

1. A 3 year old child has a cavity in the 84 tooth. Objectively: there is a carious cavity on the masticatory surface of the tooth within mantle dentin. Dentin is softened, probing of cavity walls is painful, percussion is painless. Make a diagnosis:

- a. Acute deep caries
- b. Chronic deep caries
- c. Chronic superficial caries
- d. Acute superficial caries

e. Acute median caries

2. Preventive examination of a 7-year-old schoolboy revealed unremovable grey-and-white layerings on the mucous membrane of cheek along the line of teeth joining. Mucous membrane is slightly hyperaemic, painless on palpation. The boy is emotionally unbalanced, bites his cheeks. What is the most likely diagnosis?

a. Mild leukoplakia

- b. Chronic candidous stomatitis
- c. Multiform exudative erythema
- d. Lichen ruber planus
- e. Chronic recurrent aphthous stomatitis

3. Mother of a 6,5-year-old child consulted a dentist about checking fissure hermetization of the 16, 26, 36, 46 teeth. They were treated six month ago. Sealant in the 36, 46 teeth is preserved, but sealant in the 16 and 26 teeth is absent. What is the tactics of choice?

- a. Preventive filling
- b. Coating the teeth with fluorine lacquer Ftorlak
- c. Electrophoresis with 1% sodium fluoride solution

d. To repeat fissure hermetization

- e. Applications with remodentum solution

4. A 12-year-old boy complains about short-term pain in a lower jaw tooth on the right caused by cold stimuli. Objectively: the 46 tooth has a carious cavity on the masticatory surface within the circumpulpal dentine which has no intercommunication with the dental cavity. The cavity floor and walls are coated with light softened dentine. Cold test causes short-standing pain. What is the most likely diagnosis?

- a. Acute localized pulpitis
- b. Acute median caries

c. Acute deep caries

- d. Acute diffuse pulpitis
- e. Chronic fibrous pulpitis

5. A 12-year-old child complains about sore throat, headache, body temperature rise up to 38,5°C, rhinitis, cough in summer period. Objectively: mucous membrane of oral cavity is hyperemic, edematic. There are 10-15 erosions up to 0,5 mm large on the palate and palatine arches, that arent covered with deposit and have red floor. Regional lymph nodes are enlarged and painful on palpation. What is the most likely diagnosis?

- a. Acute herpetic stomatitis
- b. Chronic recurrent aphthous stomatitis
- c. Infectious mononucleosis

d. Herpetic angina

- e. Erythema multiforme

6. A 12-year-old patient complains about gingival haemorrhage and tooth mobility. He has been suffering from this since the age of 4. Objectively: gums around all the teeth are hyperemic and edematic, bleed during instrumental examination. Tooth roots are exposed by $\frac{1}{3}$ and covered with whitish deposit. II degree tooth mobility is present. Dentogingival pouches are 4-5 mm deep. External examination revealed dryness and thickening of superficial skin layer on the hands and feet, there are also some cracks. What is the most likely diagnosis?

- a. Generalized periodontitis

b. Hand-Schuller-Christian disease

c. Papillon-Lefevre syndrome

d. Letterer-Siwe disease

e. Localized periodontitis

7. An 8-year-old boy was diagnosed with chronic fibrous pulpitis of the 21 tooth. It was treated by extirpation method. Choose the material for root filling:

a. Resorcin-formalin paste

b. Phosphate cement

c. Glass-ionomer cement

d. Zinc oxide eugenol paste

e. Calcium-containing material

8. An 11 year old girl complains about gingival haemorrhage during tooth brushing and eating. She has been suffering from this for a year. Gum of both upper and lower jaws is edematous and congestively hyperemic. Hygienic state of oral cavity is unsatisfactory. Bite is edge-to-edge. Roentgenological examination of periodontium revealed no pathological changes. What is the provisional diagnosis?

a. Acute catarrhal gingivitis

b. Localized periodontitis

c. Hypertrophic gingivitis

d. Chronic catarrhal gingivitis

e. Generalized periodontitis

9. A 13 year old child complained about painfulness of his lower lip. He has been suffering for two months. Objectively: mucous membrane of lower lip is hyperemic, excretory ducts of minor salivary glands are dilated, "dew" symptom is present. What is the most probable diagnosis?

a. Cheilitis exfoliativa

b. Contact allergic cheilitis

c. Meteorological cheilitis

d. Microbial cheilitis

e. Cheilitis glandularis

10. A virtually healthy 9 year old child complains about crown fracture and pain in the right superior frontal tooth. Objectively: crown part of the 11 tooth is broken by $\frac{1}{3}$, pulp is pointwise dehiscent, it is red, acutely painful and bleeds during probing. Percussion is slightly painful. The child got a trauma several hours ago. Choose an optimal treatment method:

a. Devital extirpation

b. Biological method

c. Devital amputation

d. Vital amputation

e. Vital extirpation

11. An 8 year old child has a carious cavity on the masticatory surface of the 16 tooth within circumpulpal dentin. Probing of cavity floor is painful, dentin is softened, slightly pigmented. Cold stimulus causes short-term pain. Choose a dental treatment paste:

a. Arsenious

b. Thymol

c. Resorcin-formaline

d. Paraformaldehyde

e. Hydroxycalcium-containing

12. A 5-year-old boy presents with body temperature rise up to 39,2°C, sore throat, headache, nausea. Objectively: mucous membrane of soft palate and palatine arches is evidently hyperemic, there is distinct border between it and surrounding tissues. The child's tongue is dry, edematous, its lateral surfaces are red and free of fur, fungiform papillae are evidently enlarged. Face skin is covered with spotty rash, hyperemic except for pale nasolabial triangle. Submandibular lymph nodes are painful on palpation. What is the causative agent of this disease?

a. Löffler's bacillus

b. Haemolytic streptococcus

c. Herpes virus

d. Coxsackie virus

e. Bordet-Gengou bacillus

13. Preventive examination of tongue back of a 6-year-old child revealed areas of epithelium desquamation in form of red oval spots located close to the zones of hyperkeratinization of filiform papillae. Clavate papillae are hypertrophic. There are no complaints. The child has a history of intestinal dysbacteriosis. What is the most likely diagnosis?

a. Acute catarrhal glossitis

b. Candidal glossitis

c. Glossitis areata exfoliativa

d. Rhomboid glossitis

e. Herpetic affection of tongue

14. A 14-year-old child complains about a cosmetic defect in the frontal teeth region. Objectively: enamel of the 11, 12, 21, 22, 31, 32, 41, 42 teeth is thin in the region of cutting edge, there is a sulcate enamel pit 1,5 mm wide which encircles the tooth and is parallel to the cutting edge. The cusps of the 16, 26, 36, 46 teeth are underdeveloped and have conical form. What is the most likely diagnosis?

a. Dentinogenesis imperfecta

b. Local hypoplasia

c. Stainton-Capdepont dysplasia

d. Systemic hypoplasia

e. Enamel dysplasia

15. A 7 month old child was brought to a dentist because of an ulcer in the oral cavity. The child was born prematurely. She has been fed with breast milk substitutes by means of a bottle with rubber nipple. Objectively: on the border between hard and soft palate there is an oval ulcer 0,8x1,0 cm large covered with yellowish-grey deposit and surrounded with a roll-like infiltration. Make a provisional diagnosis:

a. Acute candidous stomatitis

b. Bednars aphtha

c. Tuberculous ulcer

d. Settons aphtha

e. Acute herpetic stomatitis

16. A 10-year-old child complains about acute spontaneous spasmodic pain in an upper jaw tooth on the left. Objectively: distal contact surface of the 26 tooth exhibits a carious cavity filled with light softened dentine and localized within parapulpal dentine. Probing of the cavity floor causes acute pain, percussion is painless. Cold stimuli cause a long-standing pain attack. The child has a history of lidocaine allergy. Choose an optimal paste to be used during the first visit:

a. Iodoform

b. Formocresol

c. Zinc oxide eugenol

d. Paraformaldehyde

e. Thymol

17. Preventive examination of an 8-year-old boy revealed some lusterless chalk-like spots on the vestibular surface of the 11 and 21 teeth, which are localised in the precervical region. Subjective complaints are absent. What is the most likely diagnosis?

a. Acute initial caries

b. Local enamel hypoplasia

c. Chronic initial caries

d. Acute superficial caries

e. White-spotted fluorosis

18. Parents of a 6-year-old child consulted a dentist about oral cavity sanitation. Objectively: the 85 tooth has a carious cavity on the distal surface within the mantle dentine. Floor and walls are dense and pigmented. Probing is painless. Cold stimuli and percussion cause no pain. What is your provisional diagnosis?

- a. Acute median caries
- b. Chronic periodontitis
- c. Chronic fibrous pulpitis
- d. Chronic median caries**
- e. Chronic deep caries

19. A 3-year-old child complains of a cavity in a lower jaw tooth. Objectively: masticatory surface of the 84 tooth exhibits a carious cavity within mantle dentine. Dentine is softened, probing of the cavity walls is painful, percussion is painless. What is the most likely diagnosis?

- a. Chronic fibrous pulpitis
- b. Chronic superficial caries
- c. Acute median caries**
- d. Acute deep caries
- e. Chronic deep caries

20. According to the mother, a 5-year-old child complains about pain during swallowing, weakness, body temperature rise up to 39,5°C, swelling of submental lymph nodes. Objectively: the child's condition is grave, body temperature is 38,8°C. Mucous membrane of oral cavity is brightly hyperemic and edematous with haemorrhages and ulcerations. Pharynx is brightly hyperemic, lacunae are enlarged and have necrosis areas. Regional, cervical, occipital lymph nodes are painful, enlarged and dense. What is the most likely diagnosis?

- a. Lacunar tonsillitis
- b. Infectious mononucleosis**
- c. Necrotizing ulcerative gingivostomatitis
- d. Acute herpetic stomatitis
- e. Herpetic angina

21. A girl is 1,2 year old. Vestibular surface of her 52, 51, 61, 62 teeth has large carious cavities within the enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 teeth is painless. What treatment is to be administered?

- a. Amalgam filling
- b. Silver impregnation**
- c. Remineralizing therapy
- d. Filling with phosphoric acid cement
- e. Coating with fluorine lacquer

22. A 7-year-old child complains about spontaneous pain in the upper right molars. Both medial contact and masticatory surfaces of the 55 tooth have a carious cavity filled with clear softened dentin and localized within parapulpal dentin. Floor probing causes acute pain, tooth percussion is slightly painful. Mucous membrane of the alveolar process in the root projection of the 55 is intact, examination of this region revealed no roentgenological changes. What is the most likely diagnosis?

- a. Deep acute caries
- b. Acute diffuse pulpitis**
- c. Chronic gangrenous pulpitis
- d. Chronic fibrous pulpitis
- e. Exacerbation of chronic periodontitis

23. An 8-year-old boy complains about acute short-term pain in the 11 tooth caused by cold and sweet stimuli. Objectively: medial contact surface of the 11 tooth has a carious cavity within dentinoenamel junction filled with softened moist dentine that can be easily removed. Enamel edges are white, undermined, friable. Superficial probing is painless, thermal test is positive, percussion is negative. What is the filling material of choice?

- a. Composite material

b. Silicophosphate cement

c. Glass ionomer cement

d. Silver amalgam

e. Silicate cement

24. A 3-month-old child has been in disease state for two days. The child is anxious, refuses food, has normal body temperature. Objectively: mucous membrane of oral cavity is edematic and hyperemic. There is white caseous coating on the back of tongue and buccal mucosa. After the coating removal one can see extremely hyperemic surface with petechial haemorrhages. What is the most likely diagnosis?

a. Mild leukoplakia

b. Herpetic angina

c. Lichen ruber planus

d. Acute candidal stomatitis

e. Acute herpetic stomatitis

25. A 13 year old child has been suffering from pain in the left inferior molar induced by cold stimuli for several months. Objectively: on the masticatory surface of the 37 tooth there is a carious cavity with overhanging enamel edges filled with circumpulpal dentin. The cavity is filled with light softened dentin. Probing of the cavity floor is somewhat painful. Cold stimuli cause short-term pain. Make a provisional diagnosis:

a. Chronic median caries

b. Chronic deep caries

c. Chronic fibrous pulpitis

d. Acute median caries

e. Acute deep caries

26. An 11 year old patient complains about tooth mobility and gingival haemorrhage. He has been suffering since he was 3 years old. Objectively: gums around all the teeth are hyperemic, edematic, bleed during instrumentl examination. Tooth roots are dehiscd by $\frac{1}{3}$ and covered with white deposit. There is 2 degree tooth mobility. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of palms, anterior third of forearms, sole surfaces; there are scratches. What is the most probable provisional diagnosis?

a. Papillon-Lefevre syndrome

b. Letterer-Siwe disease

c. Niemann-Pick disease

d. Hand-Schueller-Christian disease

e. Gauchers disease

27. Preventive examination of a 4-year-old child revealed a deep carious cavity on the masticatory surface of the 54 tooth. The cavity has no intercommunication with the tooth cavity and is filled with dense dentine. Probing, percussion, thermal test of the 54 tooth provoke no pain. The decay/filled index is 1, hygiene index is 1,9. What filling material is the most suitable for permanent filling of the 54 tooth?

a. Chemical composite

b. Photopolymer composite

c. Silicate cement

d. Silicophosphate cement

e. Glass-ionomer cement

28. An 8 year old child complains about permanent dull pain in the 46 tooth that is getting stronger during cutting. The pain appeared 1 day ago. Previously there has been pain induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth, tooth cavity is closed, probing and temperature stimuli cause no pain reaction. Percussion is painful, a slight mobility is present. Gum around the 46 tooth is hyperemic, edematic, palpatory painful. X-ray picture shows no changes near the apex of undeveloped roots. What is your provisional diagnosis?

a. Acute general serous pulpitis

b. Acute purulent pulpitis

c. Acute serous periodontitis

d. Acute purulent periodontitis

e. Acute condition of chronic periodontitis

29. A 13-year-old girl complains about frequent falling out of a filling in the 21 tooth. It is known from the anamnesis that 2 years ago she underwent treatment on account of a dental trauma. Objectively: a transverse defect of $\frac{1}{3}$ of the crown in the 21 tooth. Percussion is painless. Tooth colour is unchanged. X-ray picture shows that root canal is filled by 1 mm from the apex, filling material closely fits the walls of root canal. What stomatological tactics should be chosen?

a. The defect should be restored with photopolymer

b. The root apex should be resected

c. The tooth should be crowned with an artificial crown

d. The tooth should be extracted

e. The root canal should be refilled

30. Parents of a 2-year-old girl complain about fistulas with purulent discharge in the region of the upper frontal teeth. Objectively: crowns of the 51, 52, 61, 62 teeth are significantly decayed, probing of root canal orifices is slightly painful, it causes significant haemorrhage. Percussion is painless. Mucous membrane of the alveolar process is pastose and cyanotic, there are cicatrices and fistulas in this region. What is the most likely diagnosis?

a. Exacerbation of chronic granulating periodontitis

b. Exacerbation of chronic fibrous periodontitis

c. Chronic granulating periodontitis

d. Chronic granulomatous periodontitis

e. Exacerbation of chronic granulomatous periodontitis

31. A 13,5 year old girl complains of gingival painfulness and haemorrhage during tooth brushing and eating, halitosis. She has been ill with angina for a week. Objectively: mucous membrane of gums in the area of frontal teeth of her upper and lower jaws is edematic, hyperemic. Apices of gingival papillae are necrotic, they also bleed when touched. There is a thick layer of soft tooth plaque. What is the causative agent of this disease?

a. Streptococci

b. Herpes virus

c. Anaerobic microflora

d. Staphylococci

e. Yeast fungi

32. Parents of an 8-year-old child complain about a painful formation in the child's oral cavity that obstructs food intake. The same complaints were registered two years ago. Mucous membrane of lateral tongue surface is hyperemic and edematic. There is an oval erosion over 0,7 cm large covered with yellow greyish deposit. Erosion edges are hyperemic and painful on palpation. The child has a history of chronic cholecystocholangitis. What is the most likely diagnosis?

a. Chronic recurrent aphthous stomatitis

b. Behcets syndrome

c. Traumatic erosion

d. Stevens-Johnson syndrome

e. Erythema multiforme

33. A 1,8 year old boy was under treatment in the infectious disease department. He was given ampicillin. On the 6th day of treatment there appeared white deposits in form of caseous films that were revealed on the hyperemic mucous membrane in the area of gingival torus, cheeks and on the tongue. The films can be removed leaving hyperemic surface underneath them. General condition is satisfactory. Body temperature is 36,7°C. What is the provisional diagnosis?

a. Drug-induced stomatitis

b. Acute herpetic stomatitis

c. Mild case of leukoplakia

d. Acute candidous stomatitis

e. Chronic candidous stomatitis

34. A girl is 18 months old. Vestibular surfaces of the 52, 51, 61, 62 teeth have wide carious cavities within enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 is painless. What is the treatment of choice?

a. Silver impregnation

b. Remineralizing therapy

c. Filling with phosphate cement

d. Fluorine laquer coating

e. Filling with amalgam

35. Examination of a 9 year old patient revealed a milky spot on the vestibular surface of the 11 tooth close to the cutting edge. Probing and temperature stimuli cause no pain reaction. The child was diagnosed with local enamel hypoplasia of the 11 tooth. What treatment should be administered?

a. Hermetization of the affected part

b. Cosmetic filling

c. Prophylactic hygiene of oral cavity

d. Spot removal

e. A course of remineralizing therapy

36. Parents of a 6-year-old child applied to a pedodontist for preventive examination of their child. The oral cavity is sanitized. According to the parents, the child has recently cut the 36 and the 46 tooth. What method of caries prevention should be applied within 1,5-2 years after cutting of the mentioned teeth?

a. Fissure silvering

b. Remodentum solution applications

c. Gargling with sodium fluoride

d. Fissure hermetization

e. Coating the teeth with fluorine lacquer Ftorlak

37. A 12-year-old child complains about bleeding and pain in the 46 tooth during eating. He has a history of acute pain some time before. Objectively: there is a deep carious cavity (Blacks class II) communicating with the dental cavity, partially filled with overgrown pulp. Pulp tissue is bleeding, painful on touch. There is soft white dental deposit. What is the most likely diagnosis?

a. Chronic papillitis

b. Chronic gangrenous pulpitis

c. Chronic granulating periodontitis

d. Chronic hypertrophic pulpitis

e. Chronic simple pulpitis

38. Examination of a 6-year-old girl revealed a deep carious cavity in the 85 tooth. Percussion and probing are painless. After removal of the softened dentine, communication with the tooth cavity showed up. Deep probing is painless. X-ray picture of the 85 tooth shows the focus of destruction of bone tissue in the region of bifurcation; cortical plate of the 35 has no pathological changes. It is most expedient to use the following material for the root filling:

a. Glass-ionomer cement

b. Resorcin-formalin paste

c. Zinc oxide eugenol cement

d. Phosphate cement

e. Calcium-containing paste

39. A 12-year-old child complains about bleeding from the tooth socket during eating and tooth brushing. The tooth has hurt him before. Objectively: the 36 tooth has a deep cavity communicating with the tooth cavity and filled with red excrescences. Probing causes pain and slight haemorrhage; percussion is painless, thermal stimuli cause mild pain. What is your provisional diagnosis?

a. Chronic hypertrophic pulpitis

b. Chronic papillitis

- c. Chronic simple pulpitis
- d. Gingival polyp
- e. Chronic granulating pulpitis

40. A 13-year-old patient complains about gingival haemorrhage during tooth brushing. Objectively: gums around all the teeth are hyperemic and edematic, PMA index (papillary marginal alveolar index) is 46%, Greene-Vermillion hygiene index is 2,5. Provisional diagnosis: exacerbation of chronic generalized catarrhal gingivitis. This patient should be recommended to use a toothpaste with the following active component:

- a. Calcium glycerophosphate
- b. Vitamins A, D, E
- c. Microelement complex
- d. Chlorhexidine**
- e. Monofluorophosphate

41. A 10-year-old child undergoes sanitation of the oral cavity. The girl was found to have chalky spots on the vestibular surfaces in the precervical region of the 21 and 12 teeth. Enamel surface is dull, smooth. Pain reaction to the temperature stimuli is absent. What additional method of examination is expected to confirm the diagnosis?

- a. Ultraviolet stomatoscopy
- b. Vital staining**
- c. Intraoral roentgenography
- d. Orthopantomography
- e. Electroodontodiagnostics

42. A 9-year-old child complains about pain caused by sweet and sour food in an upper tooth on the left. Objectively: the 26 tooth has a carious cavity on the masticatory surface within the enamel limits. What is the optimal material to fill the 26 tooth?

- a. Silicate cement
- b. Zinc phosphate cement
- c. Glass ionomer
- d. Silicophosphate cement
- e. Composite**

43. A 2-month-old child is anxious, sleeps badly, refuses food, has subfebrile body temperature. Objectively: hyperaemic mucous membrane of the child's tongue, lips, cheeks and palate has a caseous coating that can be easily removed with a tampon. Regional lymph nodes are slightly enlarged and painful on palpation. What disease are these symptoms typical for?

- a. Acute pseudomembranous candidous stomatitis**
- b. Acute herpetic stomatitis
- c. Measles-associated stomatitis
- d. Diphtheria
- e. Chronic atrophic candidous stomatitis

44. Stomatological examination of a child revealed abnormal form of the central incisors: they are barrel-shaped, there is a semilunar groove on the cutting edge. It is known from the anamnesis that the child's mother had syphilis during pregnancy. Besides the dental abnormality the child presents also with deafness and parenchymatous keratitis. This abnormality of tooth development is called:

- a. Wedge-shaped defect
- b. Pfluger teeth
- c. Hutchinsons teeth**
- d. Fluorosis (destructive form)
- e. Erosion of hard tissues

45. A 13 year old boy complains about pain in the 46 tooth induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth within light softened circumpulpal dentin. Probing of carious cavity floor is overall painful, cold stimulus causes acute pain that is quickly relieved after the stimulus elimination. Choose an optimal dental treatment paste:

- a. Iodoform
- b. Thymol

c. Hydroxycalcium-containing

- d. Resorcin-formaline
- e. Zink-eugenol

46. An 8 year old child complains about pain in the 21 tooth that is getting worse during cutting. A month ago a part of tooth crown broke off as a result of a fall. The child didnt consult a dentist. Objectively: in the area of medial angle of the 21 tooth there is a crown defect that makes up $\frac{1}{3}$ of the crowns height. Tooth cavity is open, probing and thermal stimulus cause no pain. Percussion is acutely painful. Gum around the 21 tooth is edematic and hyperemic. What is the provisional diagnosis?

a. Pulpitis complicated by periodontitis

b. Acute condition of chronic periodontitis

- c. Acute serous periodontitis
- d. Acute condition of chronic pulpitis
- e. Acute purulent periodontitis

47. A 10,5-year-old child complains about painful skin rash on his lips. Objectively: red border is edematic and hyperemic, covered with cracks and multiple bloody crusts. There are small vesicles with serous contents on the upper lip skin that merge together in certain areas. Maceration and madescence of skin is also present, especially in the mouth corners. What is the most likely diagnosis?

- a. Atopic cheilitis
- b. Meteorological cheilitis

c. Eczematous cheilitis

- d. Actinic cheilitis
- e. Exfoliative cheilitis

48. A 7 year old girl was brought to a hospital for the purpose of oral cavity sanitation. She was born and has been living in an area where fluorine concentration in water makes up 2,5 mg/l. Examination revealed symmetrically placed dark spots on the vestibular surfaces of the 11, 21, 31, 41 teeth as well as on the tubera of the 16, 26, 36, 46 teeth. It is known from the anamnesis that the teeth cut out already with affection. What is the most probable diagnosis?

- a. Systemic enamel hypoplasia
- b. Local enamel hypoplasia
- c. Odontogenesis imperfecta
- d. Amelogenesis imperfecta

e. Tooth fluorosis

49. A 9-year-old child complains about dull pain that is getting worse while pressing the tooth. The tooth was treated for pulpitis one mounth ago. Objectively: the 36 tooth is filled. Percussion causes acute pain. Mucous membrane is hyperemic and edematic. What is the most likely diagnosis?

- a. Exacerbation of chronic pulpitis
- b. Acute suppurative pulpitis
- c. Exacerbation of chronic periodontitis

d. Acute serous periodontitis

e. Acute diffuse pulpitis

50. A 12 year old girl complains about burning and painfulness of her tongue, especially during eating spicy food. Objectively: there are oval red spots on the tip and dorsum of tongue. Filiform papillae are not present in the affected area. The girl mentions that the spots become periodically larger and have migratory nature. What is the most probable diagnosis?

- a. Lingua plicata
- b. Median rhomboid glossitis

c. Glossitis areata exfoliativa

d. Glossotrichia

e. Raspberry tongue

51. A 2 year old child was brought to a dentist to consult about rash and painfulness during eating that appeared yesterday. Objectively: body temperature is 37,5°C, skin is clean, submaxillary lymph nodes are painful. Examination of oral cavity revealed on the mucous membrane of lips and tongue roundish painful erosions 1-3 mm in diameter covered with whitish deposit. The gum on both upper and lower jaws is hyperemic, edematic, bleed when touched. What is the most probable diagnosis?

- a. Recurrent aphthous stomatitis
- b. Stevens-Johnson syndrome
- c. Acute herpetic stomatitis
- d. Multiform exudative erythema
- e. Recurrent herpetic stomatitis

52. A 5-year-old child complains about spontaneous pain in an upper jaw tooth on the right that is getting worse at night and during eating cold food. Objectively: the 65 tooth has a deep cavity communicating with the tooth cavity. Probing is painful, percussion is painless. Cold water causes long-standing pain. What is your provisional diagnosis?

- a. Acute serous pulpitis
- b. Acute purulent pulpitis
- c. Acute periodontitis
- d. Exacerbation of chronic periodontitis
- e. Exacerbation of chronic pulpitis

53. An 11 year old girl complains about bleeding of a tooth on her lower jaw during eating and tooth brushing. This tooth hurt her before but she didnt consult a dentist. Examination of the 46 tooth revealed a deep cavity communicating with tooth cavity and filled with red growth tissue. Probing causes a slight haemorrhage and pain, percussion is painless, cold stimulus cause mild pain. What is the most probable diagnosis?

- a. Chronic papillitis
- b. Chronic granulating periodontitis
- c. Chronic hypertrophic pulpitis
- d. Gingival polyp
- e. Chronic simple pulpitis

54. A 13-year-old boy complains about pain in the upper jaw caused by warm and hot stimuli, offensive breath when he sucks his tooth. Objectively: the 24 tooth is changed in color, there is a deep carious cavity communicating with the tooth cavity. Deep probing is painful. Percussion causes no pain. What is the most likely diagnosis?

- a. Exacerbation of chronic periodontitis
- b. Chronic gangrenous pulpitis
- c. Chronic fibrous pulpitis
- d. Chronic periodontitis
- e. Exacerbation of chronic pulpitis

55. An 8,5-year-old child is apparently healthy. The child complains about pain in an upper tooth on the left caused by traumatic injury sustained three hours ago. Objectively: the crown part of the 21 tooth is destroyed by $\frac{1}{2}$, the pulp is red and significantly exposed, probing causes acute pain and bleeding. Percussion of the 21 tooth is extremely painful. Choose the most efficient treatment method of the 21 tooth:

- a. Vital amputation
- b. Devital amputation
- c. Bioassay technique
- d. Devital extirpation
- e. Vital extirpation

56. A 14-year-old child complains about acute spontaneous pain in an upper jaw tooth on the right. The pain has been lasting for 3 days, it is throbbing, irradiating to the temple, getting worse at night. Objectively: surface of the 15 tooth exhibits a carious cavity within parapulpal dentine. Dentine is

softened, of greyish colour. Probing of the whole cavity floor is painful, percussion of the 15 tooth is painless. What is the most likely diagnosis?

- a. Acute focal pulpitis
- b. Acute diffuse pulpitis
- c. Acute purulent pulpitis**
- d. Acute periodontitis
- e. Exacerbation of chronic periodontitis

57. A 13 year old child complains about acute spontaneous short-term attack-like pain in the area of the 36 tooth that is getting worse during eating. The pain appeared yesterday. Objectively: there is a deep carious cavity on the masticatory surface of the 36 tooth. Tooth cavity is closed, floor probing is painful in one point. Cold stimulus causes short-term pain. Make a diagnosis:

- a. Acute diffuse pulpitis
- b. Acute deep caries
- c. Acute localized pulpitis**
- d. Chronic fibrous pulpitis
- e. Acute condition of chronic pulpitis

58. A 13-year-old girl has been experiencing gingival hemorrhages and frontal teeth mobility throughout the last month. Objectively: gingival mucous membrane in the region of lower incisors and canines is edematous, hyperemic, it bleeds on touch. These teeth present with I degree mobility, parodontal pouches are 3 mm deep. Orthopantomogram shows reduction of bone tissue of interalveolar septa by $\frac{1}{3}$ of their height. Frontal teeth of the lower jaw are overcrowded. Hygiene index is 4,2. What local treatment should be provided in the first place?

- a. Physical therapy
- b. Antibacterial therapy
- c. Anti-inflammatory therapy
- d. Orthodontic care
- e. Professional hygiene**

59. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up 2 days ago, the boy has a history of recent angina. Objectively: oral cavity hygiene is unsatisfactory, teeth are covered with soft white deposit. Gums are hyperaemic, gingival papillae are covered with greyish coating. What is the most likely diagnosis?

- a. Ulcero-necrotic gingivitis**
- b. Hypertrophic gingivitis
- c. Desquamative gingivitis
- d. Chronic catarrhal gingivitis
- e. Acute catarrhal gingivitis

60. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up two days ago, the boy had a history of recent angina. Objectively: oral hygiene is unsatisfactory, the teeth are coated with soft dental deposit. Gums are hyperemic, gingival papillae are covered with greyish deposit. Specify the causative agent of this disease:

- a. Herpes viruses
- b. Streptococci
- c. Fusobacteria, spirochetes**
- d. Staphylococci
- e. Yeast fungi

61. A 12-year-old girl complains about swelling, reddening and itching of lips. She has a history of bronchial asthma. Such condition has been observed in the child for 3 years in winter period. Objectively: red border of lips and adjacent skin exhibit a well-defined erythema and edema, small cracks. There are signs of lip lichenification. There are also marks of scratches on the skin of lips, cheeks and forehead in form of abrasions and crusts. Mucous membrane exhibits no pathological changes. What is the most likely diagnosis?

- a. Atopic cheilitis**

- b. Meteorological cheilitis
- c. Microbial cheilitis
- d. Exfoliative cheilitis
- e. Contact allergic cheilitis

62. Parents of a 5-year-old child noted irregular colour of the child's back of tongue and consulted a pedodontist about this. Objectively: the oral cavity is sanitized, DF index = 4, dorsal and lateral surfaces of tongue have area of desquamating epithelium bordering upon areas of hypertrophy and increased cornification of filiform papillae. The child has a history of being allergic to some foodstuffs. What is the clinical diagnosis?

- a. Acute catarrhal glossitis
- b. Desquamative glossitis**
- c. Candidous glossitis
- d. Tuberculous glossitis
- e. Herpetic tongue lesion

63. During the planned oral cavity sanitation an 11,5-year-old girl complained about periodic spontaneous chilalgia during food intake. Objectively: mucous membrane of lips is hyperemic, edematic and dry. During talking one can observe small drops of mucous secretion. Make the provisionaldiagnosis:

- a. Cheilitis exfoliativa
- b. Cheilitis glandularis**
- c. Eczematous cheilitis
- d. Angular cheilitis
- e. Contact allergic cheilitis

64. Examination of an 11 year old girl revealed: caries intensity (sum of carious, filled and extracted teeth) = 3, Green-Vermillions hygienic index - 1,6, papillary-marginally-alveolar index = 20%. The girl catches a cold once or twice a year. Average caries intensity index for this age group in this region is 4. How many times a year should the girl see a dentist?

- a. 2
- b. 1-2
- c. 1**
- d. 2-3
- e. 3-4

65. A 12-year-old boy complains about permanent intense throbbing toothache that is getting worse when biting down on food. Objectively: the patient's face is asymmetric because of a collateral edema of soft tissues, submandibular lymph nodes are enlarged and painful on palpation. The 26 tooth has a deep cavity not communicating with the tooth cavity. Thermal test is positive, probing is painless, percussion causes acute pain, the tooth is mobile. X-ray picture of the 26 tooth shows no changes in the periodontium. What is the most likely diagnosis?

- a. Acute purulent periodontitis**
- b. Exacerbation of chronic periodontitis
- c. Pulpitis complicated by periodontitis
- d. Acute purulent pulpitis
- e. Acute serous periodontitis

66. A 6-year-old girl was brought to the dentist for completing the treatment of the 75 tooth for chronic granulating periodontitis. The patient has no complaints. Objectively: occlusive dressing on the 75 tooth remains intact, percussion is painless, mucous membrane in the region of the 75 tooth exhibits no pathological changes, is painless on palpation. What material is the most appropriate for the root canal filling in this case?

- a. Glass ionomer cement
- b. Iodoform paste
- c. Sealer with gutta-percha point
- d. Calcium-containing paste

e. Zinc oxide eugenol paste

67. A 4-year-old child presents with headache, nausea, pain when swallowing. Body temperature is 39°C. Examination of the oral cavity revealed extremely hyperaemic mucous membrane and tonsils. On the first day of disease the child's tongue was furred with greyish coating, on the second day the tongue was found to be self-purified. On the third day the tongue was smooth, of crimson colour, with hyperaemic fungiform papillae. What is presumptive diagnosis?

- a. Varicella
- b. Diphtheria
- c. Herpangina

d. Scarlet fever

- e. Measles

68. A 14-year-old girl complains about an aesthetic defect in form of white spots on her teeth. Fluorine concentration in the drinking water in the area of her residence is 2 mg/l. Objectively: vestibular surfaces of all teeth are covered with ill-defined white spots. What is the most likely diagnosis?

- a. Amelogenesis imperfecta

b. Fluorosis

- c. Systemic hypoplasia
- d. Local hypoplasia
- e. Multiple caries

69. A 3 year old child has a cavity in the 84 tooth. Objectively: there is a carious cavity on the masticatory surface of the tooth within mantle dentin. Dentin is softened, probing of cavity walls is painful, percussion is painless. Make a diagnosis:

a. Acute median caries

- b. Acute superficial caries
- c. Chronic deep caries
- d. Acute deep caries
- e. Chronic superficial caries

70. Parents of a 5-month-old baby complain of food refusal, ulcers on the palate. The infant was born prematurely, is now artificially fed. Objectively: at the junction of hard and soft palate there is an oval well-defined ulcer, covered with yellow-gray film and limited by a hyperemic swelling, protruding above the surface of oral mucosa. Which group of drugs should be administered for the aphtha epithelization?

a. Keratoplastic agents

- b. Antimycotic drugs
- c. Antibiotics
- d. Antiseptics
- e. Antiviral drugs

71. Preventive examination of a 7-year-old schoolboy revealed unremovable grey-and-white layerings on the mucous membrane of cheek along the line of teeth joining. Mucous membrane is slightly hyperaemic, painless on palpation. The boy is emotionally unbalanced, bites his cheeks. What is the most likely diagnosis?

- a. Chronic candidous stomatitis
- b. Chronic recurrent aphthous stomatitis

c. Mild leukoplakia

- d. Lichen ruber planus
- e. Multiform exudative erythema

72. Mother of a 6,5-year-old child consulted a dentist about checking fissure hermetization of the 16, 26, 36, 46 teeth. They were treated six month ago. Sealant in the 36, 46 teeth is preserved, but sealant in the 16 and 26 teeth is absent. What is the tactics of choice?

- a. Applications with remodentum solution
- b. Preventive filling

c. To repeat fissure hermetization

- d. Coating the teeth with fluorine lacquer Ftorlak
- e. Electrophoresis with 1% sodium fluoride solution

73. A 12-year-old boy complains about short-term pain in a lower jaw tooth on the right caused by cold stimuli. Objectively: the 46 tooth has a carious cavity on the masticatory surface within the circumpulpal dentine which has no intercommunication with the dental cavity. The cavity floor and walls are coated with light softened dentine. Cold test causes short-standing pain. What is the most likely diagnosis?

a. Acute deep caries

- b. Acute localized pulpitis
- c. Chronic fibrous pulpitis
- d. Acute diffuse pulpitis
- e. Acute median caries

74. A 10-year-old child complains of sore throat, cough, fever (up to 38°C). These presentations turned up 2 days ago. Objectively: acute catarrhal stomatitis is present. Tonsils are swollen, hyperemic, covered with yellow-gray friable film which can be easily removed. Submandibular and cervical lymph nodes are significantly enlarged, painful on palpation. Laboratory analysis revealed leuko- and monocytosis. What is the most likely diagnosis?

a. Infectious mononucleosis

- b. Scarlet fever
- c. Measles
- d. Rubella
- e. Diphtheria

75. A 12-year-old child complains about sore throat, headache, body temperature rise up to 38,5°C, rhinitis, cough in summer period. Objectively: mucous membrane of oral cavity is hyperemic, edematic. There are 10-15 erosions up to 0,5 mm large on the palate and palatine arches, that arent covered with deposit and have red floor. Regional lymph nodes are enlarged and painful on palpation. What is the most likely diagnosis?

- a. Chronic recurrent aphthous stomatitis
- b. Infectious mononucleosis
- c. Acute herpetic stomatitis
- d. Erythema multiforme

e. Herpetic angina

76. A 12-year-old patient complains about gingival haemorrhage and tooth mobility. He has been suffering from this since the age of 4. Objectively: gums around all the teeth are hyperemic and edematic, bleed during instrumental examination. Tooth roots are exposed by 1/3 and covered with whitish deposit. II degree tooth mobility is present. Dentogingival pouches are 4-5 mm deep. External examination revealed dryness and thickening of superficial skin layer on the hands and feet, there are also some cracks. What is the most likely diagnosis?

- a. Generalized periodontitis
- b. Hand-Schuller-Christian disease

c. Papillon-Lefevre syndrome

- d. Letterer-Siwe disease
- e. Localized periodontitis

77. An 8-year-old boy was diagnosed with chronic fibrous pulpitis of the 21 tooth. It was treated by extirpation method. Choose the material for root filling:

a. Calcium-containing material

- b. Zinc oxide eugenol paste
- c. Phosphate cement
- d. Resorcin-formalin paste
- e. Glass-ionomer cement

78. An 11 year old girl complains about gingival haemorrhage during tooth brushing and eating. She

has been suffering from this for a year. Gum of both upper and lower jaws is edematous and congestively hyperemic. Hygienic state of oral cavity is unsatisfactory. Bite is edge-to-edge. Roentgenological examination of periodontium revealed no pathological changes. What is the provisional diagnosis?

- a. Hypertrophic gingivitis
- b. Chronic catarrhal gingivitis**
- c. Generalized periodontitis
- d. Acute catarrhal gingivitis
- e. Localized periodontitis

79. A 14-year-old child complains of bleeding and pain during eating in the lower right molar. Objectively: the medial contact and masticatory surfaces of the 46 tooth exhibit a large carious cavity filled with red tissue. Superficial probing causes pain and moderate bleeding. Deeper probing causes acute pain. Percussion is painless. What is your provisional diagnosis:

- a. Chronic hypertrophic pulpitis**
- b. Chronic gangrenous pulpitis
- c. Chronic granulating periodontitis
- d. Chronic papillitis
- e. Chronic fibrous pulpitis

80. A 10-year-old girl complains of minor pain in a lower jaw tooth occurring during having cold food. Objectively: the masticatory surface of the 36 tooth exhibits a carious cavity with a narrow inlet located within the mantle dentin. Probing causes pain along the enamel-dentin border. Make a diagnosis:

- a. Acute deep caries
- b. Superficial caries
- c. Chronic median caries
- d. Acute median caries**
- e. Chronic deep caries

81. A 13 year old child complained about painfulness of his lower lip. He has been suffering for two months. Objectively: mucous membrane of lower lip is hyperemic, excretory ducts of minor salivary glands are dilated, "dew" symptom is present. What is the most probable diagnosis?

- a. Cheilitis glandularis**
- b. Microbial cheilitis
- c. Contact allergic cheilitis
- d. Cheilitis exfoliativa
- e. Meteorological cheilitis

82. A virtually healthy 9 year old child complains about crown fracture and pain in the right superior frontal tooth. Objectively: crown part of the 11 tooth is broken by 1/3, pulp is pointwise dehiscent, it is red, acutely painful and bleeds during probing. Percussion is slightly painful. The child got a trauma several hours ago. Choose an optimal treatment method:

- a. Vital amputation
- b. Vital extirpation
- c. Devital extirpation
- d. Biological method**
- e. Devital amputation

83. A 5-year-old boy presents with body temperature rise up to 39,2°C, sore throat, headache, nausea. Objectively: mucous membrane of soft palate and palatine arches is evidently hyperemic, there is distinct border between it and surrounding tissues. The child's tongue is dry, edematous, its lateral surfaces are red and free of fur, fungiform papillae are evidently enlarged. Face skin is covered with spotty rash, hyperemic except for pale nasolabial triangle. Submandibular lymph nodes are painful on palpation. What is the causative agent of this disease?

- a. Herpes virus
- b. Coxsackie virus**

c. Haemolytic streptococcus

- d. Bordet-Gengou bacillus
- e. Löffler's bacillus

84. Preventive examination of tongue back of a 6-year-old child revealed areas of epithelium desquamation in form of red oval spots located close to the zones of hyperkeratinization of filiform papillae. Clavate papillae are hypertrophic. There are no complaints. The child has a history of intestinal dysbacteriosis. What is the most likely diagnosis?

- a. Herpetic affection of tongue

b. Glossitis areata exfoliativa

- c. Acute catarrhal glossitis
- d. Candidal glossitis
- e. Rhomboid glossitis

85. A 7 month old child was brought to a dentist because of an ulcer in the oral cavity. The child was born prematurely. She has been fed with breast milk substitutes by means of a bottle with rubber nipple. Objectively: on the border between hard and soft palate there is an oval ulcer 0,8x1,0 cm large covered with yellowish-grey deposit and surrounded with a roll-like infiltration. Make a provisional diagnosis:

- a. Tuberculous ulcer
- b. Settons aphtha

c. Bednars aphtha

- d. Acute herpetic stomatitis
- e. Acute candidous stomatitis

86. A 10-year-old child complains about acute spontaneous spasmodic pain in an upper jaw tooth on the left. Objectively: distal contact surface of the 26 tooth exhibits a carious cavity filled with light softened dentine and localized within parapulpal dentine. Probing of the cavity floor causes acute pain, percussion is painless. Cold stimuli cause a long-standing pain attack. The child has a history of lidocaine allergy. Choose an optimal paste to be used during the first visit:

a. Paraformaldehyde

- b. Thymol
- c. Zinc oxide eugenol
- d. Formocresol
- e. Iodoform

87. Preventive examination of an 8-year-old boy revealed some lusterless chalk-like spots on the vestibular surface of the 11 and 21 teeth, which are localised in the precervical region. Subjective complaints are absent. What is the most likely diagnosis?

- a. Local enamel hypoplasia
- b. White-spotted fluorosis

c. Acute initial caries

- d. Acute superficial caries
- e. Chronic initial caries

88. Parents of a 6-year-old child consulted a dentist about oral cavity sanitation. Objectively: the 85 tooth has a carious cavity on the distal surface within the mantle dentine. Floor and walls are dense and pigmented. Probing is painless. Cold stimuli and percussion cause no pain. What is your provisional diagnosis?

- a. Chronic deep caries
- b. Acute median caries

c. Chronic median caries

- d. Chronic periodontitis
- e. Chronic fibrous pulpitis

89. A 5-year-old child presents with chronic deep caries within the contact and masticatory surfaces of the 75, 74, 84, 85 teeth. Which filling material should be used?

- a. Evicrol

b. Silidont

c. Silver amalgam

d. Silicin

e. Infantid

90. According to the mother, a 5-year-old child complains about pain during swallowing, weakness, body temperature rise up to 39,5°C, swelling of submental lymph nodes. Objectively: the child's condition is grave, body temperature is 38,8°C. Mucous membrane of oral cavity is brightly hyperemic and edematous with haemorrhages and ulcerations. Pharynx is brightly hyperemic, lacunae are enlarged and have necrosis areas. Regional, cervical, occipital lymph nodes are painful, enlarged and dense. What is the most likely diagnosis?

a. Necrotizing ulcerative gingivostomatitis

b. Acute herpetic stomatitis

c. Infectious mononucleosis

d. Herpetic angina

e. Lacunar tonsillitis

91. Parents of a 1,5-month-old child complain of whitish depositions on the child's buccal and labial mucosa. Objectively: labial and buccal mucosa is hyperemic and covered with caseous deposition that can be easily removed. Specify the causative agent of this disease:

a. Loefflers bacillus

b. Diplococci

c. Vincents spirochaetes

d. Fusiform bacillus

e. Candida fungi

92. A 7-year-old boy complains of fever up to 38°C, headache, sore throat. Objectively: slightly hyperemic soft palate mucosa, anterior palatine arches and tonsils exhibit erosions. Submandibular lymph nodes are slightly enlarged, painless. What is the causative agent of this disease?

a. Bordet-Gengou bacillus

b. Coxsackie virus

c. Epstein-Barr virus

d. Herpes simplex

e. Loefflers Bacillus

93. A girl is 1,2 year old. Vestibular surface of her 52, 51, 61, 62 teeth has large carious cavities within the enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 teeth is painless. What treatment is to be administered?

a. Coating with fluorine lacquer

b. Amalgam filling

c. Filling with phosphoric acid cement

d. Remineralizing therapy

e. Silver impregnation

94. Parents of a 12-year-old child complain about white patches on the upper front teeth, which appeared six months ago. Objectively: chalk-like patches on the vestibular surfaces in the precervical area of the 13, 12, 11, 21, 22, 23 teeth. Their enamel is dull, pliable and rough on probing. There is a history of short-term pain caused by chemical stimuli. What is your provisional diagnosis?

a. Acute superficial caries

b. Chronic initial caries

c. Acute initial caries

d. Systemic enamel hypoplasia

e. Dental fluorosis

95. A 7-year-old child complains about spontaneous pain in the upper right molars. Both medial contact and masticatory surfaces of the 55 tooth have a carious cavity filled with clear softened dentin and localized within parapulpal dentin. Floor probing causes acute pain, tooth percussion is slightly painful. Mucous membrane of the alveolar process in the root projection of the 55 is intact,

examination of this region revealed no roentgenological changes. What is the most likely diagnosis?

- a. Chronic gangrenous pulpitis
- b. Chronic fibrous pulpitis

c. Acute diffuse pulpitis

- d. Exacerbation of chronic periodontitis
- e. Deep acute caries

96. An 8-year-old boy complains about acute short-term pain in the 11 tooth caused by cold and sweet stimuli. Objectively: medial contact surface of the 11 tooth has a carious cavity within dentinoenamel junction filled with softened moist dentine that can be easily removed. Enamel edges are white, undermined, friable. Superficial probing is painless, thermal test is positive, percussion is negative. What is the filling material of choice?

a. Silicate cement

b. Glass ionomer cement

- c. Composite material
- d. Silicophosphate cement
- e. Silver amalgam

97. A 3-month-old child has been in disease state for two days. The child is anxious, refuses food, has normal body temperature. Objectively: mucous membrane of oral cavity is edematic and hyperemic. There is white caseous coating on the back of tongue and buccal mucosa. After the coating removal one can see extremely hyperemic surface with petechial haemorrhages. What is the most likely diagnosis?

- a. Acute herpetic stomatitis
- b. Mild leukoplakia

c. Acute candidal stomatitis

- d. Herpetic angina
- e. Lichen ruber planus

98. A 13 year old child has been suffering from pain in the left inferior molar induced by cold stimuli for several months. Objectively: on the masticatory surface of the 37 tooth there is a carious cavity with overhanging enamel edges filled with circumpulpal dentin. The cavity is filled with light softened dentin. Probing of the cavity floor is somewhat painful. Cold stimuli cause short-term pain. Make a provisional diagnosis:

a. Chronic deep caries

b. Acute deep caries

- c. Acute median caries
- d. Chronic fibrous pulpitis
- e. Chronic median caries

99. An 11-year-old child complains of a carious cavity in the left upper molar, which appeared six months ago. Objectively: the medial contact surface of the 26 tooth exhibits a carious cavity located within the mantle dentin. The cavity floor and walls are dense, pigmented, with no pain upon probing. The response to thermal stimuli is absent. Percussion of the tooth causes no pain. Make a provisional diagnosis:

- a. Acute median caries
- b. Chronic deep caries

c. Chronic median caries

- d. Acute deep caries
- e. Chronic periodontitis

100. An 11 year old patient complains about tooth mobility and gingival haemorrhage. He has been suffering since he was 3 years old. Objectively: gums around all the teeth are hyperemic, edematic, bleed during instrumentl examination. Tooth roots are dehiscd by 1/3 and covered with white deposit. There is 2 degree tooth mobility. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of palms, anterior third of forearms, sole surfaces; there are scratches. What is the most probable provisional diagnosis?

- a. Niemann-Pick disease
- b. Papillon-Lefevre syndrome**
- c. Letterer-Siwe disease
- d. Gaucher disease
- e. Hand-Schüller-Christian disease

101. Examination of a 5-year-old child revealed a carious cavity communicating with the tooth cavity on the approximal surface of the 54 tooth. Halitosis is present. Superficial probing of the cavity is painless, deeper probing causes pain reaction. Percussion is painless. Interviewing revealed that hot food caused pain. Select the medication for antiseptic treatment of root canals:

- a. Alcohol
- b. Formalin solution
- c. Aethonium solution
- d. Furacilin solution
- e. Sodium hypochlorite**

102. A 14-year-old teen complains of gingival haemorrhages during tooth brushing. Objectively: gingival mucosa is hyperemic, pastous, bleeds when touched. Schiller-Pisarev test is positive. PMA index - 70%. Hygienic index - 3,0. X-ray picture of the frontal area depicts no evident changes. What is the most likely diagnosis?

- a. Exacerbation of chronic periodontitis
- b. Chronic catarrhal gingivitis**
- c. Acute catarrhal gingivitis
- d. Chronic periodontitis
- e. Chronic hypertrophic gingivitis

103. Preventive examination of a 4-year-old child revealed a deep carious cavity on the masticatory surface of the 54 tooth. The cavity has no intercommunication with the tooth cavity and is filled with dense dentine. Probing, percussion, thermal test of the 54 tooth provoke no pain. The decay/filled index is 1, hygiene index is 1,9. What filling material is the most suitable for permanent filling of the 54 tooth?

- a. Silicophosphate cement
- b. Silicate cement
- c. Glass-ionomer cement**
- d. Chemical composite
- e. Photopolymer composite

104. An 8 year old child complains about permanent dull pain in the 46 tooth that is getting stronger during cutting. The pain appeared 1 day ago. Previously there has been pain induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth, tooth cavity is closed, probing and temperature stimuli cause no pain reaction. Percussion is painful, a slight mobility is present. Gum around the 46 tooth is hyperemic, edematous, palpably painful. X-ray picture shows no changes near the apex of undeveloped roots. What is your provisional diagnosis?

- a. Acute purulent periodontitis
- b. Acute condition of chronic periodontitis
- c. Acute purulent pulpitis
- d. Acute general serous pulpitis
- e. Acute serous periodontitis**

105. A 13-year-old girl complains about frequent falling out of a filling in the 21 tooth. It is known from the anamnesis that 2 years ago she underwent treatment on account of a dental trauma. Objectively: a transverse defect of 1/3 of the crown in the 21 tooth. Percussion is painless. Tooth colour is unchanged. X-ray picture shows that root canal is filled by 1 mm from the apex, filling material closely fits the walls of root canal. What stomatological tactics should be chosen?

- a. The defect should be restored with photopolymer**
- b. The root apex should be resected
- c. The tooth should be crowned with an artificial crown

- d. The tooth should be extracted
- e. The root canal should be refilled

106. Parents of a 2-year-old girl complain about fistulas with purulent discharge in the region of the upper frontal teeth. Objectively: crowns of the 51, 52, 61, 62 teeth are significantly decayed, probing of root canal orifices is slightly painful, it causes significant haemorrhage. Percussion is painless. Mucous membrane of the alveolar process is pastose and cyanotic, there are cicatrices and fistulas in this region. What is the most likely diagnosis?

- a. Chronic granulomatous periodontitis
- b. Chronic granulating periodontitis
- c. Exacerbation of chronic granulomatous periodontitis
- d. Exacerbation of chronic fibrous periodontitis
- e. Exacerbation of chronic granulating periodontitis**

107. A 13,5 year old girl complains of gingival painfulness and haemorrhage during tooth brushing and eating, halitosis. She has been ill with angina for a week. Objectively: mucous membrane of gums in the area of frontal teeth of her upper and lower jaws is edematic, hyperemic. Apices of gingival papillae are necrotic, they also bleed when touched. There is a thick layer of soft tooth plaque. What is the causative agent of this disease?

- a. Herpes virus
- b. Staphylococci
- c. Yeast fungi
- d. Anaerobic microflora**
- e. Streptococci

108. A 1,8 year old boy was under treatment in the infectious disease department. He was given ampicillin. On the 6th day of treatment there appeared white deposits in form of caseous films that were revealed on the hyperemic mucous membrane in the area of gingival torus, cheeks and on the tongue. The films can be removed leaving hyperemic surface underneath them. General condition is satisfactory. Body temperature is 36,7°C. What is the provisional diagnosis?

- a. Acute candidous stomatitis**
- b. Chronic candidous stomatitis
- c. Mild case of leukoplakia
- d. Acute herpetic stomatitis
- e. Drug-induced stomatitis

109. A girl is 18 months old. Vestibular surfaces of the 52, 51, 61, 62 teeth have wide carious cavities within enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 is painless. What is the treatment of choice?

- a. Filling with phosphate cement
- b. Silver impregnation**
- c. Remineralizing therapy
- d. Filling with amalgam
- e. Fluorine laquer coating

110. Examination of a 9 year old patient revealed a milky spot on the vestibular surface of the 11 tooth close to the cutting edge. Probing and temperature stimuli cause no pain reaction. The child was diagnosed with local enamel hypoplasia of the 11 tooth. What treatment should be administered?

- a. Spot removal
- b. Prophylactic hygiene of oral cavity
- c. A course of remineralizing therapy**
- d. Hermetization of the affected part
- e. Cosmetic filling

111. Parents of a 6-year-old child applied to a pedodontist for preventive examination of their child. The oral cavity is sanitized. According to the parents, the child has recently cut the 36 and the 46 tooth. What method of caries prevention should be applied within 1,5-2 years after cutting of the mentioned teeth?

- a. Remodentum solution applications
- b. Gargling with sodium fluoride
- c. Fissure silvering
- d. Coating the teeth with fluorine lacquer Ftorlak

e. Fissure hermetization

112. A 12-year-old child complains about bleeding and pain in the 46 tooth during eating. He has a history of acute pain some time before. Objectively: there is a deep carious cavity (Blacks class II) communicating with the dental cavity, partially filled with overgrown pulp. Pulp tissue is bleeding, painful on touch. There is soft white dental deposit. What is the most likely diagnosis?

- a. Chronic simple pulpitis
- b. Chronic papillitis

c. Chronic hypertrophic pulpitis

- d. Chronic gangrenous pulpitis
- e. Chronic granulating periodontitis

113. Examination of a 6-year-old girl revealed a deep carious cavity in the 85 tooth. Percussion and probing are painless. After removal of the softened dentine, communication with the tooth cavity showed up. Deep probing is painless. X-ray picture of the 85 tooth shows the focus of destruction of bone tissue in the region of bifurcation; cortical plate of the 35 has no pathological changes. It is most expedient to use the following material for the root filling:

- a. Calcium-containing paste

b. Zinc oxide eugenol cement

- c. Glass-ionomer cement
- d. Resorcin-formalin paste
- e. Phosphate cement

114. A 4,5-year-old child presents with eruptions on skin and in the mouth which appeared on the previous day. Objectively: the child is in medium severe condition, body temperature is 38,3°C. Scalp, trunk skin and extremities are covered with multiple vesicles with transparent content. Mucous membrane of cheeks, tongue, hard and soft palate exhibits roundish erosion covered with fibrinous film. Gums remain unchanged. Submandibular lymph nodes are slightly enlarged. What diagnosis can be assumed?

- a. Acute herpetic stomatitis
- b. Measles-induced stomatitis
- c. Scarlet fever-induced stomatitis

d. Chicken pox-induced stomatitis

- e. Exudative erythema multiforme

115. A 12-year-old child complains about bleeding from the tooth socket during eating and tooth brushing. The tooth has hurt him before. Objectively: the 36 tooth has a deep cavity communicating with the tooth cavity and filled with red excrescences. Probing causes pain and slight haemorrhage; percussion is painless, thermal stimuli cause mild pain. What is your provisional diagnosis?

- a. Chronic granulating pulpitis
- b. Gingival polyp
- c. Chronic simple pulpitis

d. Chronic hypertrophic pulpitis

- e. Chronic papillitis

116. A 13-year-old patient complains about gingival haemorrhage during tooth brushing. Objectively: gums around all the teeth are hyperemic and edematic, PMA index (papillary marginal alveolar index) is 46%, Greene-Vermillion hygiene index is 2,5. Provisional diagnosis: exacerbation of chronic generalized catarrhal gingivitis. This patient should be recommended to use a toothpaste with the following active component:

- a. Microelement complex

b. Chlorhexidine

- c. Monofluorophosphate

d. Calcium glycerophosphate

e. Vitamins A, D, E

117. A 10-year-old child undergoes sanitation of the oral cavity. The girl was found to have chalky spots on the vestibular surfaces in the precervical region of the 21 and 12 teeth. Enamel surface is dull, smooth. Pain reaction to the temperature stimuli is absent. What additional method of examination is expected to confirm the diagnosis?

a. Electroodontodiagnostics

b. Ultraviolet stomatoscopy

c. Orthopantomography

d. Intraoral roentgenography

e. Vital staining

118. A 9-year-old child complains about pain caused by sweet and sour food in an upper tooth on the left. Objectively: the 26 tooth has a carious cavity on the masticatory surface within the enamel limits. What is the optimal material to fill the 26 tooth?

a. Silicophosphate cement

b. Glass ionomer

c. Composite

d. Silicate cement

e. Zinc phosphate cement

119. Mother of a 3-year-old child complains about white spots on the upper anterior teeth of her child. Objectively: the vestibular surface of the 51 and 61 teeth exhibits a defect within the enamel. Probing is painless. What is the optimal method of treatment?

a. Impregnation with silver nitrate solution

b. Remodentum application

c. Electrophoresis of sodium fluoride solution

d. Preparation and filling

e. Treatment with fluorine lacquer

120. A 2-month-old child is anxious, sleeps badly, refuses food, has subfebrile body temperature. Objectively: hyperaemic mucous membrane of the child's tongue, lips, cheeks and palate has a caseous coating that can be easily removed with a tampon. Regional lymph nodes are slightly enlarged and painful on palpation. What disease are these symptoms typical for?

a. Diphtheria

b. Measles-associated stomatitis

c. Chronic atrophic candidous stomatitis

d. Acute herpetic stomatitis

e. Acute pseudomembranous candidous stomatitis

121. Stomatological examination of a child revealed abnormal form of the central incisors: they are barrel-shaped, there is a semilunar groove on the cutting edge. It is known from the anamnesis that the child's mother had syphilis during pregnancy. Besides the dental abnormality the child presents also with deafness and parenchymatous keratitis. This abnormality of tooth development is called:

a. Hutchinsons teeth

b. Wedge-shaped defect

c. Erosion of hard tissues

d. Fluorosis (destructive form)

e. Pfluger teeth

122. An 8 year old child complains about pain in the 21 tooth that is getting worse during cutting. A month ago a part of tooth crown broke off as a result of a fall. The child didnt consult a dentist. Objectively: in the area of medial angle of the 21 tooth there is a crown defect that makes up 1/3 of the crowns height. Tooth cavity is open, probing and thermal stimulus cause no pain. Percussion is acutely painful. Gum around the 21 tooth is edematic and hyperemic. What is the provisional diagnosis?

a. Acute condition of chronic pulpitis

- b. Acute purulent periodontitis
- c. Pulpitis complicated by periodontitis

d. Acute condition of chronic periodontitis

- e. Acute serous periodontitis

123. A 7-year-old child presents with deterioration of general health status, body temperature rise up to 38,0°C. Objectively: buccal mucosa is covered with white maculae of a pinhead size, protruding above the level of the mucosa. There are pink maculae on the palate. What is the most likely diagnosis?

- a. Chicken pox
- b. Diphthera
- c. Infectious mononucleosis

d. Measles

- e. Scarlet fever

124. A 10,5-year-old child complains about painful skin rash on his lips. Objectively: red border is edematic and hyperemic, covered with cracks and multiple bloody crusts. There are small vesicles with serous contents on the upper lip skin that merge together in certain areas. Maceration and madescence of skin is also present, especially in the mouth corners. What is the most likely diagnosis?

- a. Actinic cheilitis
- b. Exfoliative cheilitis
- c. Meteorological cheilitis
- d. Atopic cheilitis

e. Eczematous cheilitis

125. A 16-year-old girl consulted a dentist about a cosmetic defect on her front teeth, namely some dark spots and dentin defects. The spots were detected immediately after teeth eruption, the defects developed with the lapse of time. The patient was diagnosed with erosive form of dental fluorosis of the 16, 11, 12, 22, 26, 31, 32, 36, 41, 42, 46 teeth. Select a method of treatment:

- a. Surgical treatment
- b. Regular surveillance
- c. Remineralization
- d. Prosthetics

e. Restoration

126. A 9-year-old child complains about dull pain that is getting worse while pressing the tooth. The tooth was treated for pulpitis one month ago. Objectively: the 36 tooth is filled. Percussion causes acute pain. Mucous membrane is hyperemic and edematic. What is the most likely diagnosis?

- a. Exacerbation of chronic periodontitis

b. Acute serous periodontitis

- c. Acute diffuse pulpitis
- d. Exacerbation of chronic pulpitis
- e. Acute suppurative pulpitis

127. X-ray examination of the 46 tooth in a 7-year-old child reveals the following: the root walls are parallel, their thickness gradually decreases, they have pointed ends. The root canal converges towards the tooth cavity, and diverges at the developing apical hole. Periodontal gap is of the same width along the entire length of the root. At the root apex it merges with the growth zone. Specify the stage of root development:

- a. Continuing periodontium development
- b. Complete root and periodontium development
- c. Continuing root development
- d. Open apex

e. Continuing root apex development

128. A 2 year old child was brought to a dentist to consult about rash and painfulness during eating that appeared yesterday. Objectively: body temperature is 37,5°C, skin is clean, submaxillary lymph

nodes are painful. Examination of oral cavity revealed on the mucous membrane of lips and tongue roundish painful erosions 1-3 mm in diameter covered with whitish deposit. The gum on both upper and lower jaws is hyperemic, edematic, bleed when touched. What is the most probable diagnosis?

- a. Multiform exudative erythema
- b. Recurrent herpetic stomatitis
- c. Stevens-Johnson syndrome
- d. Recurrent aphthous stomatitis

e. Acute herpetic stomatitis

129. A 5-year-old child complains about spontaneous pain in an upper jaw tooth on the right that is getting worse at night and during eating cold food. Objectively: the 65 tooth has a deep cavity communicating with the tooth cavity. Probing is painful, percussion is painless. Cold water causes long-standing pain. What is your provisional diagnosis?

- a. Exacerbation of chronic periodontitis
- b. Acute periodontitis

c. Exacerbation of chronic pulpitis

- d. Acute serous pulpitis
- e. Acute purulent pulpitis

130. An 11 year old girl complains about bleeding of a tooth on her lower jaw during eating and tooth brushing. This tooth hurt her before but she didnt consult a dentist. Examination of the 46 tooth revealed a deep cavity communicating with tooth cavity and filled with red growth tissue. Probing causes a slight haemorrhage and pain, percussion is painless, cold stimulus cause mild pain. What is the most probable diagnosis?

- a. Chronic granulating periodontitis
- b. Gingival polyp
- c. Chronic simple pulpitis

d. Chronic hypertrophic pulpitis

- e. Chronic papillitis

131. A 13-year-old boy complains about pain in the upper jaw caused by warm and hot stimuli, offensive breath when he sucks his tooth. Objectively: the 24 tooth is changed in color, there is a deep carious cavity communicating with the tooth cavity. Deep probing is painful. Percussion causes no pain. What is the most likely diagnosis?

- a. Chronic periodontitis
- b. Exacerbation of chronic pulpitis
- c. Exacerbation of chronic periodontitis

d. Chronic gangrenous pulpitis

- e. Chronic fibrous pulpitis

132. An 8,5-year-old child is apparently healthy. The child complains about pain in an upper tooth on the left caused by traumatic injury sustained three hours ago. Objectively: the crown part of the 21 tooth is destroyed by 1/2, the pulp is red and significantly exposed, probing causes acute pain and bleeding. Percussion of the 21 tooth is extremely painful. Choose the most efficient treatment method of the 21 tooth:

a. Vital amputation

- b. Devital amputation
- c. Bioassay technique
- d. Devital extirpation
- e. Vital extirpation

133. A 14-year-old child complains about acute spontaneous spasmodic pain in an upper jaw tooth on the right. The pain has been lasting for 3 days, it is throbbing, irradiating to the temple, getting worse at night. Objectively: surface of the 15 tooth exhibits a carious cavity within parapulpal dentine. Dentine is softened, of greyish colour. Probing of the whole cavity floor is painful, percussion of the 15 tooth is painless. What is the most likely diagnosis?

a. Acute purulent pulpitis

- b. Acute focal pulpitis
- c. Exacerbation of chronic periodontitis
- d. Acute periodontitis
- e. Acute diffuse pulpitis

134. A 13 year old child complains about acute spontaneous short-term attack-like pain in the area of the 36 tooth that is getting worse during eating. The pain appeared yesterday. Objectively: there is a deep carious cavity on the masticatory surface of the 36 tooth. Tooth cavity is closed, floor probing is painful in one point. Cold stimulus causes short-term pain. Make a diagnosis:

- a. Acute deep caries
- b. Chronic fibrous pulpitis
- c. Acute condition of chronic pulpitis
- d. Acute localized pulpitis**
- e. Acute diffuse pulpitis

135. A 12-year-old boy complains of severe pain caused by cold food in the 11 tooth. A day before he had a crown break off of the 11 tooth. Examination revealed an oblique fracture of the 11 tooth crown with the opening of the tooth cavity, probing causes acute pain, comparative percussion is painful, there is minor tooth mobility. What treatment should be administered?

- a. Devital amputation
- b. Vital extirpation**
- c. Biologic method
- d. Devital extirpation
- e. Vital amputation

136. A girl is 13 years old. She lives in an area where fluoride concentration in the drinking water is at the rate of 1,6 mg/l. Dental examination revealed some chalk-like spots on the vestibular surfaces of all her teeth. The white coloration is more intense in the centre and less on the periphery. There is light-brown pigmentation in the region of the central incisors along the cutting edge. What is the most likely diagnosis?

- a. Amelogenesis imperfecta
- b. Dental fluorosis**
- c. Systemic enamel hypoplasia
- d. Acute initial caries
- e. Stainton-Capdepon syndrome

137. A 13 year-old girl has presented with gingival haemorrhage and mobility of the front teeth over the last month. Objectively: gingival mucosa around the lower incisors and canines is edematous, hyperemic, bleeds on touch. There is grade I tooth mobility, periodontal pockets are 3 mm deep. Orthopantomogram shows the resorption of interalveolar septa by 1/3 of their height. There is crowding of the lower front teeth. Hygiene index is 4,2. The patient has to consult the following specialist:

- a. Gastroenterologist
- b. Orthodontist**
- c. Endocrinologist
- d. Neuropathologist
- e. Haematologist

138. A 13-year-old girl has been experiencing gingival hemorrhages and frontal teeth mobility throughout the last month. Objectively: gingival mucous membrane in the region of lower incisors and canines is edematous, hyperemic, it bleeds on touch. These teeth present with I degree mobility, periodontal pouches are 3 mm deep. Orthopantomogram shows reduction of bone tissue of interalveolar septa by 1/3 of their height. Frontal teeth of the lower jaw are overcrowded. Hygiene index is 4,2. What local treatment should be provided in the first place?

- a. Orthodontic care
- b. Anti-inflammatory therapy
- c. Professional hygiene**

- d. Physical therapy
- e. Antibacterial therapy

139. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up 2 days ago, the boy has a history of recent angina. Objectively: oral cavity hygiene is unsatisfactory, teeth are covered with soft white deposit. Gums are hyperaemic, gingival papillae are covered with greyish coating. What is the most likely diagnosis?

- a. Hypertrophic gingivitis
- b. Acute catarrhal gingivitis
- c. Ulcero-necrotic gingivitis**
- d. Chronic catarrhal gingivitis
- e. Desquamative gingivitis

140. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up two days ago, the boy had a history of recent angina. Objectively: oral hygiene is unsatisfactory, the teeth are coated with soft dental deposit. Gums are hyperemic, gingival papillae are covered with greyish deposit. Specify the causative agent of this disease:

- a. Fusobacteria, spirochetes**
- b. Herpes viruses
- c. Yeast fungi
- d. Staphylococci
- e. Streptococci

141. A 12-year-old girl complains about swelling, reddening and itching of lips. She has a history of bronchial asthma. Such condition has been observed in the child for 3 years in winter period. Objectively: red border of lips and adjacent skin exhibit a well-defined erythema and edema, small cracks. There are signs of lip lichenification. There are also marks of scratches on the skin of lips, cheeks and forehead in form of abrasions and crusts. Mucous membrane exhibits no pathological changes. What is the most likely diagnosis?

- a. Meteorological cheilitis
- b. Contact allergic cheilitis
- c. Atopic cheilitis**
- d. Exfoliative cheilitis
- e. Microbial cheilitis

142. Parents of a 5-year-old child noted irregular colour of the child's back of tongue and consulted a pedodontist about this. Objectively: the oral cavity is sanitized, DF index = 4, dorsal and lateral surfaces of tongue have area of desquamating epithelium bordering upon areas of hypertrophy and increased cornification of filiform papillae. The child has a history of being allergic to some foodstuffs. What is the clinical diagnosis?

- a. Desquamative glossitis**
- b. Candidous glossitis
- c. Acute catarrhal glossitis
- d. Herpetic tongue lesion
- e. Tuberculous glossitis

143. During the planned oral cavity sanitation an 11,5-year-old girl complained about periodic spontaneous chilalgia during food intake. Objectively: mucous membrane of lips is hyperemic, edematous and dry. During talking one can observe small drops of mucous secretion. Make the provisionaldiagnosis:

- a. Eczematous cheilitis
- b. Angular cheilitis
- c. Cheilitis glandularis**
- d. Contact allergic cheilitis
- e. Cheilitis exfoliativa

144. Examination of an 11 year old girl revealed: caries intensity (sum of carious, filled and extracted

teeth) = 3, Green-Vermillions hygienic index - 1,6, papillary-marginally-alveolar index = 20%. The girl catches a cold once or twice a year. Average caries intensity index for this age group in this region is 4. How many times a year should the girl see a dentist?

- a. 1-2
- b. 2-3
- c. 3-4
- d. 1**
- e. 2

145. A 12-year-old boy complains about permanent intense throbbing toothache that is getting worse when biting down on food. Objectively: the patient's face is asymmetric because of a collateral edema of soft tissues, submandibular lymph nodes are enlarged and painful on palpation. The 26 tooth has a deep cavity not communicating with the tooth cavity. Thermal test is positive, probing is painless, percussion causes acute pain, the tooth is mobile. X-ray picture of the 26 tooth shows no changes in the periodontium. What is the most likely diagnosis?

- a. Pulpitis complicated by periodontitis
- b. Acute purulent periodontitis**
- c. Exacerbation of chronic periodontitis
- d. Acute serous periodontitis
- e. Acute purulent pulpitis

146. A 12-year-old boy repeatedly visits a dentist to finish treatment of the 36 tooth for the exacerbation of chronic periodontitis. The complaints are absent. Objectively: occlusive dressing on the 36 tooth is preserved, tooth percussion is painless, mucous membrane of the 36 has no pathological changes, is painless on palpation. What material should be used for root canal filling in this case?

- a. Calcium-containing paste
- b. Phosphate cement
- c. Zinc-eugenol paste
- d. Resorcinol-formalin paste
- e. Sealer with a gutta-percha point**

147. A 6-year-old girl was brought to the dentist for completing the treatment of the 75 tooth for chronic granulating periodontitis. The patient has no complaints. Objectively: occlusive dressing on the 75 tooth remains intact, percussion is painless, mucous membrane in the region of the 75 tooth exhibits no pathological changes, is painless on palpation. What material is the most appropriate for the root canal filling in this case?

- a. Iodoform paste
- b. Zinc oxide eugenol paste**
- c. Calcium-containing paste
- d. Sealer with gutta-percha point
- e. Glass ionomer cement

148. A 4-year-old child presents with headache, nausea, pain when swallowing. Body temperature is 39°C. Examination of the oral cavity revealed extremely hyperaemic mucous membrane and tonsils. On the first day of disease the child's tongue was furred with greyish coating, on the second day the tongue was found to be self-purified. On the third day the tongue was smooth, of crimson colour, with hyperaemic fungiform papillae. What is presumptive diagnosis?

- a. Herpangina
- b. Scarlet fever**
- c. Measles
- d. Varicella
- e. Diphtheria

149. After examination a 5-year-old child was diagnosed with acute total pulpitis of the 74 tooth. What treatment will be most efficient in this case?

- a. Biological method

- b. Tooth extraction
- c. Vital amputation
- d. Non-vital amputation

e. Pulp extirpation

150. A 3 year old child has a cavity in the 84 tooth. Objectively: there is a carious cavity on the masticatory surface of the tooth within mantle dentin. Dentin is softened, probing of cavity walls is painful, percussion is painless. Make a diagnosis:

a. Chronic deep caries

b. Acute median caries

c. Acute superficial caries

d. Chronic superficial caries

e. Acute deep caries

151. Parents of a 5-month-old baby complain of food refusal, ulcers on the palate. The infant was born prematurely, is now artificially fed. Objectively: at the junction of hard and soft palate there is an oval well-defined ulcer, covered with yellow-gray film and limited by a hyperemic swelling, protruding above the surface of oral mucosa. Which group of drugs should be administered for the aphtha epithelization?

a. Antiviral drugs

b. Antiseptics

c. Antibiotics

d. Keratoplastic agents

e. Antimycotic drugs

152. Examination of a 9-year-old child revealed chalky spots in the cervical part of the 12, 11, 21, 22 teeth. The spots appeared two weeks ago. Their surface is dull in appearance and can be stained with methylene blue. The affected teeth are nonresponsive to cold stimulus. What is the most likely diagnosis?

a. Systemic hypoplasia

b. Fluorosis

c. White spot stage of caries

d. Surface caries

e. Focal hypoplasia

153. Mother of a 6,5-year-old child consulted a dentist about checking fissure hermetization of the 16, 26, 36, 46 teeth. They were treated six month ago. Sealant in the 36, 46 teeth is preserved, but sealant in the 16 and 26 teeth is absent. What is the tactics of choice?

a. Electrophoresis with 1% sodium fluoride solution

b. To repeat fissure hermetization

c. Applications with remodentum solution

d. Preventive filling

e. Coating the teeth with fluorine lacquer Ftorlak

154. A 12-year-old boy complains about short-term pain in a lower jaw tooth on the right caused by cold stimuli. Objectively: the 46 tooth has a carious cavity on the masticatory surface within the circumpulpar dentine which has no intercommunication with the dental cavity. The cavity floor and walls are coated with light softened dentine. Cold test causes short-standing pain. What is the most likely diagnosis?

a. Chronic fibrous pulpitis

b. Acute deep caries

c. Acute localized pulpitis

d. Acute median caries

e. Acute diffuse pulpitis

155. A 10-year-old child complains of sore throat, cough, fever (up to 38°C). These presentations turned up 2 days ago. Objectively: acute catarrhal stomatitis is present. Tonsils are swollen, hyperemic, covered with yellow-gray friable film which can be easily removed. Submandibular and

cervical lymph nodes are significantly enlarged, painful on palpation. Laboratory analysis revealed leuko- and monocytosis. What is the most likely diagnosis?

a. Measles

b. Infectious mononucleosis

c. Scarlet fever

d. Diphtheria

e. Rubella

156. A 12-year-old child complains about sore throat, headache, body temperature rise up to 38,5°C, rhinitis, cough in summer period. Objectively: mucous membrane of oral cavity is hyperemic, edematic. There are 10-15 erosions up to 0,5 mm large on the palate and palatine arches, that arent covered with deposit and have red floor. Regional lymph nodes are enlarged and painful on palpation. What is the most likely diagnosis?

a. Herpetic angina

b. Erythema multiforme

c. Infectious mononucleosis

d. Chronic recurrent aphthous stomatitis

e. Acute herpetic stomatitis

157. An 8-year-old boy complains of having toothache during eating. Objectively: approximal surface of the 55 tooth has a deep carious cavity communicating with the tooth cavity. Probing causes acute pain, there is bleeding, percussion is painless. What is the most likely diagnosis?

a. Chronic gangrenous pulpitis

b. Chronic hypertrophic pulpitis

c. Chronic fibrous pulpitis

d. Chronic granulating periodontitis

e. Chronic fibrous periodontitis

158. A 12-year-old patient complains about gingival haemorrhage and tooth mobility. He has been suffering from this since the age of 4. Objectively: gums around all the teeth are hyperemic and edematic, bleed during instrumental examination. Tooth roots are exposed by $\frac{1}{3}$ and covered with whitish deposit. II degree tooth mobility is present. Dentogingival pouches are 4-5 mm deep. External examination revealed dryness and thickening of superficial skin layer on the hands and feet, there are also some cracks. What is the most likely diagnosis?

a. Papillon-Lefevre syndrome

b. Generalized periodontitis

c. Localized periodontitis

d. Letterer-Siwe disease

e. Hand-Schuller-Christian disease

159. A 12-year-old boy complains of fever up to 38°C, weakness, headache, pain in the mouth, presence of vesicles and ulcers. The acute condition developed three days ago. The patient has a history of recent pneumonia treated with antibiotics. Objectively: oral mucosa is hyperemic and edematous. The mucosa of lips, tongue and cheeks has large erosions covered with fibrinous pellicle. The lips are covered with thick brown crusts. The back of the hand has papules of double-contour colour. Which of the listed agents should be primarily used in the topical treatment?

a. Antiinflammatory

b. Antimicrobial

c. Antifungal

d. Painkillers

e. Antiviral

160. An 11-year-old girl complains about gingival haemorrhage during tooth brushing and eating. She has been suffering from this for a year. Gum of both upper and lower jaws is edematic and congestively hyperemic. Hygienic state of oral cavity is unsatisfactory. Bite is edge-to-edge. Roentgenological examination of periodontium revealed no pathological changes. What is the provisional diagnosis?

- a. Acute catarrhal gingivitis
- b. Localized periodontitis
- c. Hypertrophic gingivitis
- d. Chronic catarrhal gingivitis**
- e. Generalized periodontitis

161. Preventive examination of a 4,5-year-old child revealed some hidden cavities on the contact surfaces of the 54 and 55 teeth. After removal of the overhanging edges of the enamel the softened dentin could be easily removed with an excavator within the mantle dentin. Select the optimal material for a permanent filling:

- a. Silicophosphate cement
- b. Polycarboxylate cement
- c. Composite material
- d. Silicate cement
- e. Compomer material**

162. A 14-year-old child complains of bleeding and pain during eating in the lower right molar. Objectively: the medial contact and masticatory surfaces of the 46 tooth exhibit a large carious cavity filled with red tissue. Superficial probing causes pain and moderate bleeding. Deeper probing causes acute pain. Percussion is painless. What is your provisional diagnosis:

- a. Chronic papillitis
- b. Chronic granulating periodontitis
- c. Chronic fibrous pulpitis
- d. Chronic gangrenous pulpitis
- e. Chronic hypertrophic pulpitis**

163. A 10-year-old girl complains of minor pain in a lower jaw tooth occurring during having cold food. Objectively: the masticatory surface of the 36 tooth exhibits a carious cavity with a narrow inlet located within the mantle dentin. Probing causes pain along the enamel-dentin border. Make a diagnosis:

- a. Superficial caries
- b. Chronic median caries
- c. Acute deep caries
- d. Chronic deep caries
- e. Acute median caries**

164. A 13 year old child complained about painfulness of his lower lip. He has been suffering for two months. Objectively: mucous membrane of lower lip is hyperemic, excretory ducts of minor salivary glands are dilated, "dew" symptom is present. What is the most probable diagnosis?

- a. Microbial cheilitis
- b. Meteorological cheilitis
- c. Cheilitis glandularis**
- d. Cheilitis exfoliativa
- e. Contact allergic cheilitis

165. A virtually healthy 9 year old child complains about crown fracture and pain in the right superior frontal tooth. Objectively: crown part of the 11 tooth is broken by $\frac{1}{3}$, pulp is pointwise dehiscent, it is red, acutely painful and bleeds during probing. Percussion is slightly painful. The child got a trauma several hours ago. Choose an optimal treatment method:

- a. Vital extirpation
- b. Devital extirpation
- c. Vital amputation
- d. Devital amputation
- e. Biological method**

166. An 8 year old child has a carious cavity on the masticatory surface of the 16 tooth within circumpulpal dentin. Probing of cavity floor is painful, dentin is softened, slightly pigmented. Cold stimulus causes short-term pain. Choose a dental treatment paste:

- a. Paraformaldehyde
- b. Resorcin-formaline
- c. Hydroxycalcium-containing**
- d. Arsenious
- e. Thymol

167. A 5-year-old boy presents with body temperature rise up to 39,2°C, sore throat, headache, nausea. Objectively: mucous membrane of soft palate and palatine arches is evidently hyperemic, there is distinct border between it and surrounding tissues. The child's tongue is dry, edematous, its lateral surfaces are red and free of fur, fungiform papillae are evidently enlarged. Face skin is covered with spotty rash, hyperemic except for pale nasolabial triangle. Submandibular lymph nodes are painful on palpation. What is the causative agent of this disease?

- a. Coxsackie virus
- b. Bordet-Gengou bacillus
- c. Löffler's bacillus
- d. Haemolytic streptococcus**
- e. Herpes virus

168. A 14-year-old child complains about a cosmetic defect in the frontal teeth region. Objectively: enamel of the 11, 12, 21, 22, 31, 32, 41, 42 teeth is thin in the region of cutting edge, there is a sulcate enamel pit 1,5 mm wide which encircles the tooth and is parallel to the cutting edge. The cusps of the 16, 26, 36, 46 teeth are underdeveloped and have conical form. What is the most likely diagnosis?

- a. Local hypoplasia
- b. Stainton-Capdepont dysplasia
- c. Dentinogenesis imperfecta
- d. Enamel dysplasia
- e. Systemic hypoplasia**

169. Examination of an 11-year-old boy revealed thickened, somewhat cyanotic, dense gingival margin overlapping the crowns of all teeth by ½ of their height. Fedorov-Volodkina oral hygiene index is 2,6, PMA index is 20%. X-ray picture shows no pathological changes of periodontium. The child has a 2-year history of neuropsychiatric treatment for epilepsy. Make a provisional diagnosis:

- a. Generalized periodontitis
- b. Chronic hypertrophic gingivitis**
- c. Localized periodontitis
- d. Chronic catarrhal gingivitis
- e. Acute catarrhal gingivitis

170. A 10-year-old child complains about acute spontaneous spasmodic pain in an upper jaw tooth on the left. Objectively: distal contact surface of the 26 tooth exhibits a carious cavity filled with light softened dentine and localized within parapulpal dentine. Probing of the cavity floor causes acute pain, percussion is painless. Cold stimuli cause a long-standing pain attack. The child has a history of lidocaine allergy. Choose an optimal paste to be used during the first visit:

- a. Zinc oxide eugenol
- b. Paraformaldehyde**
- c. Thymol
- d. Iodoform
- e. Formocresol

171. Mother of a 3-year-old child consulted a dentist about discolouration and abrasion of the child's teeth. The child has a history of enamel spalling shortly after the tooth eruption. Objectively: the crowns of all the teeth are worn by nearly a half and have yellow-gray colour. Make a provisional diagnosis:

- a. Stainton-Capdepont syndrome**
- b. Dentinogenesis imperfecta
- c. Systemic enamel hypoplasia

- d. Osteogenesis imperfecta
- e. Amelogenesis imperfecta

172. A 14-year-old boy complains of rash on the lips, pain while talking and eating. These presentations showed up three days ago. Similar rash has appeared 1-4 times a year for three years. Objectively: general condition is satisfactory, the body temperature is of 36,90C. On the vermilion border of the lower lip and the skin below there are multiple small grouped vesicles with serous content, and crusts. What is the etiology of the disease?

- a. Coxsackie virus
- b. Herpes zoster Virus
- c. Staphylococci
- d. Herpes simplex virus
- e. Streptococci

173. A 4-year-old girl complains of spontaneous acute toothache in the upper jaw on the right increasing during eating. The pain arose two days ago. Objectively: there is a deep carious cavity filled with softened dentin in the 55 tooth. There is no intercommunication with the tooth cavity. Probing of the cavity floor is slightly painful. Percussion is painful. What is the presumptive diagnosis?

- a. Exacerbation of chronic gangrenous pulpitis
- b. Acute purulent periodontitis
- c. Acute purulent pulpitis
- d. Acute generalized (serous) pulpitis

e. Acute pulpitis complicated by periodontitis

174. Parents of a 6-year-old child consulted a dentist about oral cavity sanitation. Objectively: the 85 tooth has a carious cavity on the distal surface within the mantle dentine. Floor and walls are dense and pigmented. Probing is painless. Cold stimuli and percussion cause no pain. What is your provisional diagnosis?

- a. Chronic fibrous pulpitis
- b. Chronic median caries
- c. Chronic deep caries
- d. Acute median caries
- e. Chronic periodontitis

175. A 13-year-old child complains of a short-term pain caused by cold stimuli in the upper left molar tooth. Occlusal surface of the 27 tooth has a cavity with a small hole. After the overhanging enamel had been removed, the soft light dentin could be easily removed with an excavator within mantle dentin. What is the most likely diagnosis?

- a. Acute surface caries
- b. Chronic surface caries
- c. Chronic median caries
- d. Acute deep caries

e. Acute median caries

176. Parents of a 3-year-old child report that the child has constant pain in the upper front teeth. Objectively: the coronal part of the 61 tooth is gray and decayed. Probing of the root canal orifice is painful and accompanied by bleeding. The tooth percussion provokes acute pain. Mucosa is hyperemic, edematic and painful. Palpation in the region of the 61, 62 teeth reveals a fistula. What is your provisional diagnosis?

- a. Chronic granulating periodontitis
- b. Exacerbation of chronic pulpitis
- c. Acute purulent periodontitis
- d. Acute diffuse pulpitis

e. Exacerbation of chronic periodontitis

177. A 3-year-old child complains of a cavity in a lower jaw tooth. Objectively: masticatory surface of the 84 tooth exhibits a carious cavity within mantle dentine. Dentine is softened, probing of the cavity walls is painful, percussion is painless. What is the most likely diagnosis?

a. Acute median caries

- b. Chronic fibrous pulpitis
- c. Chronic deep caries
- d. Acute deep caries
- e. Chronic superficial caries

178. A 5-year-old child presents with chronic deep caries within the contact and masticatory surfaces of the 75, 74, 84, 85 teeth. Which filling material should be used?

a. Infantid

b. Silver amalgam

- c. Evicrol
- d. Silidont
- e. Silicin

179. According to the mother, a 5-year-old child complains about pain during swallowing, weakness, body temperature rise up to 39,5°C, swelling of submental lymph nodes. Objectively: the child's condition is grave, body temperature is 38,8°C. Mucous membrane of the oral cavity is markedly hyperaemic and edematous with haemorrhages and ulcerations. Pharynx is markedly hyperemic, lacunae are enlarged and have necrosis areas. Regional, cervical, occipital lymph nodes are painful, enlarged and dense. What is the most likely diagnosis?

a. Lacunar tonsillitis

b. Infectious mononucleosis

- c. Necrotizing ulcerative gingivostomatitis
- d. Acute herpetic stomatitis
- e. Herpetic angina

180. Examination of an 8-year-old child revealed irregular white spots on the vestibular surface in the precervical region of the 11 and 12 teeth. The spots are smooth and stainable. What is the most likely diagnosis?

a. Focal demineralization

- b. Superficial caries
- c. Fournier's teeth
- d. Enamel erosion
- e. Enamel hypoplasia

181. Parents of a 1,5-month-old child complain of whitish depositions on the child's buccal and labial mucosa. Objectively: labial and buccal mucosa is hyperemic and covered with caseous deposition that can be easily removed. Specify the causative agent of this disease:

a. Candida fungi

- b. Fusiform bacillus
- c. Diplococci
- d. Loeffler's bacillus
- e. Vincent's spirochaetes

182. A 7-year-old boy complains of fever up to 38°C, headache, sore throat. Objectively: slightly hyperemic soft palate mucosa, anterior palatine arches and tonsils exhibit erosions. Submandibular lymph nodes are slightly enlarged, painless. What is the causative agent of this disease?

- a. Epstein-Barr virus
- b. Herpes simplex

c. Coxsackie virus

- d. Loeffler's Bacillus
- e. Bordet-Gengou bacillus

183. Parents of a 2-month-old baby complain about caseous films on the mucous membrane of his cheeks and tongue. After examination the child has been diagnosed with acute oral candidiasis of moderate severity. Topical treatment should be started with the administration of the following agents:

a. Antifungal

- b. Antiseptic
- c. Antiviral
- d. Enzymatic
- e. Keratoplastic

184. A girl is 1,2 year old. Vestibular surface of her 52, 51, 61, 62 teeth has large carious cavities within the enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 teeth is painless. What treatment is to be administered?

- a. Filling with phosphoric acid cement
- b. Coating with fluorine lacquer
- c. Amalgam filling
- d. Silver impregnation**
- e. Remineralizing therapy

185. Parents of a 12-year-old child complain of white patches on the upper front teeth, which appeared six months ago. Objectively: chalk-like patches on the vestibular surfaces in the precervical region of the 13, 12, 11, 21, 22, 23 teeth. Their enamel is dull, pliable and rough on probing. There is a history of short-term pain caused by chemical stimuli. What is your provisional diagnosis?

- a. Acute superficial caries
- b. Chronic initial caries
- c. Acute initial caries**
- d. Systemic enamel hypoplasia
- e. Dental fluorosis

186. A 7-year-old child complains about spontaneous pain in the upper right molars. Both medial contact and masticatory surfaces of the 55 tooth have a carious cavity filled with clear softened dentin and localized within parapulpal dentin. Floor probing causes acute pain, tooth percussion is slightly painful. Mucous membrane of the alveolar process in the root projection of the 55 is intact, examination of this region revealed no roentgenological changes. What is the most likely diagnosis?

- a. Chronic fibrous pulpitis
- b. Exacerbation of chronic periodontitis
- c. Deep acute caries
- d. Acute diffuse pulpitis**
- e. Chronic gangrenous pulpitis

187. A 3-month-old child has been in disease state for two days. The child is anxious, refuses food, has normal body temperature. Objectively: mucous membrane of oral cavity is edematous and hyperemic. There is white caseous coating on the back of tongue and buccal mucosa. After the coating removal one can see extremely hyperemic surface with petechial haemorrhages. What is the most likely diagnosis?

- a. Herpetic angina
- b. Lichen ruber planus
- c. Mild leukoplakia
- d. Acute herpetic stomatitis
- e. Acute candidal stomatitis**

188. A 13 year old child has been suffering from pain in the left inferior molar induced by cold stimuli for several months. Objectively: on the masticatory surface of the 37 tooth there is a carious cavity with overhanging enamel edges filled with circum-pulpal dentin. The cavity is filled with light softened dentin. Probing of the cavity floor is somewhat painful. Cold stimuli cause short-term pain. Make a provisional diagnosis:

- a. Chronic fibrous pulpitis
- b. Chronic median caries
- c. Chronic deep caries
- d. Acute deep caries**
- e. Acute median caries

189. An 11-year-old child complains of a carious cavity in the left upper molar, which appeared six

months ago. Objectively: the medial contact surface of the 26 tooth exhibits a carious cavity located within the mantle dentin. The cavity floor and walls are dense, pigmented, with no pain upon probing. The response to thermal stimuli is absent. Percussion of the tooth causes no pain. Make a provisional diagnosis:

- a. Chronic median caries
- b. Acute median caries
- c. Chronic periodontitis
- d. Acute deep caries
- e. Chronic deep caries

190. Examination of a 5-year-old child revealed a carious cavity communicating with the tooth cavity on the approximal surface of the 54 tooth. Halitosis is present. Superficial probing of the cavity is painless, deeper probing causes pain reaction. Percussion is painless. Interviewing revealed that hot food caused pain. Select the medication for antiseptic treatment of root canals:

- a. Sodium hypochlorite
- b. Furacilin solution
- c. Formalin solution
- d. Alcohol
- e. Aethonium solution

191. A 10-year-old child complains of gingival pain and haemorrhage which appeared two days ago after a cold. Objectively: the gingiva is edematous, hyperaemic, bleeds easily, painful on palpation. The tips of gingival papillae are dome-shaped. What is the most likely diagnosis?

- a. Generalized periodontitis
- b. Acute catarrhal gingivitis
- c. Hypertrophic gingivitis
- d. Chronic catarrhal gingivitis
- e. Ulcerative gingivitis

192. A 14-year-old teen complains of gingival haemorrhages during tooth brushing. Objectively: gingival mucosa is hyperemic, pastous, bleeds when touched. Schiller-Pisarev test is positive. PMA index - 70%. Hygienic index - 3,0. X-ray picture of the frontal area depicts no evident changes. What is the most likely ?

- a. Acute catarrhal gingivitis
- b. Chronic periodontitis
- c. Chronic catarrhal gingivitis
- d. Chronic hypertrophic gingivitis
- e. Exacerbation of chronic periodontitis

193. Preventive examination of a 4-year-old child revealed a deep carious cavity on the masticatory surface of the 54 tooth. The cavity has no intercommunication with the tooth cavity and is filled with dense dentine. Probing, percussion, thermal test of the 54 tooth provoke no pain. The decay/filled index is 1, hygiene index is 1,9. What filling material is the most suitable for permanent filling of the 54 tooth?

- a. Photopolymer composite
- b. Glass-ionomer cement
- c. Silicophosphate cement
- d. Silicate cement
- e. Chemical composite

194. An 8 year old child complains about permanent dull pain in the 46 tooth that is getting stronger during cutting. The pain appeared 1 day ago. Previously there has been pain induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth, tooth cavity is closed, probing and temperature stimuli cause no pain reaction. Percussion is painful, a slight mobility is present. Gum around the 46 tooth is hyperemic, edematous, palpatory painful. X-ray picture shows no changes near the apex of undeveloped roots. What is your provisional diagnosis?

- a. Acute condition of chronic periodontitis

b. Acute serous periodontitis

- c. Acute general serous pulpitis
- d. Acute purulent pulpitis
- e. Acute purulent periodontitis

195. A 13-year-old girl complains about frequent falling out of a filling in the 21 tooth. It is known from the anamnesis that 2 years ago she underwent treatment on account of a dental trauma. Objectively: a transverse defect of $\frac{1}{3}$ of the crown in the 21 tooth. Percussion is painless. Tooth colour is unchanged. X-ray picture shows that root canal is filled by 1 mm from the apex, filling material closely fits the walls of root canal. What stomatological tactics should be chosen?

- a. The root apex should be resected
- b. The root canal should be refilled

c. The defect should be restored with photopolymer

- d. The tooth should be extracted
- e. The tooth should be crowned with an artificial crown

196. Parents of a 2-year-old girl complain about fistulas with purulent discharge in the region of the upper frontal teeth. Objectively: crowns of the 51, 52, 61, 62 teeth are significantly decayed, probing of root canal orifices is slightly painful, it causes significant haemorrhage. Percussion is painless. Mucous membrane of the alveolar process is pastose and cyanotic, there are cicatrices and fistulas in this region. What is the most likely diagnosis?

- a. Chronic granulating periodontitis

b. Exacerbation of chronic granulating periodontitis

- c. Exacerbation of chronic fibrous periodontitis
- d. Exacerbation of chronic granulomatous periodontitis
- e. Chronic granulomatous periodontitis

197. A 13,5 year old girl complains of gingival painfulness and haemorrhage during tooth brushing and eating, halitosis. She has been ill with angina for a week. Objectively: mucous membrane of gums in the area of frontal teeth of her upper and lower jaws is edematic, hyperemic. Apices of gingival papillae are necrotic, they also bleed when touched. There is a thick layer of soft tooth plaque. What is the causative agent of this disease?

- a. Staphylococci
- b. Yeast fungi
- c. Herpes virus
- d. Streptococci

e. Anaerobic microflora

198. Parents of an 8-year-old child complain about a painful formation in the child's oral cavity that obstructs food intake. The same complaints were registered two years ago. Mucous membrane of lateral tongue surface is hyperemic and edematic. There is an oval erosion over 0,7 cm large covered with yellow greyish deposit. Erosion edges are hyperemic and painful on palpation. The child has a history of chronic cholecystocholangitis. What is the most likely diagnosis?

- a. Erythema multiforme
- b. Stevens-Johnson syndrome
- c. Traumatic erosion

d. Chronic recurrent aphthous stomatitis

- e. Behcets syndrome

199. A 12-year-old child complains of body temperature rise up to 39,8°C, weakness, headache and pain in throat getting worse when swallowing. Objectively: mucous membrane of gums is edematic, hyperemic. Tonsils are bright red, hypertrophic, covered with yellow-gray deposit which does not extend beyond the lymphoid tissue and can be easily removed. Submandibular, occipital lymph nodes are significantly enlarged, slightly painful on palpation. Hepatosplenomegaly is present. Identify the causative agent of this disease:

- a. Herpes virus
- b. Loefflers Bacillus

c. Bordet-Gengou bacillus

d. Coxsackie virus

e. Epstein-Barr virus

200. A 5-year-old boy complains of a carious cavity, periodic toothache, gum swelling. Objectively: masticatory surface of the 74 tooth has a deep cavity not communicating with the tooth cavity, cold stimuli, probing and percussion are painless, mucous membrane is pale pink, there is a caicatrix from a fistula. X-ray picture shows an ill-defined focus of bone tissue destruction in the region of the roots bifurcation. What is the most likely diagnosis?

a. Chronic granulomatous periodontitis

b. Chronic granulating periodontitis

c. Chronic fibrous periodontitis

d. Exacerbation of chronic fibrous periodontitis

e. Exacerbation of chronic granulating periodontitis

201. A 13-year-old girl complains of toothache increasing while biting. Objectively: the 36 tooth has a deep carious cavity not communicating with the tooth cavity, the response to thermal stimuli is painless, percussion is sharply painful, mucous membrane is intact. X-ray picture shows no changes. What is the most likely diagnosis?

a. Acute serous periodontitis

b. Acute serous pulpitis

c. Exacerbation of chronic periodontitis

d. Acute purulent pulpitis

e. Acute purulent periodontitis

202. A girl is 18 months old. Vestibular surfaces of the 52, 51, 61, 62 teeth have wide carious cavities within enamel. Probing is slightly painful, percussion of the 52, 51, 61, 62 is painless. What is the treatment of choice?

a. Fluorine laquer coating

b. Filling with phosphate cement

c. Filling with amalgam

d. Remineralizing therapy

e. Silver impregnation

203. A 12-year-old patient complains of gingival haemorrhage, tooth mobility. He has these presentations since the age of 4. Objectively: gingiva around all the teeth is hyperaemic, edematic, bleeds during instrumental examination. The teeth roots are exposed by $\frac{1}{3}$ and covered with whitish plaque. The teeth are mobile. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of the outer layer of skin on the palms, anterior third of the forearms, soles; there are skin cracks. What is the most likely diagnosis?

a. Papillon-Lefevre syndrome

b. Niemann-Pick disease

c. Cyclic neutropenia

d. Letterer-Siwe disease

e. Hand-Schuller-Christian disease

204. Examination of a 9 year old patient revealed a milky spot on the vestibular surface of the 11 tooth close to the cutting edge. Probing and temperature stimuli cause no pain reaction. The child was diagnosed with local enamel hypoplasia of the 11 tooth. What treatment should be administered?

a. A course of remineralizing therapy

b. Spot removal

c. Cosmetic filling

d. Hermetization of the affected part

e. Prophylactic hygiene of oral cavity

205. A 12-year-old child complains about bleeding and pain in the 46 tooth during eating. He has a history of acute pain some time before. Objectively: there is a deep carious cavity (Blacks class II) communicating with the dental cavity, partially filled with overgrown pulp. Pulp tissue is bleeding,

painful on touch. There is soft white dental deposit. What is the most likely diagnosis?

- a. Chronic granulating periodontitis
- b. Chronic hypertrophic pulpitis**
- c. Chronic simple pulpitis
- d. Chronic papillitis
- e. Chronic gangrenous pulpitis

206. Examination of a 6-year-old girl revealed a deep carious cavity in the 85 tooth. Percussion and probing are painless. After removal of the softened dentine, communication with the tooth cavity showed up. Deep probing is painless. X-ray picture of the 85 tooth shows the focus of destruction of bone tissue in the region of bifurcation; cortical plate of the 35 has no pathological changes. It is most expedient to use the following material for the root filling:

- a. Phosphate cement
- b. Calcium-containing paste
- c. Resorcin-formalin paste
- d. Glass-ionomer cement
- e. Zinc oxide eugenol cement**

207. A 4,5-year-old child presents with eruptions on skin and in the mouth which appeared on the previous day. Objectively: the child is in medium severe condition, body temperature is 38,3°C. Scalp, trunk skin and extremities are covered with multiple vesicles with transparent content. Mucous membrane of cheeks, tongue, hard and soft palate exhibits roundish erosion covered with fibrinous film. Gums remain unchanged. Submandibular lymph nodes are slightly enlarged. What diagnosis can be assumed?

- a. Exudative erythema multiforme
- b. Acute herpetic stomatitis
- c. Chicken pox-induced stomatitis**
- d. Measles-induced stomatitis
- e. Scarlet fever-induced stomatitis

208. A 12-year-old child complains about bleeding from the tooth socket during eating and tooth brushing. The tooth has hurt him before. Objectively: the 36 tooth has a deep cavity communicating with the tooth cavity and filled with red excrescences. Probing causes pain and slight haemorrhage; percussion is painless, thermal stimuli cause mild pain. What is your provisional diagnosis?

- a. Chronic papillitis
- b. Chronic granulating pulpitis
- c. Chronic hypertrophic pulpitis**
- d. Gingival polyp
- e. Chronic simple pulpitis

209. A 13-year-old patient complains about gingival haemorrhage during tooth brushing. Objectively: gums around all the teeth are hyperemic and edematic, PMA index (papillary marginal alveolar index) is 46%, Greene-Vermillion hygiene index is 2,5. Provisional diagnosis: exacerbation of chronic generalized catarrhal gingivitis. This patient should be recommended to use a toothpaste with the following active component:

- a. Chlorhexidine**
- b. Monofluorophosphate
- c. Microelement complex
- d. Vitamins A, D, E
- e. Calcium glycerophosphate

210. A 10-year-old child undergoes sanitation of the oral cavity. The girl was found to have chalky spots on the vestibular surfaces in the precervical region of the 21 and 12 teeth. Enamel surface is dull, smooth. Pain reaction to the temperature stimuli is absent. What additional method of examination is expected to confirm the diagnosis?

- a. Vital staining**
- b. Intraoral roentgenography

- c. Ultraviolet stomatoscopy
- d. Electroodontodiagnostics
- e. Orthopantomography

211. Objective examination of a 10-year-old child revealed that the whole lower lip was slightly hyperemic, infiltrated, dry, covered with small scales. Architectonics of lips is changed. The child complains of dryness and a feeling of tense lips, especially in autumn and winter. The child had a bad habit of lip sucking. What is the most likely diagnosis?

- a. Microbial cheilitis
- b. Meteorological cheilitis**
- c. Atopic cheilitis
- d. Allergic cheilitis
- e. Exfoliative cheilitis

212. A 9-year-old child complains of pain caused by sweet and sour food in an upper tooth on the left. Objectively: the 26 tooth has a carious cavity on the masticatory surface within the enamel limits. What is the optimal material to fill the 26 tooth?

- a. Zinc phosphate cement
- b. Composite**
- c. Silicophosphate cement
- d. Glass ionomer
- e. Silicate cement

213. Mother of a 3-year-old child complains about white spots on the upper anterior teeth of her child. Objectively: the vestibular surface of the 51 and 61 teeth exhibits a defect within the enamel. Probing is painless. What is the optimal method of treatment?

- a. Treatment with fluorine lacquer
- b. Preparation and filling
- c. Electrophoresis of sodium fluoride solution
- d. Impregnation with silver nitrate solution**
- e. Remodentum application

214. A 2-month-old child is anxious, sleeps badly, refuses food, has subfebrile body temperature. Objectively: hyperaemic mucous membrane of the child's tongue, lips, cheeks and palate has a caseous coating that can be easily removed with a tampon. Regional lymph nodes are slightly enlarged and painful on palpation. What disease are these symptoms typical for?

- a. Chronic atrophic candidous stomatitis
- b. Diphtheria
- c. Measles-associated stomatitis
- d. Acute pseudomembranous candidous stomatitis**
- e. Acute herpetic stomatitis

215. A 6-year-old child presents with weakness, pain in throat when swallowing, body temperature rise up to 38 degrees. Examination of the oral cavity revealed massive hyperaemia of the mucous membrane of the soft palate, palatine arches, tonsils, uvula; there were also single vesicles and erosions extremely painful when touched. Regional lymph nodes are enlarged, painful on palpation. What is the most likely diagnosis?

- a. Mycotic angina
- b. Chickenpox
- c. Herpangina**
- d. Infectious mononucleosis
- e. Diphtheria

216. Stomatological examination of a child revealed abnormal form of the central incisors: they are barrel-shaped, there is a semilunar groove on the cutting edge. It is known from the anamnesis that the child's mother had syphilis during pregnancy. Besides the dental abnormality the child presents also with deafness and parenchymatous keratitis. This abnormality of tooth development is called:

- a. Erosion of hard tissues

b. Hutchinsons teeth

- c. Wedge-shaped defect
- d. Pfluger teeth
- e. Fluorosis (destructive form)

217. A 13 year old boy complains about pain in the 46 tooth induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth within light softened circumpulpar dentin. Probing of carious cavity floor is overall painful, cold stimulus causes acute pain that is quickly relieved after the stimulus elimination. Choose an optimal dental treatment paste:

- a. Thymol
- b. Resorcin-formaline
- c. Zink-eugenol

d. Hydroxycalcium-containing

- e. Iodoform

218. An 8-year-old child complains about pain in the 21 tooth that is getting worse during biting down. A month ago a part of tooth crown broke off as a result of a fall. The child didnt consult a dentist. Objectively: in the region of medial angle of the 21 tooth there is a crown defect that makes up one third of the crowns height. Tooth cavity is open, probing and thermal stimulus cause no pain. Percussion is acutely painful. Gum around the 21 tooth is edematic and hyperaemic. What is the provisional diagnosis?

- a. Pulpitis complicated by periodontitis

b. Acute condition of chronic periodontitis

- c. Acute serous periodontitis
- d. Acute condition of chronic pulpitis
- e. Acute purulent periodontitis

219. A 7-year-old child presents with deterioration of general health status, body temperature rise up to 38°C. Objectively: buccal mucosa is covered with white maculae of a pinhead size, protruding above the level of the mucosa. There are pink maculae on the palate. What is the most likely diagnosis?

- a. Infectious mononucleosis

b. Measles

- c. Scarlet fever
- d. Chicken pox
- e. Diphthera

220. Parents of a 7,5-year old child brought him to a dentist for oral cavity sanitation. Objectively: DEF (for primary teeth) + DMF (for permanent teeth) index = 4, Green-Vermillion index = 2,5. Fissures of the first permanent molars are open, intact, non-pigmented. What method of primary prevention of dental caries may be appropriate in this case?

a. Non-invasive hermetization

- b. Application of fluoride varnish
- c. Application of calcium gels
- d. Application of antibacterial varnish
- e. Invasive hermetization

221. A 16-year-old girl consulted a dentist about a cosmetic defect on her front teeth, namely some dark spots and dentin defects. The spots were detected immediately after teeth eruption, the defects developed with the lapse of time. The patient was diagnosed with erosive form of dental fluorosis of the 16, 11, 12, 22, 26, 31, 32, 36, 41, 42, 46 teeth. Select a method of treatment:

- a. Prosthetics
- b. Remineralization

c. Restoration

- d. Surgical treatment
- e. Regular surveillance

222. A 7 year old girl was brought to a hospital for the purpose of oral cavity sanitation. She was born

and has been living in an area where fluorine concentration in water makes up 2,5 mg/l. Examination revealed symmetrically placed dark spots on the vestibular surfaces of the 11, 21, 31, 41 teeth as well as on the tubera of the 16, 26, 36, 46 teeth. It is known from the anamnesis that the teeth cut out already with affection. What is the most probable diagnosis?

- a. Local enamel hypoplasia
- b. Tooth fluorosis**
- c. Amelogenesis imperfecta
- d. Odontogenesis imperfecta
- e. Systemic enamel hypoplasia

223. A 9-year-old child complains about dull pain that is getting worse while pressing the tooth. The tooth was treated for pulpitis one month ago. Objectively: the 36 tooth is filled. Percussion causes acute pain. Mucous membrane is hyperemic and edematous. What is the most likely diagnosis?

- a. Acute serous periodontitis**
- b. Acute diffuse pulpitis
- c. Exacerbation of chronic periodontitis
- d. Acute suppurative pulpitis
- e. Exacerbation of chronic pulpitis

224. A 12 year old girl complains about burning and painfulness of her tongue, especially during eating spicy food. Objectively: there are oval red spots on the tip and dorsum of tongue. Filiform papillae are not present in the affected area. The girl mentions that the spots become periodically larger and have migratory nature. What is the most probable diagnosis?

- a. Glossotrichia
- b. Raspberry tongue
- c. Median rhomboid glossitis
- d. Lingua plicata
- e. Glossitis areata exfoliativa**

225. A 2 year old child was brought to a dentist to consult about rash and painfulness during eating that appeared yesterday. Objectively: body temperature is 37,5°C, skin is clean, submaxillary lymph nodes are painful. Examination of oral cavity revealed on the mucous membrane of lips and tongue roundish painful erosions 1-3 mm in diameter covered with whitish deposit. The gum on both upper and lower jaws is hyperemic, edematous, bleed when touched. What is the most probable diagnosis?

- a. Recurrent herpetic stomatitis
- b. Acute herpetic stomatitis**
- c. Recurrent aphthous stomatitis
- d. Stevens-Johnson syndrome
- e. Multiform exudative erythema

226. A 5-year-old child complains of spontaneous pain in an upper jaw tooth on the right that is getting worse at night and during eating cold food. Objectively: the 65 tooth has a deep carious cavity communicating with the tooth cavity. Probing is painful, percussion is painless. Cold water causes long-lasting pain. What is your provisional diagnosis?

- a. Acute purulent pulpitis
- b. Exacerbation of chronic pulpitis**
- c. Exacerbation of chronic periodontitis
- d. Acute periodontitis
- e. Acute serous pulpitis

227. A 13-year-old boy complains about pain in the upper jaw caused by warm and hot stimuli, offensive breath when he sucks his tooth. Objectively: the 24 tooth is changed in color, there is a deep carious cavity communicating with the tooth cavity. Deep probing is painful. Percussion causes no pain. What is the most likely diagnosis?

- a. Chronic gangrenous pulpitis**
- b. Chronic fibrous pulpitis
- c. Exacerbation of chronic periodontitis

d. Exacerbation of chronic pulpitis

e. Chronic periodontitis

228. An 8,5-year-old child is apparently healthy. The child complains of pain in an upper tooth on the left caused by a traumatic injury sustained three hours ago. Objectively: the crown part of the 21 tooth is destroyed by $\frac{1}{2}$, the pulp is red and significantly exposed, probing causes acute pain and bleeding. Percussion of the 21 tooth is extremely painful. Choose the most efficient treatment method of the 21 tooth:

a. Devital extirpation

b. Bioassay technique

c. Vital extirpation

d. Devital amputation

e. Vital amputation

229. A 13 year-old girl has presented with gingival haemorrhage and mobility of the front teeth over the last month. Objectively: gingival mucosa around the lower incisors and canines is edematous, hyperemic, bleeds on touch. There is grade I tooth mobility, periodontal pockets are 3 mm deep. Orthopantomogram shows the resorption of interalveolar septa by $\frac{1}{3}$ of their height. There is crowding of the lower front teeth. Hygiene index is 4,2. The patient has to consult the following specialist:

a. Orthodontist

b. Endocrinologist

c. Gastroenterologist

d. Haematologist

e. Neuropathologist

230. A 13-year-old girl has been experiencing gingival hemorrhages and frontal teeth mobility throughout the last month. Objectively: gingival mucous membrane in the region of lower incisors and canines is edematic, hyperemic, it bleeds on touch. These teeth present with I degree mobility, parodontal pouches are 3 mm deep. Orthopantomogram shows reduction of bone tissue of interalveolar septa by $\frac{1}{3}$ of their height. Frontal teeth of the lower jaw are overcrowded. Hygiene index is 4,2. What local treatment should be provided in the first place?

a. Antibacterial therapy

b. Professional hygiene

c. Orthodontic care

d. Anti-inflammatory therapy

e. Physical therapy

231. A 13-year-old girl complains of gingival haemorrhages during tooth brushing and eating solid food. Objectively: the gingival mucosa of the upper and lower jaws is somewhat edematic, hyperemic. The oral hygiene is inadequate. X-ray shows no changes. Make a diagnosis:

a. Desquamative gingivitis

b. Chronic atrophic gingivitis

c. Acute catarrhal gingivitis

d. Hypertrophic gingivitis

e. Chronic catarrhal gingivitis

232. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up 2 days ago, the boy has a history of recent angina. Objectively: oral cavity hygiene is unsatisfactory, teeth are covered with soft white deposit. Gums are hyperaemic, gingival papillae are covered with greyish coating. What is the most likely diagnosis?

a. Acute catarrhal gingivitis

b. Chronic catarrhal gingivitis

c. Desquamative gingivitis

d. Ulcero-necrotic gingivitis

e. Hypertrophic gingivitis

233. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up

to 37,6°C. These symptoms turned up two days ago, the boy had a history of recent angina. Objectively: oral hygiene is unsatisfactory, the teeth are coated with soft dental deposit. Gums are hyperemic, gingival papillae are covered with greyish deposit. Specify the causative agent of this disease:

- a. Staphylococci
- b. Yeast fungi
- c. Streptococci
- d. Herpes viruses

e. Fusobacteria, spirochetes

234. A 12-year-old girl complains about swelling, reddening and itching of lips. She has a history of bronchial asthma. Such condition has been observed in the child for 3 years in winter period.

Objectively: red border of lips and adjacent skin exhibit a well-defined erythema and edema, small cracks. There are signs of lip lichenification. There are also marks of scratches on the skin of lips, cheeks and forehead in form of abrasions and crusts. Mucous membrane exhibits no pathological changes. What is the most likely diagnosis?

- a. Contact allergic cheilitis
- b. Exfoliative cheilitis
- c. Microbial cheilitis

d. Atopic cheilitis

e. Meteorological cheilitis

235. Parents of a 5-year-old child noted irregular colour of the child's back of tongue and consulted a pedodontist about this. Objectively: the oral cavity is sanitized, DF index = 4, dorsal and lateral surfaces of tongue have area of desquamating epithelium bordering upon areas of hypertrophy and increased cornification of filiform papillae. The child has a history of being allergic to some foodstuffs. What is the clinical diagnosis?

- a. Tuberculous glossitis
- b. Herpetic tongue lesion
- c. Acute catarrhal glossitis

d. Desquamative glossitis

e. Candidous glossitis

236. During the planned oral cavity sanitation an 11,5-year-old girl complained about periodic spontaneous chilalgia during food intake. Objectively: mucous membrane of lips is hyperemic, edematic and dry. During talking one can observe small drops of mucous secretion. Make the provisionaldiagnosis:

- a. Angular cheilitis
- b. Contact allergic cheilitis
- c. Cheilitis exfoliativa

d. Cheilitis glandularis

e. Eczematous cheilitis

237. Examination of an 11 year old girl revealed: caries intensity (sum of carious, filled and extracted teeth) = 3, Green-Vermillions hygienic index - 1,6, papillary-marginally-alveolar index = 20%. The girl catches a cold once or twice a year. Average caries intensity index for this age group in this region is 4. How many times a year should the girl see a dentist?

- a. 2-3
- b. 3-4
- c. 1-2
- d. 2

e. 1

238. A 12-year-old boy complains about permanent intense throbbing toothache that is getting worse when biting down on food. Objectively: the patients face is asymmetric because of a collateral edema of soft tissues, submandibular lymph nodes are enlarged and painful on palpation. The 26 tooth has a deep cavity not communicating with the tooth cavity. Thermal test is positive, probing is painless,

percussion causes acute pain, the tooth is mobile. X-ray picture of the 26 tooth shows no changes in the periodontium. What is the most likely diagnosis?

- a. Acute purulent pulpitis
- b. Pulpitis complicated by periodontitis
- c. Acute serous periodontitis
- d. Exacerbation of chronic periodontitis
- e. Acute purulent periodontitis**

239. A 12-year-old boy repeatedly visits a dentist to finish treatment of the 36 tooth for the exacerbation of chronic periodontitis. The complaints are absent. Objectively: occlusive dressing on the 36 tooth is preserved, tooth percussion is painless, mucous membrane of the 36 has no pathological changes, is painless on palpation. What material should be used for root canal filling in this case?

- a. Resorcinol-formalin paste
- b. Zinc-eugenol paste
- c. Sealer with a gutta-percha point**
- d. Calcium-containing paste
- e. Phosphate cement

240. A 12-year-old child complains of burning lips, pain at mouth opening, yellowish crusts on the vermillion border. Objectively: there are yellowish crusts on the vermillion border extending from one mouth corner to another, from the wet-dry line to the middle of the vermillion border. When the crusts are removed, the smooth bright red moist surface can be seen. What is the most likely diagnosis?

- a. Atopic cheilitis
- b. Eczematous cheilitis
- c. Glandular cheilitis
- d. Exfoliative cheilitis**
- e. Meteorological cheilitis

241. A 14-year-old girl complains about an aesthetic defect in form of white spots on her teeth. Fluorine concentration in the drinking water in the area of her residence is 2 mg/l. Objectively: vestibular surfaces of all teeth are covered with ill-defined white spots. What is the most likely diagnosis?

- a. Multiple caries
- b. Amelogenesis imperfecta
- c. Local hypoplasia
- d. Systemic hypoplasia
- e. Fluorosis**

242. Preventive examination of a 7-year-old schoolboy revealed unremovable grey-and-white layerings on the mucous membrane of cheek along the line of teeth joining. Mucous membrane is slightly hyperaemic, painless on palpation. The boy is emotionally unbalanced, bites his cheeks. What is the most likely diagnosis?

- a. Multiform exudative erythema
- b. Mild leukoplakia**
- c. Chronic candidous stomatitis
- d. Chronic recurrent aphthous stomatitis
- e. Lichen ruber planus

243. Examination of a 9-year-old child revealed chalky spots in the cervical part of the 12, 11, 21, 22 teeth. The spots appeared two weeks ago. Their surface is dull in appearance and can be stained with methylene blue. The affected teeth are nonresponsive to cold stimulus. What is the most likely diagnosis?

- a. Focal hypoplasia
- b. White spot stage of caries**
- c. Systemic hypoplasia
- d. Fluorosis

e. Surface caries

244. Mother of a 6,5-year-old child consulted a dentist about checking fissure hermetization of the 16, 26, 36, 46 teeth. They were treated six month ago. Sealant in the 36, 46 teeth is preserved, but sealant in the 16 and 26 teeth is absent. What is the tactics of choice?

- a. Coating the teeth with fluorine lacquer Ftorlak
- b. Electrophoresis with 1% sodium fluoride solution
- c. Preventive filling
- d. Applications with remodentum solution

e. To repeat fissure hermetization

245. A 10-year-old child complains of sore throat, cough, fever (up to 38°C). These presentations turned up 2 days ago. Objectively: acute catarrhal stomatitis is present. Tonsils are swollen, hyperemic, covered with yellow-gray friable film which can be easily removed. Submandibular and cervical lymph nodes are significantly enlarged, painful on palpation. Laboratory analysis revealed leuko- and monocytosis. What is the most likely diagnosis?

- a. Rubella
- b. Measles
- c. Diphtheria
- d. Scarlet fever

e. Infectious mononucleosis

246. An 8-year-old boy complains of having toothache during eating. Objectively: approximal surface of the 55 tooth has a deep carious cavity communicating with the tooth cavity. Probing causes acute pain, there is bleeding, percussion is painless. What is the most likely diagnosis?

- a. Chronic hypertrophic pulpitis
- b. Chronic granulating periodontitis
- c. Chronic fibrous periodontitis

d. Chronic fibrous pulpitis

e. Chronic gangrenous pulpitis

247. A 12-year-old patient complains about gingival haemorrhage and tooth mobility. He has been suffering from this since the age of 4. Objectively: gums around all the teeth are hyperemic and edematic, bleed during instrumental examination. Tooth roots are exposed by 1/3 and covered with whitish deposit. II degree tooth mobility is present. Dentogingival pouches are 4-5 mm deep. External examination revealed dryness and thickening of superficial skin layer on the hands and feet, there are also some cracks. What is the most likely diagnosis?

a. Papillon-Lefevre syndrome

- b. Generalized periodontitis
- c. Localized periodontitis
- d. Letterer-Siwe disease
- e. Hand-Schuller-Christian disease

248. A 12-year-old boy complains of fever up to 38°C, weakness, headache, pain in the mouth, presence of vesicles and ulcers. The acute condition developed three days ago. The patient has a history of recent pneumonia treated with antibiotics. Objectively: oral mucosa is hyperemic and edematous. The mucosa of lips, tongue and cheeks has large erosions covered with fibrinous pellicle. The lips are covered with thick brown crusts. The back of the hand has papules of double-contour colour. Which of the listed agents should be primarily used in the topical treatment?

a. Painkillers

- b. Antiviral
- c. Antifungal
- d. Antimicrobial
- e. Antiinflammatory

249. An 11-year-old girl complains about gingival haemorrhage during tooth brushing and eating. She has been suffering from this for a year. Gum of both upper and lower jaws is edematic and congestively hyperemic. Hygienic state of oral cavity is unsatisfactory. Bite is edge-to-edge.

Roentgenological examination of periodontium revealed no pathological changes. What is the provisional diagnosis?

- a. Localized periodontitis
- b. Hypertrophic gingivitis
- c. Acute catarrhal gingivitis
- d. Generalized periodontitis
- e. Chronic catarrhal gingivitis**

250. Preventive examination of a 4,5-year-old child revealed some hidden cavities on the contact surfaces of the 54 and 55 teeth. After removal of the overhanging edges of the enamel the softened dentin could be easily removed with an excavator within the mantle dentin. Select the optimal material for a permanent filling:

- a. Silicate cement
- b. Composite material
- c. Compomer material**
- d. Silicophosphate cement
- e. Polycarboxylate cement

251. A 10-year-old girl complains of minor pain in a lower jaw tooth occurring during having cold food. Objectively: the masticatory surface of the 36 tooth exhibits a carious cavity with a narrow inlet located within the mantle dentin. Probing causes pain along the enamel-dentin border. Make a diagnosis:

- a. Chronic median caries
- b. Acute median caries**
- c. Chronic deep caries
- d. Acute deep caries
- e. Superficial caries

252. A virtually healthy 9 year old child complains about crown fracture and pain in the right superior frontal tooth. Objectively: crown part of the 11 tooth is broken by 1/3, pulp is pointwise dehiscid, it is red, acutely painful and bleeds during probing. Percussion is slightly painful. The child got a trauma several hours ago. Choose an optimal treatment method:

- a. Vital extirpation
- b. Devital extirpation
- c. Vital amputation
- d. Devital amputation
- e. Biological method**

253. A 5-year-old boy presents with body temperature rise up to 39,2 degrees, sore throat, headache, nausea. Objectively: mucous membrane of soft palate and palatine arches is evidently hyperemic, there is distinct border between it and surrounding tissues. The child's tongue is dry, edematous, its lateral surfaces are red and free of fur, fungiform papillae are evidently enlarged. Face skin is covered with spotty rash, hyperemic except for pale nasolabial triangle. Submandibular lymph nodes are painful on palpation. What is the causative agent of this disease?

- a. Bordet-Gengou bacillus
- b. Löffler's bacillus
- c. Coxsackie virus
- d. Herpes virus
- e. Haemolytic streptococcus**

254. A 14-year-old child complains about a cosmetic defect in the frontal teeth region. Objectively: enamel of the 11, 12, 21, 22, 31, 32, 41, 42 teeth is thin in the region of cutting edge, there is a sulcate enamel pit 1,5 mm wide which encircles the tooth and is parallel to the cutting edge. The cusps of the 16, 26, 36, 46 teeth are underdeveloped and have conical form. What is the most likely diagnosis?

- a. Stainton-Capdepont dysplasia
- b. Systemic hypoplasia**

- c. Enamel dysplasia
- d. Dentinogenesis imperfecta
- e. Local hypoplasia

255. A 7 month old child was brought to a dentist because of an ulcer in the oral cavity. The child was born prematurely. She has been fed with breast milk substitutes by means of a bottle with rubber nipple. Objectively: on the border between hard and soft palate there is an oval ulcer 0,8x1,0 cm large covered with yellowish-grey deposit and surrounded with a roll-like infiltration. Make a provisional diagnosis:

- a. Bednars aphtha**
- b. Tuberculous ulcer
- c. Acute candidous stomatitis
- d. Acute herpetic stomatitis
- e. Settons aphtha

256. Examination of an 11-year-old boy revealed thickened, somewhat cyanotic, dense gingival margin overlapping the crowns of all teeth by 1/2 of their height. Fedorov-Volodkina oral hygiene index is 2,6, PMA index is 20%. X-ray picture shows no pathological changes of periodontium. The child has a 2-year history of neuropsychiatric treatment for epilepsy. Make a provisional diagnosis:

- a. Generalized periodontitis
- b. Chronic hypertrophic gingivitis**
- c. Localized periodontitis
- d. Chronic catarrhal gingivitis
- e. Acute catarrhal gingivitis

257. A 10-year-old child complains about acute spontaneous spasmodic pain in an upper jaw tooth on the left. Objectively: distal contact surface of the 26 tooth exhibits a carious cavity filled with light softened dentine and localized within parapulpal dentine. Probing of the cavity floor causes acute pain, percussion is painless. Cold stimuli cause a long-standing pain attack. The child has a history of lidocaine allergy. Choose an optimal paste to be used during the first visit:

- a. Formocresol
- b. Zinc oxide eugenol
- c. Iodoform
- d. Thymol

e. Paraformaldehyde

258. Preventive examination of an 8-year-old boy revealed some lusterless chalk-like spots on the vestibular surface of the 11 and 21 teeth, which are localised in the precervical region. Subjective complaints are absent. What is the most likely diagnosis?

- a. Acute superficial caries
- b. Chronic initial caries
- c. White-spotted fluorosis
- d. Local enamel hypoplasia

e. Acute initial caries

259. Mother of a 3-year-old child consulted a dentist about discolouration and abrasion of the child's teeth. The child has a history of enamel spalling shortly after the tooth eruption. Objectively: the crowns of all the teeth are worn by nearly a half and have yellow-gray colour. Make a provisional diagnosis:

- a. Osteogenesis imperfecta
- b. Systemic enamel hypoplasia
- c. Amelogenesis imperfecta
- d. Dentinogenesis imperfecta

e. Stainton-Capdepon syndrome

260. A 14-year-old boy complains of rash on the lips, pain while talking and eating. These presentations showed up three days ago. Similar rash has appeared 1-4 times a year for three years. Objectively: general condition is satisfactory, the body temperature is of 36,9°C. On the vermillion

border of the lower lip and the skin below there are multiple small grouped vesicles with serous content, and crusts. What is the etiology of the disease?

- a. Streptococci
- b. Coxsackie virus
- c. Herpes simplex virus**
- d. Herpes zoster Virus
- e. Staphylococci

261. A 4-year-old girl complains of spontaneous acute toothache in the upper jaw on the right increasing during eating. The pain arose two days ago. Objectively: there is a deep carious cavity filled with softened dentin in the 55 tooth. There is no intercommunication with the tooth cavity. Probing of the cavity floor is slightly painful. Percussion is painful. What is the presumptive diagnosis?

- a. Acute purulent pulpitis
- b. Exacerbation of chronic gangrenous pulpitis
- c. Acute purulent periodontitis
- d. Acute pulpitis complicated by periodontitis**
- e. Acute generalized (serous) pulpitis

262. A 13-year-old child complains of a short-term pain caused by cold stimuli in the upper left molar tooth. Occlusal surface of the 27 tooth has a cavity with a small hole. After the overhanging enamel had been removed, the soft light dentin could be easily removed with an excavator within mantle dentin. What is the most likely diagnosis?

- a. Chronic surface caries
- b. Acute median caries**
- c. Acute deep caries
- d. Chronic median caries
- e. Acute surface caries

263. Parents of a 3-year-old child report that the child has constant pain in the upper front teeth. Objectively: the coronal part of the 61 tooth is gray and decayed. Probing of the root canal orifice is painful and accompanied by bleeding. The tooth percussion provokes acute pain. Mucosa is hyperemic, edematic and painful. Palpation in the region of the 61, 62 teeth reveals a fistula. What is your provisional diagnosis?

- a. Acute diffuse pulpitis
- b. Acute purulent periodontitis
- c. Exacerbation of chronic periodontitis**
- d. Chronic granulating periodontitis
- e. Exacerbation of chronic pulpitis

264. A 3-year-old child complains of a cavity in a lower jaw tooth. Objectively: masticatory surface of the 84 tooth exhibits a carious cavity within mantle dentine. Dentine is softened, probing of the cavity walls is painful, percussion is painless. What is the most likely diagnosis?

- a. Chronic deep caries
- b. Acute median caries**
- c. Chronic fibrous pulpitis
- d. Chronic superficial caries
- e. Acute deep caries

265. According to the mother, a 5-year-old child complains about pain during swallowing, weakness, body temperature rise up to 39,5 degrees, swelling of submental lymph nodes. Objectively: the child's condition is grave, body temperature is 38,8 degrees. Mucous membrane of the oral cavity is markedly hyperaemic and edematic with haemorrhages and ulcerations. Pharynx is markedly hyperemic, lacunae are enlarged and have necrosis areas. Regional, cervical, occipital lymph nodes are painful, enlarged and dense. What is the most likely diagnosis?

- a. Necrotizing ulcerative gingivostomatitis
- b. Acute herpetic stomatitis
- c. Infectious mononucleosis**

- d. Herpetic angina
- e. Lacunar tonsillitis

266. Examination of an 8-year-old child revealed irregular white spots on the vestibular surface in the precervical region of the of 11 and 12 teeth. The spots are smooth and stainable. What is the most likely diagnosis?

- a. Fourniers teeth
- b. Focal demineralization**
- c. Superficial caries
- d. Enamel hypoplasia
- e. Enamel erosion

267. Parents of a 1,5-month-old child complain of whitish depositions on the child's buccal and labial mucosa. Objectively: labial and buccal mucosa is hyperemic and covered with caseous deposition that can be easily removed. Specify the causative agent of this disease:

- a. Diplococci
- b. Candida fungi**
- c. Fusiform bacillus
- d. Vincents spirochaetes
- e. Loefflers bacillus

268. A 7-year-old boy complains of fever up to 38 degrees, headache, sore throat. Objectively: slightly hyperemic soft palate mucosa, anterior palatine arches and tonsils exhibit erosions. Submandibular lymph nodes are slightly enlarged, painless. What is the causative agent of this disease?

- a. Herpes simplex
- b. Loefflers Bacillus
- c. Bordet-Gengou bacillus
- d. Coxsackie virus**
- e. Epstein-Barr virus

269. Parents of a 12-year-old child complain of white patches on the upper front teeth, which appeared six months ago. Objectively: chalk-like patches on the vestibular surfaces in the precervical region of the 13, 12, 11, 21, 22, 23 teeth. Their enamel is dull, pliable and rough on probing. There is a history of short-term pain caused by chemical stimuli. What is your provisional diagnosis?

- a. Acute initial caries**
- b. Acute superficial caries
- c. Dental fluorosis
- d. Systemic enamel hypoplasia
- e. Chronic initial caries

270. A 7-year-old child complains about spontaneous pain in the upper right molars. Both medial contact and masticatory surfaces of the 55 tooth have a carious cavity filled with clear softened dentin and localized within parapulpal dentin. Floor probing causes acute pain, tooth percussion is slightly painful. Mucous membrane of the alveolar process in the root projection of the 55 is intact, examination of this region revealed no roentgenological changes. What is the most likely diagnosis?

- a. Acute diffuse pulpitis**
- b. Chronic gangrenous pulpitis
- c. Deep acute caries
- d. Exacerbation of chronic periodontitis
- e. Chronic fibrous pulpitis

271. An 11-year-old child complains of a carious cavity in the left upper molar, which appeared six months ago. Objectively: the medial contact surface of the 26 tooth exhibits a carious cavity located within the mantle dentin. The cavity floor and walls are dense, pigmented, with no pain upon probing. The response to thermal stimuli is absent. Percussion of the tooth causes no pain. Make a provisional diagnosis:

- a. Acute deep caries
- b. Chronic periodontitis**

c. Chronic deep caries

d. Acute median caries

e. Chronic median caries

272. An 11 year old patient complains about tooth mobility and gingival haemorrhage. He has been suffering since he was 3 years old. Objectively: gums around all the teeth are hyperemic, edematic, bleed during instrumentl examination. Tooth roots are dehiscd by 1/3 and covered with white deposit. There is 2 degree tooth mobility. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of palms, anterior third of forearms, sole surfaces; there are scratches. What is the most probable provisional diagnosis?

a. Gauchers disease

b. Hand-Schueller-Christian disease

c. Niemann-Pick disease

d. Papillon-Lefevre syndrome

e. Letterer-Siewe disease

273. Examination of a 5-year-old child revealed a cariuos cavity communicating with the tooth cavity on the approximal surface of the 54 tooth. Halitosis is present. Superficial probing of the cavity is painless, deeper probing causes pain reaction. Percussion is painless. Interviewing revealed that hot food caused pain. Select the medication for antiseptic treatment of root canals:

a. Aethonium solution

b. Alcohol

c. Formalin solution

d. Sodium hypochlorite

e. Furacilin solution

274. A 14-year-old teen complains of gingival haemorrhages during tooth brushing. Objectively: gingival mucosa is hyperemic, pastous, bleeds when touched. Schiller-Pisarev test is positive. PMA index - 70%. Hygienic index - 3,0. X-ray picture of the frontal area depicts no evident changes. What is the most likely diagnosis?

a. Acute catarrhal gingivitis

b. Chronic periodontitis

c. Chronic catarrhal gingivitis

d. Chronic hypertrophic gingivitis

e. Exacerbation of chronic periodontitis

275. Preventive examination of a 4-year-old child revealed a deep carious cavity on the masticatory surface of the 54 tooth. The cavity has no intercommunication with the tooth cavity and is filled with dense dentine. Probing, percussion, thermal test of the 54 tooth provoke no pain. The decay/filled index is 1, hygiene index is 1,9. What filling material is the most suitable for permanent filling of the 54 tooth?

a. Silicate cement

b. Chemical composite

c. Photopolymer composite

d. Glass-ionomer cement

e. Silicophosphate cement

276. An 8 year old child complains about permanent dull pain in the 46 tooth that is getting stronger during cutting. The pain appeared 1 day ago. Previously there has been pain induced by cold stimuli. Objectively: there is a deep carious cavity on the masticatory surface of the 46 tooth, tooth cavity is closed, probing and temperature stimuli cause no pain reaction. Percussion is painful, a slight mobility is present. Gum around the 46 tooth is hyperemic, edematic, palpatory painful. X-ray picture shows no changes near the apex of undeveloped roots. What is your provisional diagnosis?

a. Acute purulent pulpitis

b. Acute purulent periodontitis

c. Acute condition of chronic periodontitis

d. Acute serous periodontitis

e. Acute general serous pulpitis

277. A 13-year-old girl complains about frequent falling out of a filling in the 21 tooth. It is known from the anamnesis that 2 years ago she underwent treatment on account of a dental trauma. Objectively: a transverse defect of 1/3 of the crown in the 21 tooth. Percussion is painless. Tooth colour is unchanged. X-ray picture shows that root canal is filled by 1 mm from the apex, filling material closely fits the walls of root canal. What stomatological tactics should be chosen?

- a. The root apex should be resected
- b. The root canal should be refilled
- c. The defect should be restored with photopolymer**
- d. The tooth should be extracted
- e. The tooth should be crowned with an artificial crown

278. A 12-year-old child complains of body temperature rise up to 39,8°C, weakness, headache and pain in throat getting worse when swallowing. Objectively: mucous membrane of gums is edematic, hyperemic. Tonsils are bright red, hypertrophic, covered with yellow-gray deposit which does not extend beyond the lymphoid tissue and can be easily removed. Submandibular, occipital lymph nodes are significantly enlarged, slightly painful on palpation. Hepatosplenomegaly is present. Identify the causative agent of this disease:

- a. Epstein-Barr virus**
- b. Coxsackie virus
- c. Loefflers Bacillus
- d. Herpes virus
- e. Bordet-Gengou bacillus

279. A 5-year-old boy complains of a carious cavity, periodic toothache, gum swelling. Objectively: masticatory surface of the 74 tooth has a deep cavity not communicating with the tooth cavity, cold stimuli, probing and percussion are painless, mucous membrane is pale pink, there is a caicatrix from a fistula. X-ray picture shows an ill-defined focus of bone tissue destruction in the region of the roots bifurcation. What is the most likely diagnosis?

- a. Exacerbation of chronic fibrous periodontitis
- b. Exacerbation of chronic granulating periodontitis
- c. Chronic granulomatous periodontitis
- d. Chronic granulating periodontitis**
- e. Chronic fibrous periodontitis

280. A 1,8 year old boy was under treatment in the infectious disease department. He was given ampicillin. On the 6th day of treatment there appeared white deposits in form of caseous films that were revealed on the hyperemic mucous membrane in the area of gingival torus, cheeks and on the tongue. The films can be removed leaving hyperemic surface underneath them. General condition is satisfactory. Body temperature is 36,7 degrees. What is the provisional diagnosis?

- a. Chronic candidous stomatitis
- b. Drug-induced stomatitis
- c. Acute candidous stomatitis**
- d. Acute herpetic stomatitis
- e. Mild case of leukoplakia

281. A 12-year-old patient complains of gingival haemorrhage, tooth mobility. He has has these presentations since the age of 4. Objectively: gingiva around all the teeth is hyperaemic, edematic, bleeds during instrumental examination. The teeth roots are exposed by 1/3 and covered with whitish plaque. The teeth are mobile. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of the outer layer of skin on the palms, anterior third of the forearms, soles; there are skin cracks. What is the most likely diagnosis?

- a. Letterer-Siwe disease
- b. Cyclic neutropenia
- c. Hand-Schuller-Christian disease
- d. Niemann-Pick disease

e. Papillon-Lefevre syndrome

282. Examination of a 6-year-old girl revealed a deep carious cavity in the 85 tooth. Percussion and probing are painless. After removal of the softened dentine, communication with the tooth cavity showed up. Deep probing is painless. X-ray picture of the 85 tooth shows the focus of destruction of bone tissue in the region of bifurcation; cortical plate of the 35 has no pathological changes. It is most expedient to use the following material for the root filling:

- a. Resorcin-formalin paste
- b. Phosphate cement
- c. Calcium-containing paste

d. Zinc oxide eugenol cement

- e. Glass-ionomer cement

283. A 4,5-year-old child presents with eruptions on skin and in the mouth which appeared on the previous day. Objectively: the child is in medium severe condition, body temperature is 38,3°C. Scalp, trunk skin and extremities are covered with multiple vesicles with transparent content. Mucous membrane of cheeks, tongue, hard and soft palate exhibits roundish erosion covered with fibrinous film. Gums remain unchanged. Submandibular lymph nodes are slightly enlarged. What diagnosis can be assumed?

a. Chicken pox-induced stomatitis

- b. Exudative erythema multiforme
- c. Scarlet fever-induced stomatitis
- d. Measles-induced stomatitis
- e. Acute herpetic stomatitis

284. A 12-year-old child complains about bleeding from the tooth socket during eating and tooth brushing. The tooth has hurt him before. Objectively: the 36 tooth has a deep cavity communicating with the tooth cavity and filled with red excrescences. Probing causes pain and slight haemorrhage; percussion is painless, thermal stimuli cause mild pain. What is your provisional diagnosis?

- a. Chronic simple pulpitis

b. Chronic hypertrophic pulpitis

- c. Chronic papillitis
- d. Chronic granulating pulpitis
- e. Gingival polyp

285. Objective examination of a 10-year-old child revealed that the whole lower lip was slightly hyperemic, infiltrated, dry, covered with small scales. Architectonics of lips is changed. The child complains of dryness and a feeling of tense lips, especially in autumn and winter. The child had a bad habit of lip sucking. What is the most likely diagnosis?

- a. Atopic cheilitis
- b. Allergic cheilitis

c. Meteorological cheilitis

- d. Exfoliative cheilitis
- e. Microbial cheilitis

286. A 9-year-old child complains of pain caused by sweet and sour food in an upper tooth on the left. Objectively: the 26 tooth has a carious cavity on the masticatory surface within the enamel limits. What is the optimal material to fill the 26 tooth?

a. Composite

- b. Silicophosphate cement
- c. Zinc phosphate cement
- d. Silicate cement
- e. Glass ionomer

287. Mother of a 3-year-old child complains about white spots on the upper anterior teeth of her child. Objectively: the vestibular surface of the 51 and 61 teeth exhibits a defect within the enamel. Probing is painless. What is the optimal method of treatment?

- a. Remodentum application

b. Treatment with fluorine lacquer

c. Impregnation with silver nitrate solution

d. Preparation and filling

e. Electrophoresis of sodium fluoride solution

288. A 6-year-old child presents with weakness, pain in throat when swallowing, body temperature rise up to 38°C. Examination of the the oral cavity revealed massive hyperaemia of the mucous membrane of the soft palate, palatine arches, tonsils, uvula; there were also single vesicles and erosions extremely painful when touched. Regional lymph nodes are enlarged, painful on palpation. What is the most likely diagnosis?

a. Herpangina

b. Mycotic angina

c. Diphtheria

d. Infectious mononucleosis

e. Chickenpox

289. An 8-year-old child complains about pain in the 21 tooth that is getting worse during biting down. A month ago a part of tooth crown broke off as a result of a fall. The child didnt consult a dentist. Objectively: in the region of medial angle of the 21 tooth there is a crown defect that makes up 1/3 of the crowns height. Tooth cavity is open, probing and thermal stimulus cause no pain. Percussion is acutely painful. Gum around the 21 tooth is edematic and hyperaemic. What is the provisional diagnosis?

a. Acute purulent periodontitis

b. Pulpitis complicated by periodontitis

c. Acute condition of chronic pulpitis

d. Acute serous periodontitis

e. Acute condition of chronic periodontitis

290. A 7-year-old child presents with deterioration of general health status, body temperature rise up to 38 degrees. Objectively: buccal mucosa is covered with white maculae of a pinhead size, protruding above the level of the mucosa. There are pink maculae on the palate. What is the most likely diagnosis?

a. Infectious mononucleosis

b. Measles

c. Scarlet fever

d. Chicken pox

e. Diphthera

291. Parents of a 7,5-year old child brought him to a dentist for oral cavity sanitation. Objectively: DEF (for primary teeth) + DMF (for permanent teeth) index = 4, Green-Vermillion index = 2,5. Fissures of the first permanent molars are open, intact, non-pigmented. What method of primary prevention of dental caries may be appropriate in this case?

a. Application of fluoride varnish

b. Invasive hermetization

c. Non-invasive hermetization

d. Application of antibacterial varnish

e. Application of calcium gels

292. A 7 year old girl was brought to a hospital for the purpose of oral cavity sanitation. She was born and has been living in an area where fluorine concentration in water makes up 2,5 mg/l. Examination revealed symmetrically placed dark spots on the vestibular surfaces of the 11, 21, 31, 41 teeth as well as on the tubera of the 16, 26, 36, 46 teeth. It is known from the anamnesis that the teeth cut out already with affection. What is the most probable diagnosis?

a. Amelogenesis imperfecta

b. Odontogenesis imperfecta

c. Tooth fluorosis

d. Systemic enamel hypoplasia

e. Local enamel hypoplasia

293. X-ray examination of the 46 tooth in a 7-year-old child reveals the following: the root walls are parallel, their thickness gradually decreases, they have pointed ends. The root canal converges towards the tooth cavity, and diverges at the developing apical hole. Periodontal gap is of the same width along the entire length of the root. At the root apex it merges with the growth zone. Specify the stage of root development:

- a. Continuing root apex development
- b. Open apex
- c. Complete root and periodontium development
- d. Continuing periodontium development
- e. Continuing root development

294. A 12 year old girl complains about burning and painfulness of her tongue, especially during eating spicy food. Objectively: there are oval red spots on the tip and dorsum of tongue. Filiform papillae are not present in the affected area. The girl mentions that the spots become periodically larger and have migratory nature. What is the most probable diagnosis?

- a. Glossitis areata exfoliativa
- b. Lingua plicata
- c. Raspberry tongue
- d. Glossotrichia
- e. Median rhomboid glossitis

295. A 2 year old child was brought to a dentist to consult about rash and painfulness during eating that appeared yesterday. Objectively: body temperature is 37,5 degrees, skin is clean, submaxillary lymph nodes are painful. Examination of oral cavity revealed on the mucous membrane of lips and tongue roundish painful erosions 1-3 mm in diameter covered with whitish deposit. The gum on both upper and lower jaws is hyperemic, edematic, bleed when touched. What is the most probable diagnosis?

- a. Recurrent aphthous stomatitis
- b. Stevens-Johnson syndrome
- c. Acute herpetic stomatitis
- d. Multiform exudative erythema
- e. Recurrent herpetic stomatitis

296. A 5-year-old child complains of spontaneous pain in an upper jaw tooth on the right that is getting worse at night and during eating cold food. Objectively: the 65 tooth has a deep carious cavity communicating with the tooth cavity. Probing is painful, percussion is painless. Cold water causes long-lasting pain. What is your provisional diagnosis?

- a. Acute periodontitis
- b. Acute serous pulpitis
- c. Acute purulent pulpitis
- d. Exacerbation of chronic pulpitis
- e. Exacerbation of chronic periodontitis

297. An 8,5-year-old child is apparently healthy. The child complains of pain in an upper tooth on the left caused by a traumatic injury sustained three hours ago. Objectively: the crown part of the 21 tooth is destroyed by one second, the pulp is red and significantly exposed, probing causes acute pain and bleeding. Percussion of the 21 tooth is extremely painful. Choose the most efficient treatment method of the 21 tooth:

- a. Vital extirpation
- b. Devital extirpation
- c. Bioassay technique
- d. Vital amputation
- e. Devital amputation

298. A 14-year-old child complains about acute spontaneous pain in an upper jaw tooth on the right. The pain has been lasting for 3 days, it is throbbing, irradiating to the temple, getting worse at night.

Objectively: surface of the 15 tooth exhibits a carious cavity within parapulpal dentine. Dentine is softened, of greyish colour. Probing of the whole cavity floor is painful, percussion of the 15 tooth is painless. What is the most likely diagnosis?

a. Exacerbation of chronic periodontitis

b. Acute purulent pulpitis

c. Acute focal pulpitis

d. Acute diffuse pulpitis

e. Acute periodontitis

299. A 12-year-old boy complains of severe pain caused by cold food in the 11 tooth. A day before he had a crown break off of the 11 tooth. Examination revealed an oblique fracture of the 11 tooth crown with the opening of the tooth cavity, probing causes acute pain, comparative percussion is painful, there is minor tooth mobility. What treatment should be administered?

a. Devital extirpation

b. Vital amputation

c. Devital amputation

d. Vital extirpation

e. Biologic method

300. A girl is 13 years old. She lives in an area where fluoride concentration in the drinking water is at the rate of 1,6 mg/l. Dental examination revealed some chalk-like spots on the vestibular surfaces of all her teeth. The white coloration is more intense in the centre and less on the periphery. There is light-brown pigmentation in the region of the central incisors along the cutting edge. What is the most likely diagnosis?

a. Stainton-Capdepon syndrome

b. Amelogenesis imperfecta

c. Acute initial caries

d. Systemic enamel hypoplasia

e. Dental fluorosis

301. A 13-year-old girl has been experiencing gingival hemorrhages and frontal teeth mobility throughout the last month. Objectively: gingival mucous membrane in the region of lower incisors and canines is edematous, hyperemic, it bleeds on touch. These teeth present with I degree mobility, parodontal pouches are 3 mm deep. Orthopantomogram shows reduction of bone tissue of interalveolar septa by 1/3 of their height. Frontal teeth of the lower jaw are overcrowded. Hygiene index is 4,2. What local treatment should be provided in the first place?

a. Anti-inflammatory therapy

b. Physical therapy

c. Antibacterial therapy

d. Professional hygiene

e. Orthodontic care

302. A 13-year-old girl complains of gingival haemorrhages during tooth brushing and eating solid food. Objectively: the gingival mucosa of the upper and lower jaws is somewhat edematous, hyperemic. The oral hygiene is inadequate. X-ray shows no changes. Make a diagnosis:

a. Hypertrophic gingivitis

b. Acute catarrhal gingivitis

c. Chronic catarrhal gingivitis

d. Desquamative gingivitis

e. Chronic atrophic gingivitis

303. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6 degrees. These symptoms turned up 2 days ago, the boy has a history of recent angina. Objectively: oral cavity hygiene is unsatisfactory, teeth are covered with soft white deposit. Gums are hyperaemic, gingival papillae are covered with greyish coating. What is the most likely diagnosis?

a. Desquamative gingivitis

b. Ulcero-necrotic gingivitis

- c. Hypertrophic gingivitis
- d. Acute catarrhal gingivitis
- e. Chronic catarrhal gingivitis

304. A 16-year-old teenager complains about halitosis, general weakness, body temperature rise up to 37,6°C. These symptoms turned up two days ago, the boy had a history of recent angina. Objectively: oral hygiene is unsatisfactory, the teeth are coated with soft dental deposit. Gums are hyperemic, gingival papillae are covered with greyish deposit. Specify the causative agent of this disease:

- a. Yeast fungi
- b. Fusobacteria, spirochetes**
- c. Herpes viruses
- d. Streptococci
- e. Staphylococci

305. During the planned oral cavity sanitation an 11,5-year-old girl complained about periodic spontaneous chilalgia during food intake. Objectively: mucous membrane of lips is hyperemic, edematous and dry. During talking one can observe small drops of mucous secretion. Make the provisional diagnosis:

- a. Cheilitis glandularis**
- b. Eczematous cheilitis
- c. Cheilitis exfoliativa
- d. Contact allergic cheilitis
- e. Angular cheilitis

306. A 12-year-old boy repeatedly visits a dentist to finish treatment of the 36 tooth for the exacerbation of chronic periodontitis. The complaints are absent. Objectively: occlusive dressing on the 36 tooth is preserved, tooth percussion is painless, mucous membrane of the 36 has no pathological changes, is painless on palpation. What material should be used for root canal filling in this case?

- a. Sealer with a gutta-percha point**
- b. Resorcinol-formalin paste
- c. Phosphate cement
- d. Calcium-containing paste
- e. Zinc-eugenol paste

307. A 4-year-old child presents with headache, nausea, pain when swallowing. Body temperature is 39°C. Examination of the oral cavity revealed extremely hyperaemic mucous membrane and tonsils. On the first day of disease the child's tongue was furred with greyish coating, on the second day the tongue was found to be self-purified. On the third day the tongue was smooth, of crimson colour, with hyperaemic fungiform papillae. What is presumptive diagnosis?

- a. Diphtheria
- b. Herpangina
- c. Varicella
- d. Measles
- e. Scarlet fever**

308. A 12-year-old child complains of burning lips, pain at mouth opening, yellowish crusts on the vermilion border. Objectively: there are yellowish crusts on the vermilion border extending from one mouth corner to another, from the wet-dry line to the middle of the vermilion border. When the crusts are removed, the smooth bright red moist surface can be seen. What is the most likely diagnosis?

- a. Eczematous cheilitis
- b. Glandular cheilitis
- c. Atopic cheilitis
- d. Meteorological cheilitis
- e. Exfoliative cheilitis**