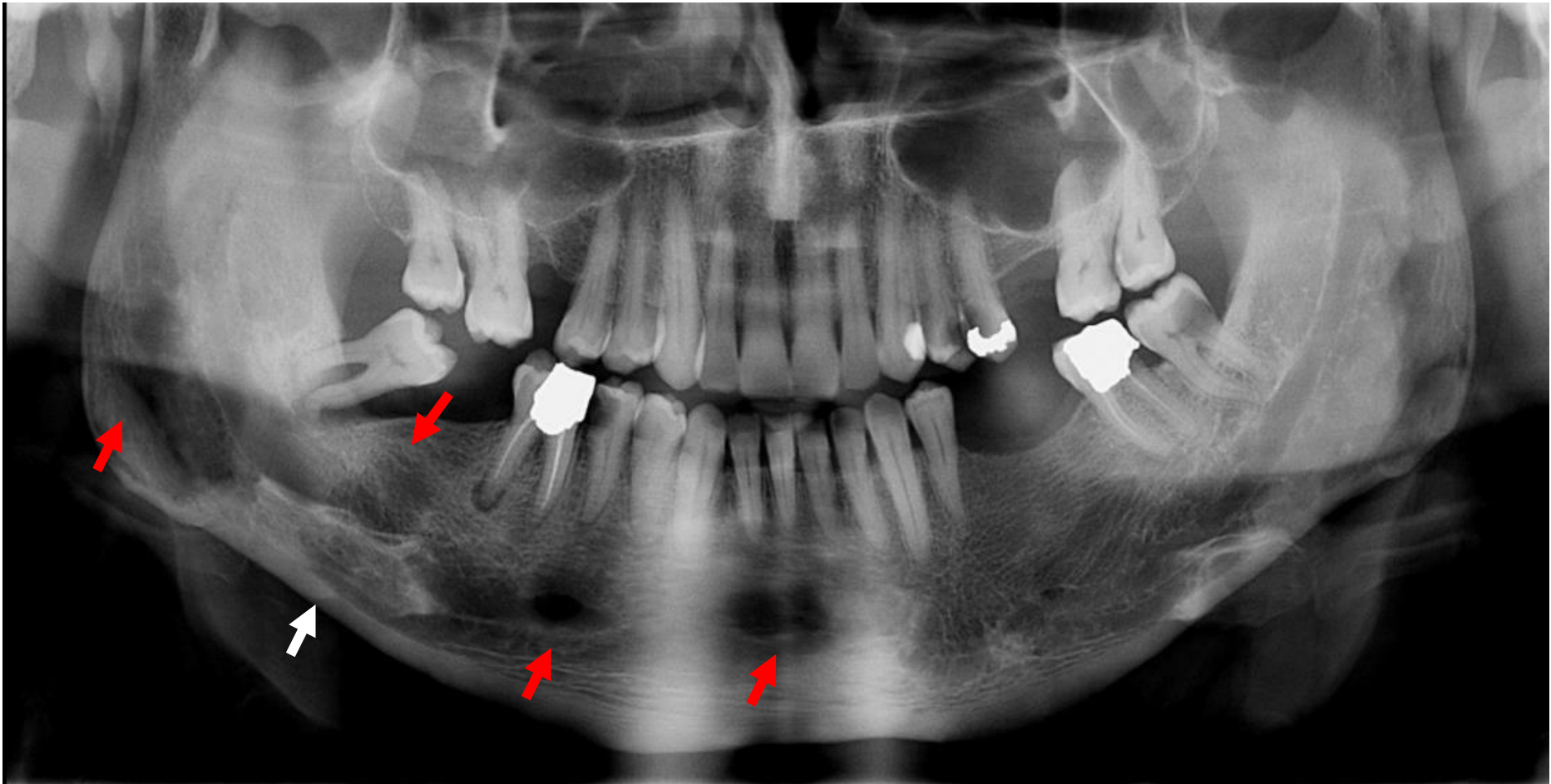










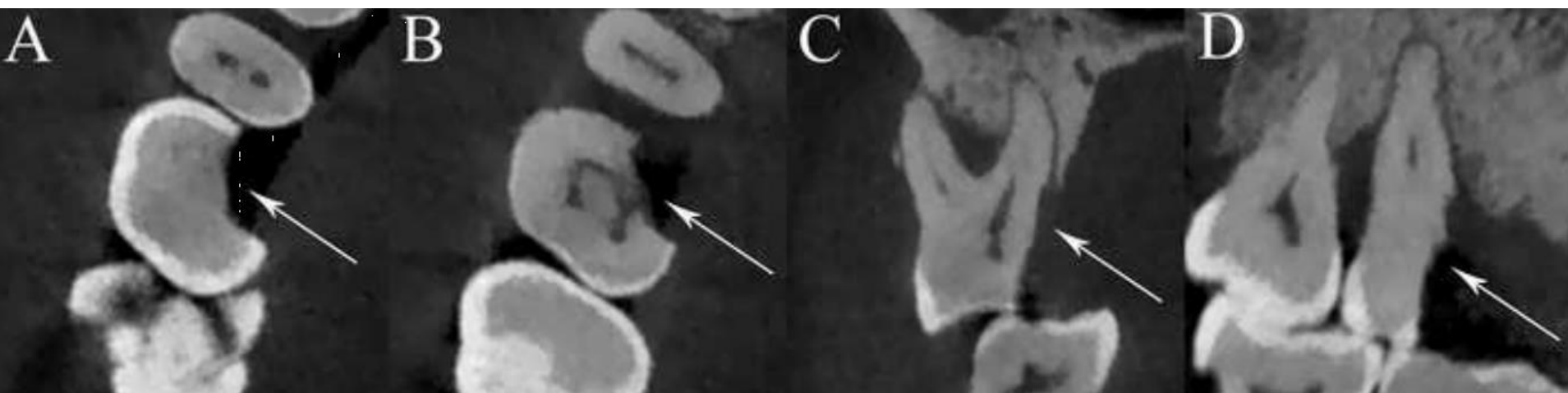


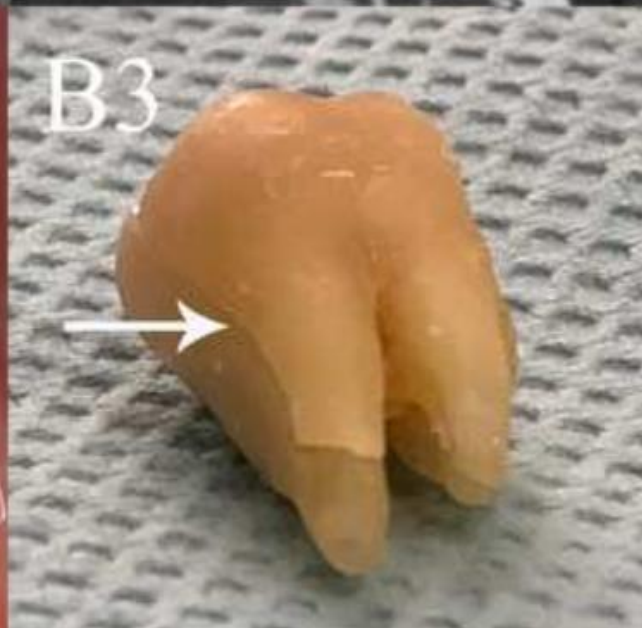
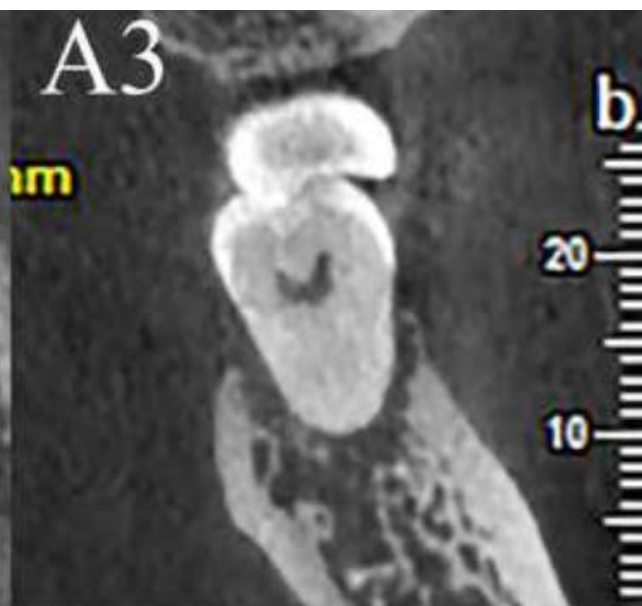
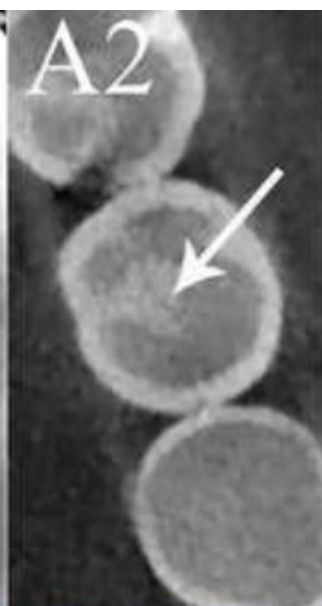




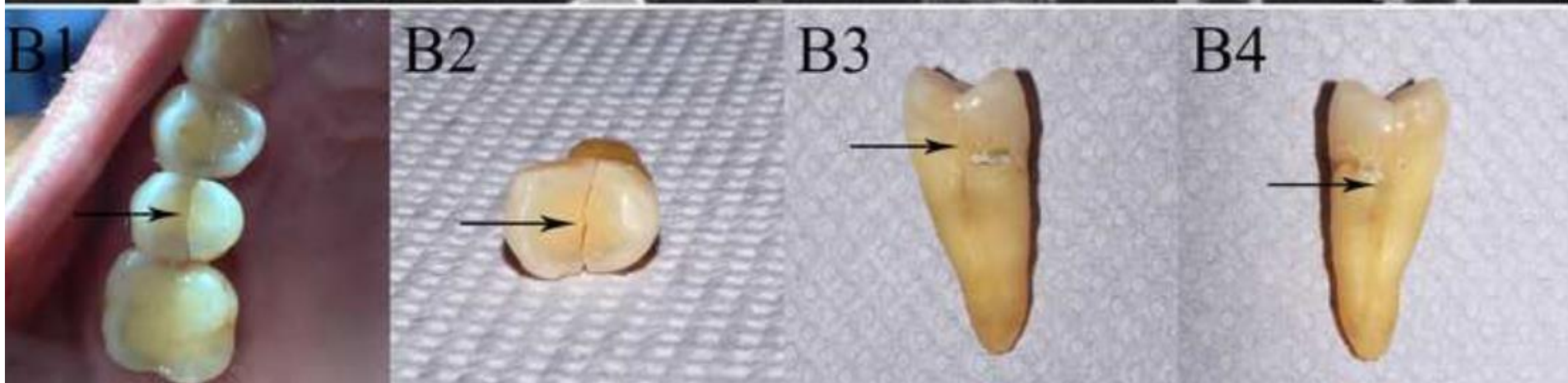
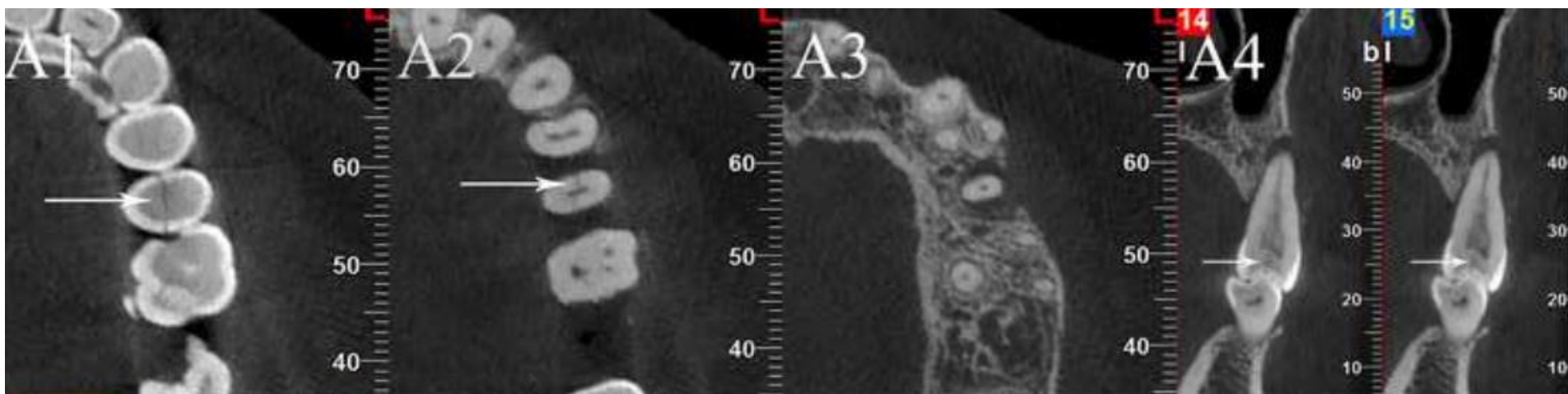


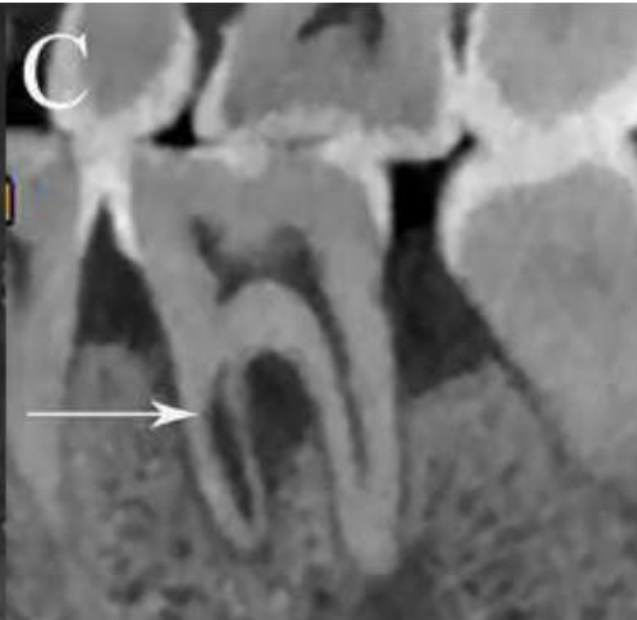
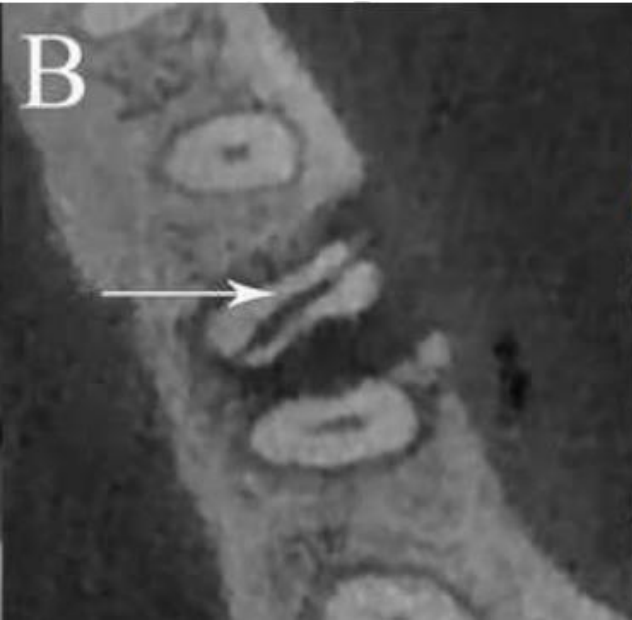
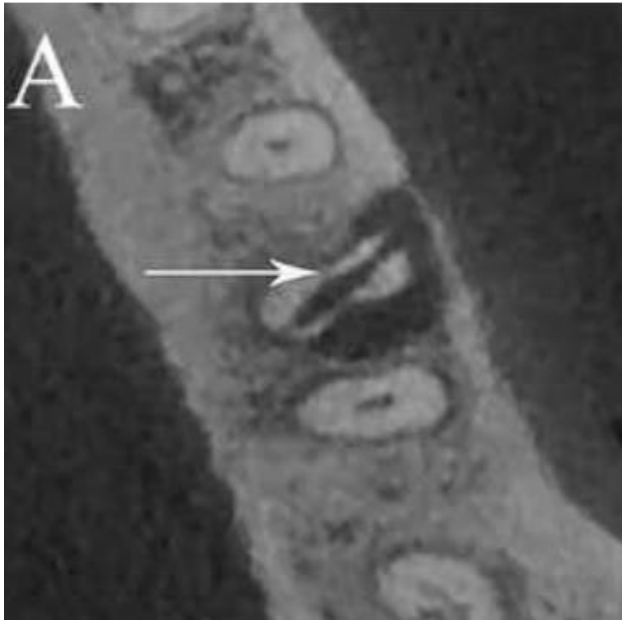


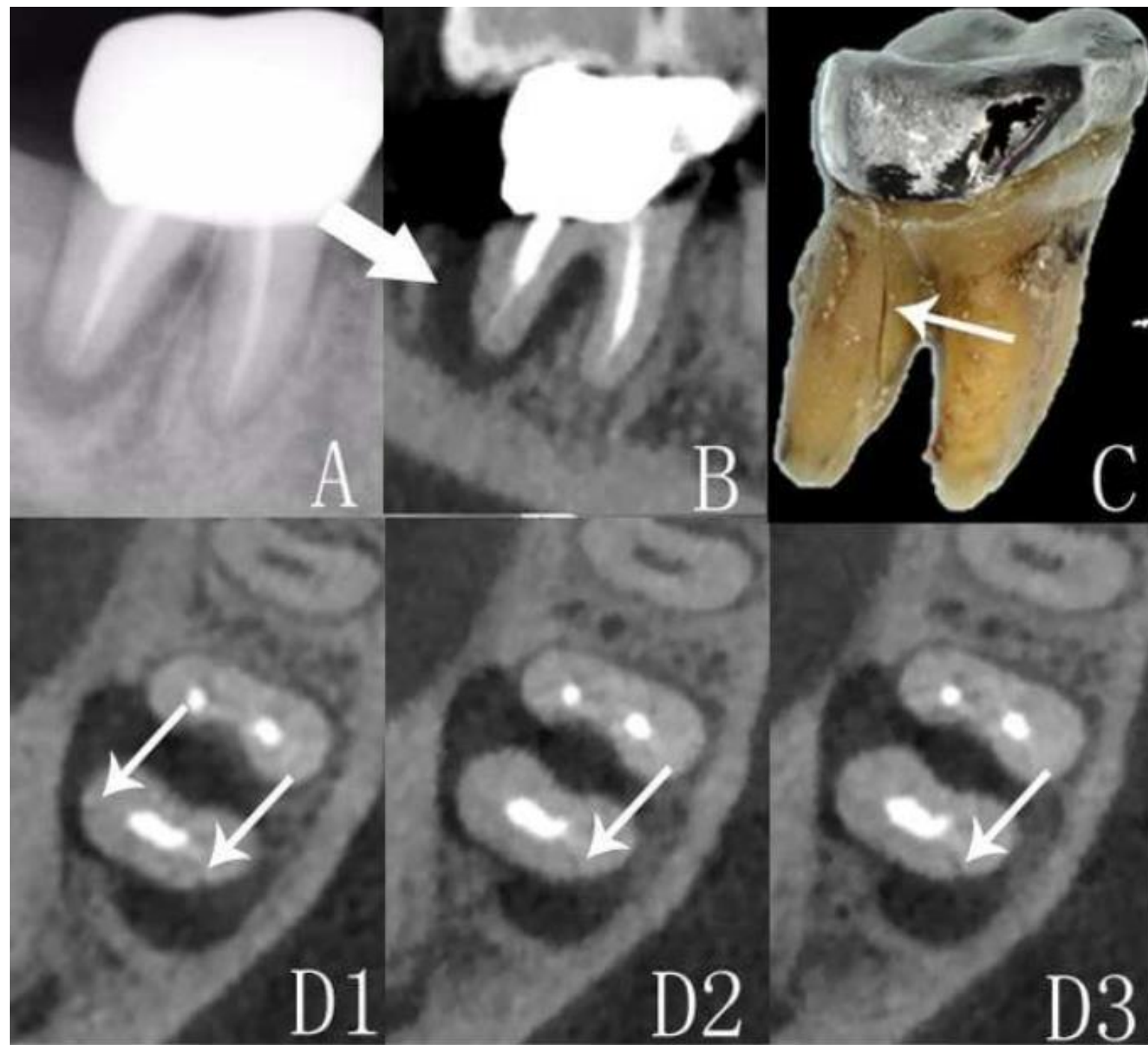


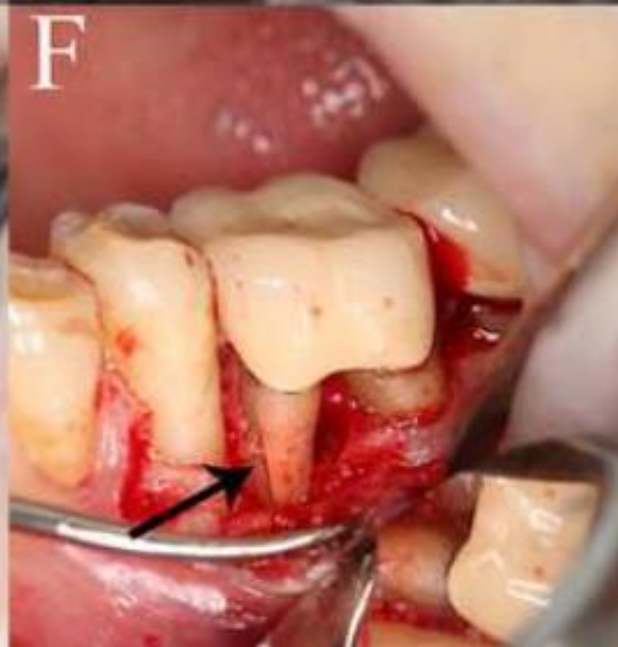
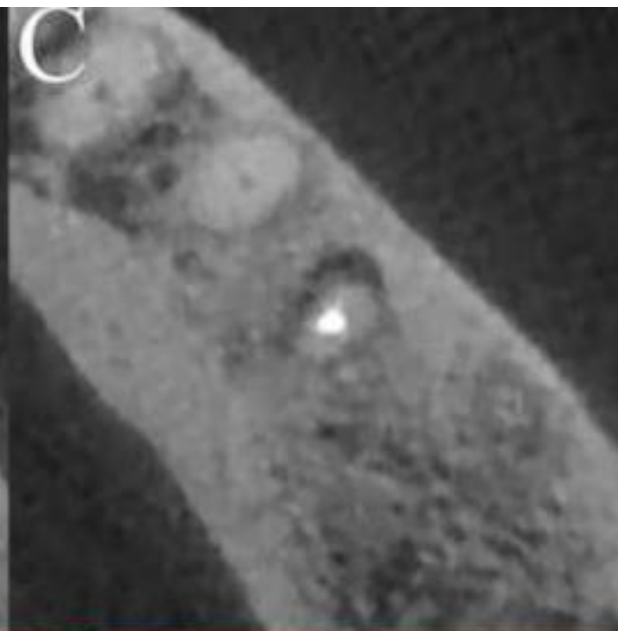
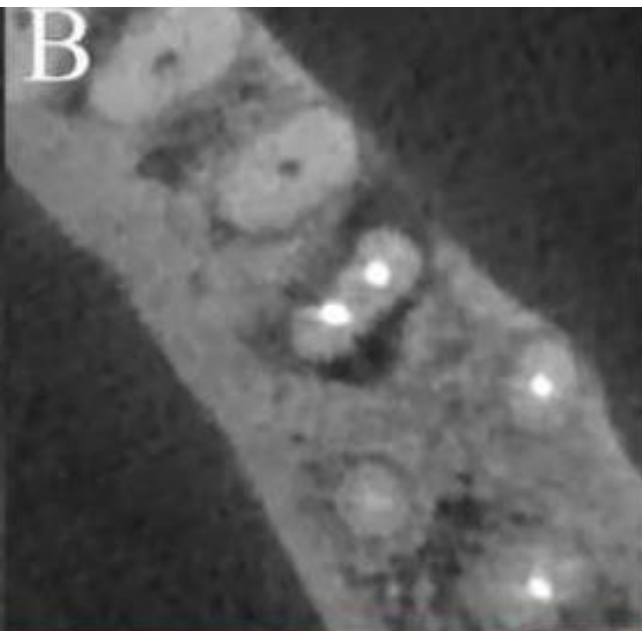
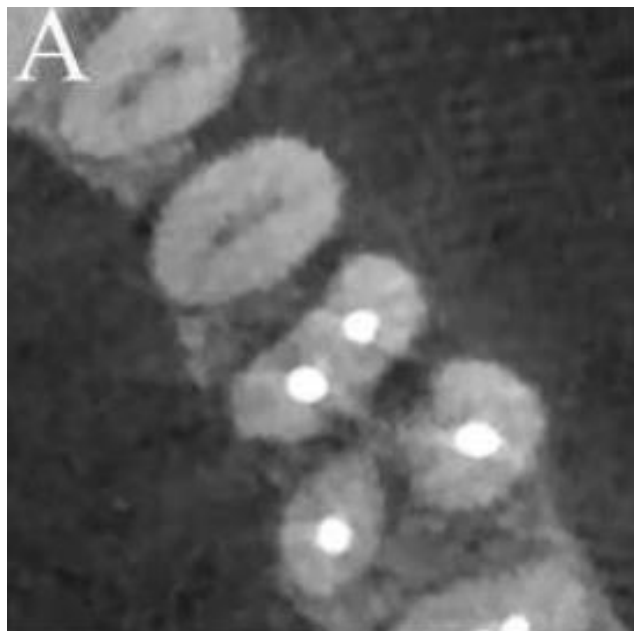


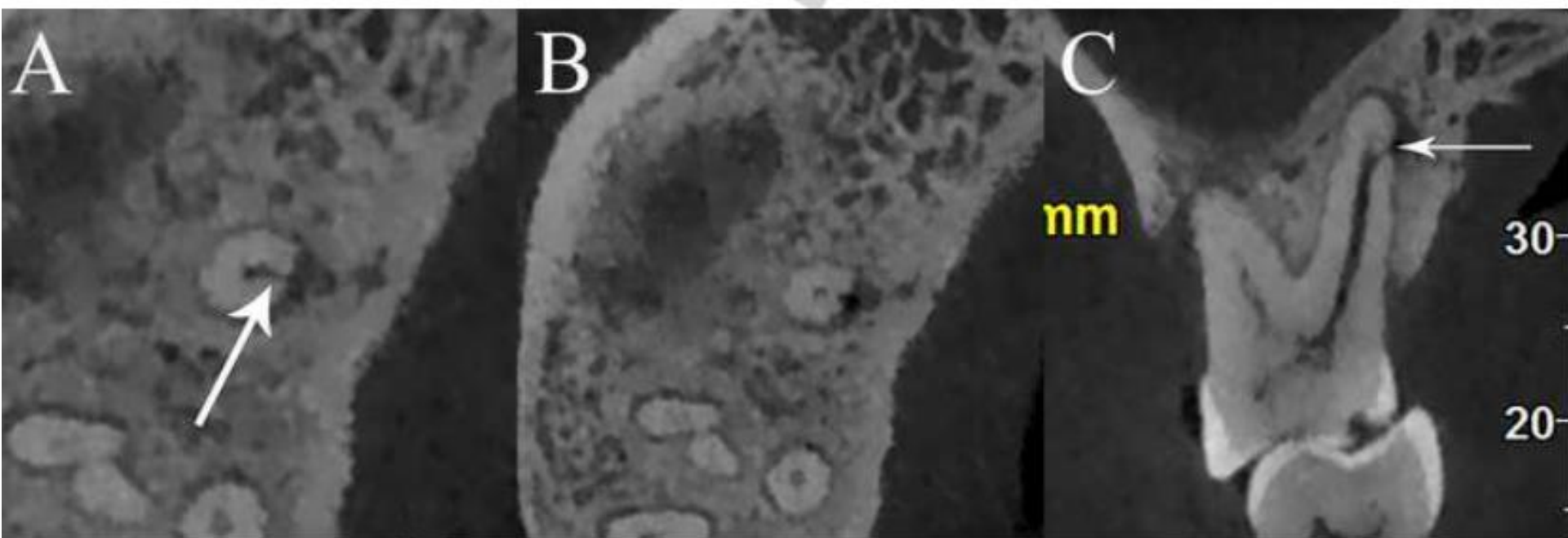


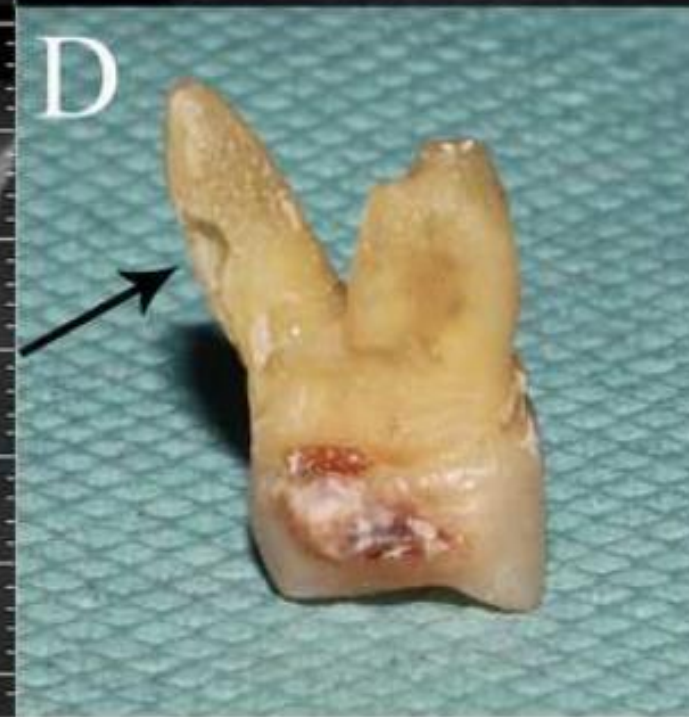
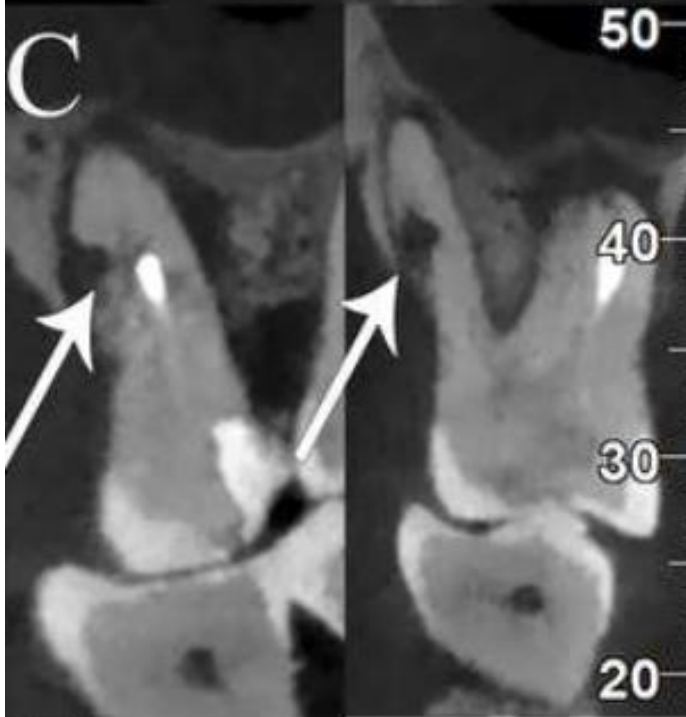
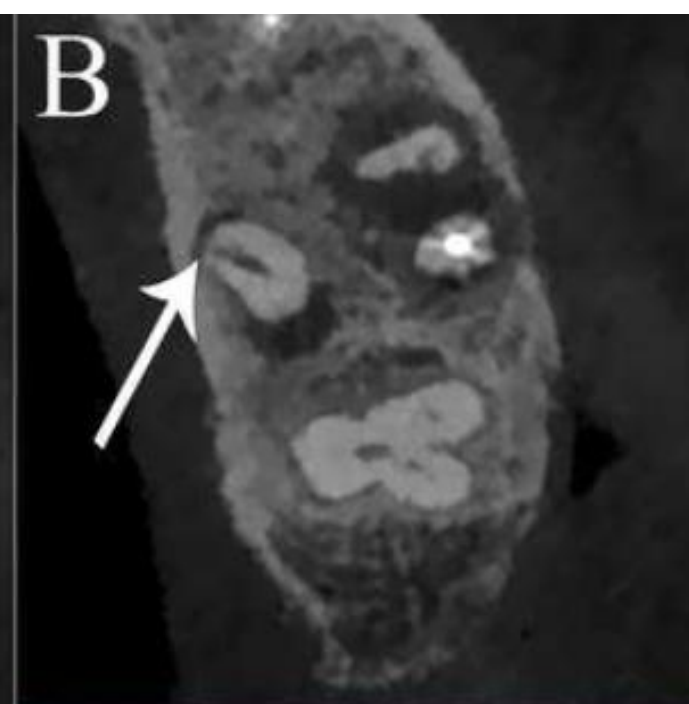
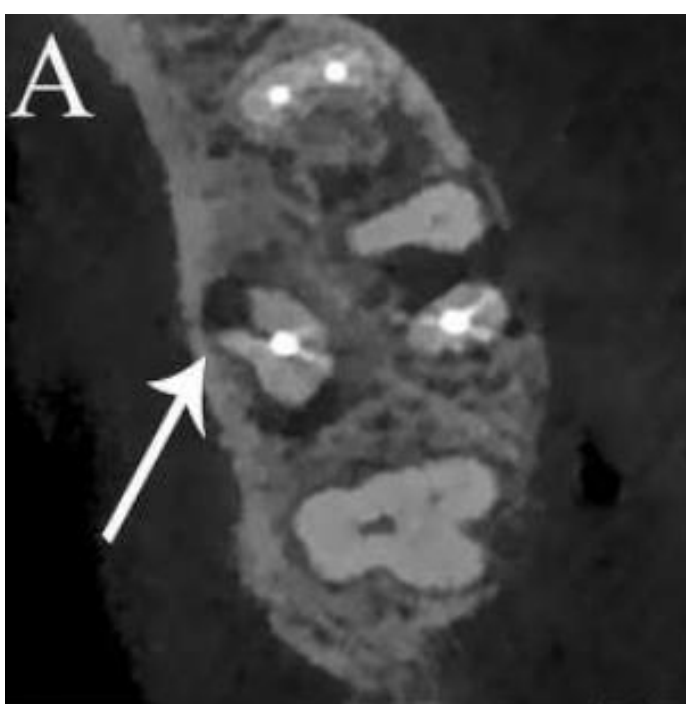












**Table 1 Summary of influence factors and possible strategies improving accuracy in the diagnosis of cracks/fractures using CBCT**

|                    | Influence factors             | Possible strategies improving accuracy                  |
|--------------------|-------------------------------|---------------------------------------------------------|
| CBCT<br>Unit       | Voxel size                    | Choose smaller voxel size for narrower cracks/fractures |
|                    | FOV                           | Choose dentoalveolar FOV                                |
|                    | Exposure parameter            | Increase mAs and number of basis images if possible     |
|                    | Receptor technology           | Inherent property of CBCT units, unelectable            |
|                    | Reconstruction algorithm      | Inherent property of CBCT units, unelectable            |
| Patient<br>(teeth) | Motion Artifact               | Keep patients as still as possible                      |
|                    | Beam hardening artefacts      | Take off removable metal materials                      |
|                    |                               | Develop artefact reduction algorithm                    |
|                    | Width of the cracks/fractures | Congenital property of teeth                            |
| Observer           | Experience                    | Advance training                                        |