



Oral Surgery 4DD SEM1 - MCQs

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1. The patients with congestive heart failure may have all of these conditions, except:
 - Extreme dyspnea
 - Hyperventilation
 - Extreme headache
 - Cyanosis: ✓ Extreme headache
2. The patients with congestive heart failure may have all of these conditions, except:
 - Cough
 - Hemoptysis
 - Difficulty in breathing
 - Teary eyes: ✓ Teary eyes
3. The incorrect preventive measure before the surgical procedure for a patient with congestive heart failure is
 - Written consent from the patient's cardiologist
 - Oral premedication
 - Long painless appointments
 - Small amounts of vasoconstrictors in local anesthesia: ✓ Long painless appointments
4. The preferred position for the patients with congestive heart failure is
 - Standing position
 - Sitting position
 - Sleeping position
 - Sleeping position with legs raised a bit upward: ✓ Sitting position
5. The incorrect preventive measure before the surgical procedure for a patient with angina pectoris is
 - Oral premedication, usually 20-50mg diazepam
 - Written consent from the patient's cardiologist
 - Small amounts of vasoconstrictors in local anesthesia
 - Dental surgery in hospital: ✓ Oral premedication, usually 20-50mg diazepam
6. Precipitating factors of angina pectoris are all, except
 - Fatigue
 - Rich meal
 - Dizziness
 - Extreme stress: ✓ Dizziness
7. All are common about pain of angina pectoris, except
 - Pain may be present in the cardiac area
 - Pain may be radiating to neck
 - Pain may be radiating to right arm
 - Pain may be radiating to mandible teeth: ✓ Pain may be radiating to right arm
8. Painful symptoms of angina pectoris can accompany with all, except
 - Perspiration
 - Extreme anxiety
 - Coughing
 - A feeling of imminent death: ✓ Coughing
9. False information about myocardial infarction is
 - Myocardial infarction refers to ischemic necrosis of an area of the heart
 - Myocardial infarction has a sudden onset with severe pain anterior to sternum
 - Pain of myocardial infarction is more severe than that of angina pectoris
 - Pain of myocardial infarction lasts longer than 15 minutes: ✓ Myocardial infarction has a sudden onset with severe pain anterior to sternum
10. Pain of myocardial infarction can radiate to all region, except
 - Neck
 - Lip
 - Mandible
 - Right arm: ✓ Lip
11. All are characteristics of myocardial infarction, except
 - Pain lasting from 5 to 10 minutes
 - Burning sensation
 - Extreme tightness
 - Pressure: ✓ Pain lasting from 5 to 10 minutes
12. The pain of myocardial infarction may be associated with all, except
 - Nausea
 - Vomiting
 - Dilation of pupils
 - Perspiration: ✓ Dilation of pupils
13. Angina Pectoris
 - Is characterized by the temporary ischemia in part of or all of the myocardium.
 - Is the inability of the myocardium to pump enough blood to satisfy the body.
 - Is the ischemic necrosis of an area of the heart.
 - Is any periodic variation in the normal rhythm of heart.: ✓ Is characterized by the temporary ischemia in part of or all of the myocardium.
14. Congestive heart failure
 - Is characterized by the temporary ischemia in part of or all of the myocardium.
 - Is the inability of the myocardium to pump enough blood to satisfy the body.
 - Is the ischemic necrosis of an area of the heart.
 - Is any periodic variation in the normal rhythm of heart.: ✓ Is the inability of the myocardium to pump enough blood to satisfy the body.
15. Myocardial infarction
 - Is characterized by the temporary ischemia in part of or all of the myocardium.
 - Is the inability of the myocardium to pump enough blood to satisfy the body.
 - Is the ischemic necrosis of an area of the heart.
 - Is any periodic variation in the normal rhythm of heart.: ✓ Is the ischemic necrosis of an area of the heart

- 16. Cardiac arrhythmia**
- Is characterized by the temporary ischemia in part of or all of the myocardium.
 - Is the inability of the myocardium to pump enough blood to satisfy the body.
 - Is the ischemic necrosis of an area of the heart.
 - Is any periodic variation in the normal rhythm of heart.: ✓ Is any periodic variation in the normal rhythm of heart
- 17. All are true about hypertension, except**
- Essential hypertension does not have any known causes
 - Secondary hypertension has known causes
 - Patients with hypertension should never undergo surgical procedure
 - Hypertension is the abnormal elevation of the arterial pressure above the aforementioned values: ✓ Patients with hypertension should never undergo surgical procedure
- 18. All are the preventive measures of the patients with hypertension before dental procedure, except**
- Sublingual administration of nifedipine
 - Postponing the procedure if the blood pressure is too high
 - Premedication to control stress
 - Treating in hospital for acute dental problems: ✓ Sublingual administration of nifedipine
- 19. All are the preventive measures of the patients with hypertension before dental procedure, except**
- Premedication
 - Blood pressure should be monitored after, not before the surgery
 - Short appointments
 - Avoidance of noradrenaline in patients receiving anti-hypertensive agents: ✓ Blood pressure should be monitored after, not before the surgery
- 20. The most serious complications of hypertension are all, except**
- Hypertensive encephalopathy
 - Convulsion
 - Hemorrhagic diathesis
 - Coma: ✓ Hemorrhagic diathesis
- 21. Symptoms of Hypertensive encephalopathy consist of all, except**
- Coma
 - Nausea
 - Diarrhea
 - Headache: ✓ Diarrhea
- 22. According to the pathogenic mechanism, the one that is not the group of bleeding disorders is**
- Vascular disorders
 - Thrombocytic disorders
 - Disorders of coagulation
 - Hemoglobin disorders: ✓ Hemoglobin disorders
- 23. The incorrect preventive measure for the patients with hemorrhagic diathesis is**
- Designation for the time and place of procedure
 - Local control of bleeding
 - Scheduling of surgical procedure for evening hours
 - Administration of medication by the treating hematologist: ✓ Scheduling of surgical procedure for evening hours
- 24. Thyrotoxic patients present with all, except**
- Anxiety
 - Hyperactivity
 - Irritability
 - Extreme headache: ✓ Extreme headache
- 25. Thyrotoxic patients present with all, except**
- Tachycardia
 - Insomnia
 - Frequent urination
 - Arrhythmia: ✓ Frequent urination
- 26. Thyrotoxic patients present with all, except**
- Esophthalmos
 - Weakness
 - Increased blood pressure
 - Blurred vision: ✓ Blurred vision
- 27. The safest vasoconstrictor for patients with hyperthyroidism is considered to be**
- Adrenaline
 - Noradrenaline
 - Felypressin
 - Lidocaine: ✓ Felypressin
- 28. All are correct about diabetes mellitus, except**
- Diabetes mellitus is characterized by alteration of metabolism of carbohydrates, proteins, and lipids.
 - Diabetes mellitus is caused by the abnormalities of the secretion mechanism and effect of insulin.
 - To avoid insulin shock, dental surgery should be performed in the morning.
 - After dental surgery, patients should not eat much because that can cause bleeding and pain.: ✓ After dental surgery, patients should not eat much because that can cause bleeding and pain.
- 29. For good wound healing in diabetic patients, the thing to avoid is**
- Use of aspirin
 - Good manipulations
 - Suturing
 - Smooth bone edges: ✓ Use of aspirin
- 30. Diabetic hypoglycemia is characterized by all, except**
- Fatigue
 - Diarrhea
 - Coma
 - Death: ✓ Diarrhea

31. 31. Diabetic hypoglycemia is characterized by all, except
- Coma
 - Vertigo
 - Xerostomia
 - Sweating: ✓ Xerostomia
32. Diabetic hypoglycemia is characterized by all, except
- Pallor
 - Dyspnea
 - Convulsion
 - Loss of consciousness: ✓ Dyspnea
33. Diabetic hyperglycemia is characterized by all, except
- Xerostomia
 - Headache
 - Vomiting
 - Diplopia: ✓ Diplopia
34. Diabetic hyperglycemia is characterized by all, except
- Coma
 - Dyspnea
 - Weakness
 - Blurred vision: ✓ Blurred vision
35. Patients with controlled diabetes require
- Preoperative antibiotic prophylaxis
 - Postoperative antibiotic prophylaxis
 - Diet change
 - Dental procedure at the hospital: ✓ Diet change
36. Chronic renal failure is
- Clinical syndrome characterized by permanent damage of kidney
 - Clinical syndrome characterized by temporary kidney damage
 - Characterized by acute, diffused inflammation of the glomeruli.
 - Syndrome characterized by the alteration of metabolism of carbohydrates: ✓ Clinical syndrome characterized by permanent damage of kidney
37. Most common causes of chronic renal failure are all, except
- Nephrotoxin
 - Diabetes mellitus
 - Hypotensive nephrosclerosis
 - Glomerulonephritis: ✓ Hypotensive nephrosclerosis
38. All are necessary preventive measures for the surgical procedure on patients with chronic renal failure, except
- Consultation with the patients' nephrologist
 - Use of minimal amounts of vasoconstrictors
 - Use of minimal amounts of local anesthetics
 - Dental procedure on the day of hemodialysis: ✓ Dental procedure on the day of hemodialysis
39. Stenosis of ducts of small bronchi and bronchioles in the patient of asthma is due to all, except
- Edema of mucosa
 - Viscous mucosa production
 - Bronchoconstriction
 - Vascular hemorrhage: ✓ Vascular hemorrhage
40. When asthma attacks, all are correct about the patient, except
- The patient's expression is anxious
 - The patient's face is pale
 - The patient's limbs are cold
 - The patient wants to vomit: ✓ The patient wants to vomit
41. The incorrect sentence about asthma is
- Asthma is the condition characterized by paroxysmal dyspnea with coughing
 - Asthma is usually caused by allergy
 - Asthma can be caused by Koch's bacillus
 - Asthma presents with stenosis of the duct of small bronchi and bronchioles: ✓ Asthma can be caused by Koch's bacillus
42. The incorrect preventive measure for patients with asthma is
- Taking detailed medical history
 - Control of pain
 - Long appointments with little pain
 - Administration of sedative medication: ✓ Long appointments with little pain
43. All are infectious diseases, except
- Hepatitis B
 - Hepatitis C
 - Diabetes
 - AIDS: ✓ Diabetes
44. All are correct about what to do with active tuberculosis patients, except
- The emergency dental treatment should be done in a hospital
 - The dentists and staff should take additional protection measures
 - Dental treatment should be postponed till it is confirmed that there is no danger of transmitting disease
 - The appointment should be set in early morning at the dental office: ✓ The appointment should be set in early morning at the dental office
45. Incorrect sign or symptom of patients with tuberculosis is
- Fever
 - Abdominal pain
 - Lassitude
 - Weight loss: ✓ Abdominal pain
46. The low-risk group of having an infectious disease is
- The educated
 - The homosexual
 - The drug user
 - People who undergo hemodialysis: ✓ The educated
47. Incorrect preventive measure for dentists when a patient with infectious disease comes into the clinic is
- Using a pair of sterilized glove
 - Programming the procedure as the last of the day
 - Good care of disposable needles
 - Discarding of surgical blades: ✓ Using a pair of sterilized glove

48. All are true about epilepsy, except
- Epilepsy is a clinical manifestation of abnormal electrical activity of the brain
- Epileptic patients may present with epileptic seizures under certain circumstances
- Certain epileptic patients may present with status epilepticus
- Epilepsy can lead to sensory activity and altered states of consciousness: ✓ Epilepsy can lead to sensory activity and altered states of consciousness
49. The precipitating factors of epilepsy are all, except
- Severe pain
- Alcoholic drinks
- Hyperglycemia
- Severe stress: ✓ Hyperglycemia
50. The precipitating factors of epilepsy are all, except
- Surgical procedures
- Alcoholic drinks
- Administration of large doses of local anesthesia
- Rich meal: ✓ Rich meal
51. The first phase of epileptic seizure is
- Convulsion phase
- Aura
- Anxiety phase
- Post-convulsion phase: ✓ Aura
52. The second phase of epileptic seizure is
- Convulsion phase
- Aura
- Anxiety phase
- Post-convulsion phase: ✓ Convulsion phase
53. The third phase of epileptic seizure is
- Convulsion phase
- Aura
- Anxiety phase
- Post-convulsion phase: ✓ Post-convulsion phase
54. The first phase of epileptic seizure presents with the following symptoms, except
- Tinnitus
- Yawning
- Dizziness
- Vomiting: ✓ Vomiting
55. The first phase of epileptic seizure presents with the following symptoms, except
- Anxiety
- Characteristic smells
- Yawning
- Feeling hungry: ✓ Feeling hungry
56. The phase that does not exist in epileptic seizure is
- Convulsion phase
- Aura
- Anxiety phase
- Post-convulsion phase: ✓ Anxiety phase
57. The first phase of epileptic seizure lasts
- A few seconds
- 3 to 5 minutes
- 2 minutes
- More than 5 minutes: ✓ A few seconds
58. The second phase of epileptic seizure presents with all, except
- Forceful jaw closing
- Rolling the eyes upward or to the side
- Nose bleeding
- Convulsion: ✓ Nose bleeding
59. The sign that does not exist in second phase of epilepsy is
- Pinkish froth from the mouth
- Extreme dizziness
- Urinary incontinence
- Possible breathless: ✓ Extreme dizziness
60. The third phase of epileptic seizure consists of all, except
- Weakness
- Pallor
- Eye bleeding
- Disturbances of the consciousness state: ✓ Eye bleeding
61. All are preventive measures for the epileptic patients to avoid seizures during dental procedures, except
- Reduction of stress
- Administration of large amounts of local anesthetic to prolong the pain control
- Short appointments, as painless as possible
- Additional anticonvulsant drugs before the surgical procedure: ✓ Administration of large amounts of local anesthetic to prolong the pain control
62. The recommended time for dental surgery for a patient who used to receive radiotherapy
- At least 6 months has passed
- At least 8 months has passed
- At least 12 months has passed
- At least 10 months has passed: ✓ At least 12 months has passed
63. The analgesics that is considered to be responsible for most allergic reaction is
- Aspirin
- Codeine
- Pethidine
- Morphine: ✓ Aspirin
64. One type that does not belong to allergic reactions is
- Anaphylaxis
- Cytotoxic hypersensitivity
- Cell-mediated hypersensitivity
- Delayed-type hyposensitivity: ✓ Delayed-type hyposensitivity

65. 65. The most common allergic reaction is
 - Anaphylaxis
 - Urticaria
 - Angioneurotic edema
 - Asthma: ✓ Urticaria
66. Allergy that is caused by the use of local anesthetics is usually due to
 - Preservatives in the ampoule
 - Amount of adrenaline
 - Amount of noradrenaline
 - Expired anesthetics: ✓ Preservatives in the ampoule
67. The people who are usually affected by allergic reactions from anxiolytic drugs are those who report the history of
 - Angioneurotic edema
 - Urticaria
 - Asthma
 - Epilepsy: ✓ Epilepsy
68. The most dangerous type of allergic reactions is
 - Anaphylaxis
 - Urticaria
 - Angioneurotic edema
 - Allergic asthma: ✓ Anaphylaxis
69. Anaphylaxis may present with all, except
 - Hoarseness of voice
 - Dysphagia
 - Anxiety
 - Hair falling: ✓ Hair falling
70. Anaphylaxis may present with all, except
 - Rash
 - Burning
 - Blindness
 - Painful sensation: ✓ Blindness
71. Anaphylaxis may present with all, except
 - Pruritus
 - Dyspnea
 - Cyanosis of limbs
 - Urinary blockage: ✓ Urinary blockage
72. For pregnant patients, the most risks for dental procedure are noted in
 - The first trimester
 - The second trimester
 - The third trimester
 - The first and third trimesters: ✓ The first trimester
73. All are true about the preparation of surgeon before the surgical procedure, except
 - Disinfection of hands
 - Appropriate clothing
 - Freestyle of hair
 - Use of a surgical mask: ✓ Freestyle of hair
74. All are basic methods for sterilization of instruments, except
 - Dry heat
 - Boiling water
 - Autoclave
 - Chemical means: ✓ Boiling water
75. Packages of instruments which are opened repeatedly must be sterilized at least
 - Once a month
 - Twice a month
 - Once a week
 - Once a fortnight: ✓ Once a week
76. The incorrect fundamental rule concerning incision and flap is
 - Firm, interrupted strokes for incision
 - Avoidance of the injury of anatomic structures
 - Adequate width of flap
 - Flap larger than bone deficit: ✓ Firm, interrupted strokes for incision
77. The incorrect fundamental rule concerning incision and flap is
 - Incision along gingival sulcus
 - Firm, continuous strokes for incision
 - Reflecting mucosa before periosteum
 - Avoidance of excessive pulling of flap: ✓ Reflecting mucosa before periosteum
78. The incorrect fundamental rule concerning incision and flap is
 - Envelope incisions and semicircular incisions must be at least 0.5cm from gingival sulcus
 - The base of flap must be narrower than the free gingival margin
 - Excessive pulling of flap must be avoided
 - The flap must be larger than the bone deficit: ✓ The base of flap must be narrower than the free gingival margin
79. All are true about the reflection of mucoperiosteum, except
 - The elevator is in direct contact with bone
 - The reflection starts at the incision
 - The reflection is completed with gentle, steady strokes toward labial or buccal vestibule
 - No scissors are needed even if symphysis occurs: ✓ No scissors are needed even if symphysis occurs
80. The most common suturing technique is
 - Vertical mattress suture
 - Horizontal mattress suture
 - Interrupted suture
 - Continuous suture: ✓ Interrupted suture

81. All are true about continuous suture, except
- It is usually used for suturing of wounds that are superficial but long
 - Continuous locking suture is a variation of continuous simple suture
 - It takes a lot of time to complete the suturing
 - If it is cut accidentally, entire suture becomes loose: ✓ It takes a lot of time to complete the suturing
82. All are true about continuous suture, except
- It is quick
 - It requires fewer knots
 - If cut inadvertently, entire suture becomes loose
 - It is a risk of ischemia of the area: ✓ It is a risk of ischemia of the area
83. All are the instruments for removing bone, except
- Chisel and Mallet
 - Bone file
 - Bur and Handpiece
 - Hemostat: ✓ Hemostat
84. What can you do after tooth extraction by surgery?
- Avoid spitting for about 2 weeks
 - Brush your teeth which are adjacent to the extraction site excessively
 - Rinse your mouth gently
 - You can touch the extraction site with your tongue but not fingers: ✓ Rinse your mouth gently
85. When there is a fractured root of a tooth, it is not good to
- Perform RCT
 - Complete the extraction
 - Explain the patient that it is fine to keep it
 - Simply abandon the procedure: ✓ Simply abandon the procedure
86. The most common blade used for flap and incision on edentulous alveolar ridges is
- Blade no. 10
 - Blade no. 11
 - Blade no. 12
 - Blade no. 15: ✓ Blade no. 15
87. The most common blade for incisions in the gingival sulcus and incisions posterior to the teeth, especially in the tuberosity area is
- Blade no. 10
 - Blade no. 11
 - Blade no. 12
 - Blade no. 15: ✓ Blade no. 12
88. The most common blade for small incisions, such as incising abscess is
- Blade no. 10
 - Blade no. 11
 - Blade no. 12
 - Blade no. 15: ✓ Blade no. 11
89. The basic requirements for a successful outcome of simple tooth extraction are all, except
- Performing the extraction in the hospital to control the hemorrhage well
 - Controlling the level of fear and stress of the patients
 - Knowing tooth anatomy well
 - Detailed clinical and radiographic examinations: ✓ Performing the extraction in the hospital to control the hemorrhage well
90. All are true about extraction technique using tooth forceps, except
- The initial extraction movements applied are very gentle.
 - The dentist applies slow steady pressure to move the tooth buccally first.
 - Buccal pressure is greater than palatal or lingual pressure.
 - Traction is recommended in the final extraction phase.: ✓ Traction is recommended in the final extraction phase.
91. All are true about extraction technique using tooth forceps, except
- If anatomy of the root permits, rotational force may be applied in addition to buccolingual or buccopalatal pressure.
 - The dentist applies slow steady pressure to move the tooth buccally first, then palatally or lingually.
 - The final extraction movement must be lingual or palatal.
 - The initial extraction movements applied are very gentle.: ✓ The final extraction movement must be lingual or palatal.
92. Difficulties of extracting maxillary canines are all, except
- Firm anchorage in alveolar bone
 - Long root
 - Curvature at root tip
 - Thick alveolar bone covered the labial surface of tooth's root: ✓ Thick alveolar bone covered the labial surface of tooth's root
93. Indications of surgical tooth extraction are all, except
- Teeth presenting large bulbous roots
 - Broken root tips that have remained in the alveolar bone
 - Teeth with roots in maxillary sinus
 - Teeth with very small roots: ✓ Teeth with very small roots
94. Indications of surgical tooth extraction are all, except
- Teeth with unusual roots
 - Teeth of old patients
 - Teeth with hypercementosis of roots
 - Impacted teeth: ✓ Teeth of old patients
95. Indications of surgical tooth extraction are all, except
- Semi-impacted teeth
 - Teeth with ankylosed roots
 - Teeth with very deep caries
 - Teeth with dilaceration of root tips: ✓ Teeth with very deep caries

96. 96. One step that does not belong to the steps of surgical extraction of tooth is
 - Controlling the patient's anxiety
 - Creation of flap
 - Removal of bone
 - Extraction of tooth: ✓ Controlling the patient's anxiety
97. 97. All are various surgical techniques for root removal, except
 - Opening of a window on buccal bone for removal of root through socket or window itself
 - Creation of a groove on the surface of root after removal of a small amount of buccal bone
 - Creation of a groove between the root and bone to allow access for elevator
 - Removal of part of the lingual bone for luxation of the root lingually: ✓ Removal of part of the lingual bone for luxation of the root lingually
98. 98. Which one is not the basic principle of suturing technique?
 - Insert the needle at right angles to the tissue
 - The exit tract should likewise be at right angles to the tissue
 - Sutures should be placed at right angles to the line of the wound
 - Tie the sutures very tightly to avoid ischemia of the wound edge: ✓ Tie the sutures very tightly to avoid ischemia of the wound edge
99. Instructions for postoperative surgical procedures are all, except
 - Diet should not consist of cold, liquid food
 - Rest at home for one or two days
 - Patient must bite firmly on gauze placed over the wound for 30-45 minutes
 - Take the painkiller: ✓ Diet should not consist of cold, liquid food
100. Instructions for postoperative surgical procedures are all, except
 - Extraoral placement of cold compresses
 - Rinsing of mouth do not allow for the first 72 hours
 - Removal of suture after a week
 - Do not go to work for 1 or 2 days dependant on the extent of surgical wounds: ✓ Rinsing of mouth do not allow for the first 72 hours
101. Requirements of flap are:
 - Flap must be designed to provide an adequate exposure of the surgical site
 - Broad base and good vascular supply
 - When placed back should rest on healthy bone
 - All are correct: ✓ All are correct
102. All of the following are absorbable suture material except:
 - Catgut
 - Polyglycolic
 - Polyglactin
 - Silk: ✓ Silk
103. 103. All of the following are non-absorbable suture except:
 - Silk
 - Stainless steel
 - Nylon
 - Chromic catgut: ✓ Chromic catgut
104. 104. Which number scalpel blade is universally useful for oral surgical procedure?
 - 15
 - 12
 - 17
 - 10: ✓ 15
105. 105. Which of the following material is not used for packing of wounds?
 - Iodoform gauze
 - Gauze soaked in antibiotic paste
 - Betadine
 - Gauze soaked in hydrogen peroxide: ✓ Gauze soaked in hydrogen peroxide
106. 106. Drains are used for:
 - Providing exit for pus and infection outside
 - Prevent formation of haematomas
 - Prevent formation of seromas in hard and soft tissues
 - All are correct: ✓ All are correct
107. 107. In periodontal surgeries needle used is:
 - 1/4th, round body
 - 3/8th, reverse cutting
 - 1/2, flat needle
 - 3/4th, atraumatic needle: ✓ 3/8th, reverse cutting
108. 108. In oral surgeries needle used is:
 - 1/4th, round body
 - 3/8th, reverse cutting
 - 1/2, round needle
 - 3/4th, atraumatic needle: ✓ 1/2, round needle
109. 109. Poor accessibility is main disadvantage of:
 - Two-size flap
 - Envelope flap
 - Semilunar flap
 - Three-size flap: ✓ Envelope flap
110. 110. Vicryl is an:
 - Absorbable natural suture
 - Absorbable synthetic suture
 - Nonabsorbable silk suture
 - Nonabsorbable synthetic suture: ✓ Absorbable synthetic suture
111. 111. Which of the following is early sign of need of oxygen?
 - Tachycardia
 - Cyanosis
 - Sternal relaxation
 - Constricted pupil: ✓ Tachycardia

112. Frequent site for occurrence of ameloblastoma is:
- Mandibular premolar area
 - Max molar area
 - Max antrum and floor of nose
 - Mandibular molar and ramus area: ✓ Mandibular molar and ramus area

113. Which of the following lesion has no epithelial lining?
- Nasopalatine cyst
 - Nasolabial cyst
 - Aneurysmal bone cyst
 - Follicular cyst: ✓ Aneurysmal bone cyst

114. What is the time to administer analgesic for controlling postoperative pain?
- After the regain of sensation
 - Pain becomes moderate to severe
 - Before the anesthetic effect wears off
 - During procedure: ✓ Before the anesthetic effect wears off

115. The soft tissue incision used to remove mandibular Tori should be placed:
- Directly over torus
 - Inferior to torus in floor of mouth
 - Over the edentulous crest or gingival crevice around the dentition
 - None of All: ✓ Over the edentulous crest or gingival crevice around the dentition

116. Best way to palpate submandibular gland is:
- Bimanual extraoral
 - Monomanual extraoral
 - Bimanual simultaneous intra and extraoral
 - None of All: ✓ Bimanual simultaneous intra and extraoral

117. Among the following which is strongest stimulator to increase the respiration:
- Decrease IV oxygen
 - Increase blood pH
 - Increase in arterial CO₂
 - Increase in arterial oxygen: ✓ Increase in arterial CO₂

118. Among the following which one elicits more tissue reaction?
- Catgut
 - Silk
 - Nylon
 - Linen: ✓ Catgut

119. Surgical needle and sutures are usually sterilized in manufacturing units by:
- Gamma radiation
 - X-rays
 - Boiling
 - Dry heat sterilization: ✓ Gamma radiation

120. The following is one of the advantage of catgut over plain suture:
- Greater ease of use
 - Nonabsorbable
 - Greater strength
 - Cheap: ✓ Greater strength

↓
greater
strength

121. Rotatory movement is used for the extraction of:
- Mandibular canine
 - Maxillary central incisors
 - Maxillary lateral incisors
 - All are correct: ✓ Maxillary central incisors
122. A pregnant patient in 2nd trimester falls into syncope during extraction of upper molars, she should be kept in:
- Trendelenburg position
 - Head down towards her feet
 - Right lateral position
 - Left lateral position: ✓ Right lateral position
123. Reactionary haemorrhage occurs after extraction because of:
- Broken roots
 - High BP
 - Sharp interdental septum
 - Gingival laceration: ✓ High BP
124. The extraction of which of the following is most difficult in maxillary arch?
- Lateral incisor
 - 1st premolar
 - 2nd premolar
 - Canine: ✓ 1st premolar
125. Displacement of root in maxillary sinus is most likely to happen during extraction of maxillary:
- Canine
 - Deciduous 1st molar
 - 1st molar
 - 2nd molar: ✓ 1st molar
126. Which of the following is relatively difficult tooth to extract?
- Maxillary canine
 - Maxillary central incisor
 - Mandibular premolar
 - Mandibular canine: ✓ Maxillary canine
127. A patient who is on anticoagulant therapy required a tooth extraction. Which laboratory test is most valuable in evaluating the surgical risk?
- Clotting time
 - Bleeding time
 - Prothrombin time PT
 - Complete blood cell count: ✓ Prothrombin time
128. A patient who is on aspirin therapy required a tooth extraction. Which laboratory test is most valuable in evaluating the surgical risk?
- Clotting time
 - Bleeding time
 - INR
 - Complete blood cell count: ✓ INR
129. A male is taking 60 mg of hydrocortisone daily on day of extraction the dose should be:
- Remain unchanged
 - Reduced to $\frac{1}{2}$
 - Double
 - Reduced to $\frac{1}{4}$: ✓ Double

130. 130. Use of medical history in extraction patient is:
 - In medicolegal cases
 - To assess the growth stage of patient
 - To determine bleeding disorders
 - To determine communicable disease: ✓ To determine bleeding disorders
131. In patient of liver disease, possible complication during extraction is:
 - Dry socket
 - Facial space infection
 - Bleeding
 - Loss of clot: ✓ Bleeding
132. Dry socket:
 - Results from loss of blood clot in socket
 - Is treated by reinducing bleeding in socket
 - Is a form of osteomyelitis
 - Is common in extraction of anterior teeth: ✓ Results from loss of blood clot in socket
133. Trismus following a lower molar extraction after 4 weeks will be due to:
 - Breakage of needle in pterygomandibular space
 - Haematoma of TMJ
 - Submasseteric space abscess
 - Root stump in socket: ✓ Breakage of needle in pterygomandibular space
134. Reactionary hemorrhage is hemorrhage after surgery that occurs:
 - Within 24 hours
 - After 24 hours
 - After 72 hours
 - After 7 days: ✓ Within 24 hours
135. Which of the following elevators fit well in operators hand and can be rotated quickly by between thumb and finger?
 - Couplan elevator
 - Hospital pattern elevation
 - Winter's elevator
 - Warwick James elevator: ✓ Warwick James elevator
136. An absolute contraindication for extraction of teeth is:
 - Hypertension
 - Hypotension
 - Thyrotoxicosis
 - MI after 4 months: ✓ MI after 4 months
137. Elective dental extraction on a patient who has had a MI, 2 months prior are best:
 - Performed under oral sedative.
 - Performed using epinephrine free injection.
 - Performed using oral sedative and epinephrine free injection.
 - Postponed until at least till 6 months have relapsed: ✓ Postponed until at least till 6 months have relapsed
138. 138. Root tip elevator utilizes which principle:
 - Wedge
 - Pulley
 - Wheel and axle
 - None of All: ✓ Wedge
139. One day after complete mouth extraction blue black spots are seen on neck of patient. These spots indicate:
 - Thrombocytopenic purpura
 - Postoperative ecchymosis
 - Impaired blood circulation
 - Cellulitis: ✓ Postoperative ecchymosis
140. 140. In extraction best time to administer analgesic is:
 - Before anesthesia wears off
 - Prior to extraction
 - When pain is moderate to severe
 - After anesthesia wears off: ✓ Before anesthesia wears off
141. Extraction of a tooth during acute infection:
 - Can cause extensive spread of infection
 - Helps drainage and relieves pain if proper AB is given and its adequate blood level is reached
 - Can cause sudden death due to pulmonary embolism
 - Can lead to trigeminal neuralgia in postoperative of period: ✓ Helps drainage and relieves pain if proper AB is given and its adequate blood level is reached
142. Most important principle during extraction:
 - Least trauma to bone while extracting whole tooth out
 - Least trauma to mucosa while extracting whole tooth out
 - Least trauma bone and mucosa while extracting whole tooth out
 - None of All: ✓ Least trauma bone and mucosa while extracting whole tooth out
143. When a forcep is to be utilized for removal of tooth, the 1st direction for tooth to be applied is:
 - Occlusally
 - Buccally
 - Lingually
 - Apically: ✓ Apically
144. The ideal treatment of alveolar osteitis after dental extraction is:
 - Topical antibiotics
 - Systemic antibiotics
 - Debridement of socket and sedative dressing
 - Curettage to induce fresh bleeding: ✓ Debridement of socket and sedative dressing
145. Elevator can be used to advantage when?
 - Tooth to be extracted is isolated
 - Adjacent tooth bone is used as fulcrum
 - Adjacent tooth is not to be extracted
 - Multiple adjacent teeth are to be extracted: ✓ Multiple adjacent teeth are to be extracted
146. Basic principles of extraction are all except:
 - No trauma to bone and mucosa
 - Expansion of bony socket
 - Application of lever and fulcrum
 - Insertion of wedge: ✓ No trauma to bone and mucosa

147. Cowhorn forceps are specially designed to extract:

- Maxillary 1st and 2nd premolar
- Mandibular central incisor
- Mandibular molar
- Maxillary molar: ✓ Mandibular molar

148. Diagnosis of dry socket is done by:

- History
- Clinical examination.
- Radiographs
- None of All: ✓ History

149. Diagnosis of infection socket is done by:

- History
- Clinical examination.
- Radiographs
- Blood test: ✓ History

150. Which teeth are extracted standing behind the patient?

- Maxillary left molars
- Mandibular left side
- Maxillary right side
- Mandibular right side: ✓ Mandibular right side

151. Which teeth is extracted standing in-front the patient?

- Premolar right side
- Mandibular left side
- Mandibular right side
- Both mandibular left and right: ✓ Mandibular left side

152. Bleeding caused in extraction socket due to wound sepsis after few days is called as:

- Primary haemorrhage
- Reactionary
- Secondary
- Systemic: ✓ Secondary

153. For a patient undergoing anticoagulant therapy who requires unavoidable dental surgical treatment the dental surgeon should:

- Not take patient until therapy is over
- Bring down dosage and proceed further
- Adjust dosage before and after dental treatment
- Consult physician of patient for joint decision: ✓ Consult physician of patient for joint decision

154. The only tooth to be extracted by primary rotatory movements is:

- Mandibular central incisor and maxillary 2nd premolar
- Maxillary central incisors and mandibular 2nd premolar
- Maxillary central incisor and mandibular 1st premolar
- Mandibular central incisor and maxillary 1st premolar: ✓ Maxillary central incisors and mandibular 2nd premolar

155. Principle action of ammonia in syncope is as:

- Vasomotor stimulant
- Respiratory stimulant
- Vagal stimulant
- Inhibition of vasomotor tone: ✓ Respiratory stimulant

156. Best time of extraction in pregnancy is:

- 1st trimester
- 2nd trimester
- 3rd trimester
- 1st and 3rd trimester: ✓ 2nd trimester

157. Hypoglycemia may occur in patient taking insulin and undergoing extraction when?

- Extraction is done on empty stomach
- Patient had infection
- Patient had no exercise in morning
- Patient had breakfast before extraction: ✓ Extraction is done on empty stomach

158. Elevators should be forced down the PDL at an angle of _____ to long axis of tooth:

- 60 degrees
- 30 degrees
- 90 degrees
- 45 degrees: ✓ 30 degrees

159. Chair position during extraction of maxillary teeth should be:

- 16 cm below elbow of operator
- 16 cm below shoulder level of operator
- 16 cm below shoulder of operator
- 8 cm below elbow of operator: ✓ 16 cm below shoulder level of operator

160. Chair position during extraction of mandibular teeth should be following, except:

- The chair should be positioned in a more upright position.
- The occlusal plane is parallel to the floor.
- The chair should be lower than for extraction of maxillary teeth.
- The occlusal plane is 30 degrees to the floor: ✓ The occlusal plane is 30 degrees to the floor.

161. During multiple extractions, it should be done in sequence of:

- Maxillary before mandibular anterior before posterior
- ✓ Mandibular before maxillary post before anterior
- Maxillary before mandibular, posterior before anterior
- Mandibular before maxillary anterior before posterior: - Mandibular before maxillary post before anterior

162. Chair position during extraction of maxillary teeth should be following, except:

- The chair should be tipped backward
- Maxillary occlusal plane is at 60 degrees to the floor.
- The height of the chair should be patient's mouth is at or below the operator's elbow level
- The chair should be lower than for extraction of mandibular teeth: ✓ The chair should be lower than for extraction of mandibular teeth.

163. During extraction priorities should be given to all, except:

- Roots before whole teeth
- Painful teeth before loose tooth
- Anterior before posterior
- Lower before upper: ✓ Anterior before posterior

164. Beaks of mandibular tooth forceps are at an angle of _____ to handle:
 - 45 degrees
 - 60 degrees
 - 90 degrees
 - 0 degree: ✓ 90 degrees
165. While using elevators, fulcrum is taken from:
 - Adjacent tooth
 - Finger
 - Interdental bone
 - Tooth to be extracted: ✓ Interdental bone
166. Expansion of bony socket causes:
 - Tear of PDL
 - Multiple small fractures of buccal plate and interradicular septum
 - Elevation of tooth from socket
 - All are correct: ✓ Multiple small fractures of buccal plate and interradicular septum
167. Radiographs are useful in following cases, except:
 - Impacted
 - Abnormal shape of roots
 - Tooth with deep PD pocket
 - Ankylosis: ✓ Tooth with deep PD pocket
168. Which contact of tooth and forceps is not permissible?
 - Ideal fit
 - 2 point contact
 - 1 point contact
 - All are correct: ✓ 1 point contact
169. The complication of using air-motor at 30,000 rpm for impacted molar is:
 - Burn of bone
 - Tissue laceration
 - Tissue necrosis
 - Emphysema: ✓ Emphysema
170. While extracting mandibular third molar, it is noted that distal root is missing. The root tip is most likely in the:
 - Submental space
 - Submandibular space
 - Parapharyngeal space
 - Pterygomandibular space: ✓ Submandibular space
171. Commonest complication after removal of mandibular third molar:
 - Lingual nerve damage
 - Dry socket
 - Fracture mandible
 - Bleeding: ✓ Dry socket
172. Impacted canine:
 - Most likely to be ankylosed
 - They may damage root of other teeth
 - Good function is impossible without them
 - They will not erupt until root function is complete: ✓ They may damage root of other teeth
173. During extraction of lower impacted right molar bone is removed:
 - To expose maximum dimension of tooth
 - Up to CE junction
 - Up to furcation area
 - Up to half of roots: ✓ To expose maximum dimension of tooth
174. Which is the best treatment for pericoronitis involving impacted mandibular 3rd molar?
 - Antibiotic and analgesic therapy
 - Operculectomy
 - Extraction of involved 3rd molar
 - Gentle application of heat and cold simultaneously: ✓ Extraction of involved 3rd molar
175. Which is the best treatment for pericoronitis involving impacted mandibular 3rd molar with thin periosteum?
 - Use appropriate antibiotic
 - Use appropriate analgesic
 - Operculectomy
 - Extraction of opposite 3rd molar: ✓ Operculectomy
176. A dentist planning to remove an impacted tooth will need which of the following radiographs?
 - A periapical film will be all that is required
 - A bite wing will be all that is required
 - A lateral view will be all that is required
 - An anteroposterior view is all that is required: ✓ A periapical film will be all that is required
177. A dentist planning to remove an impacted tooth will need which of the best radiographs?
 - A periapical film will be all that is required
 - A bite wing will be all that is required
 - A lateral view will be all that is required
 - CBCT view is all that is required: ✓ CBCT view is all that is required
178. Which of the following is most difficult impaction of 3rd molar?
 - Mesioangular
 - Vertically impacted
 - Partially impacted
 - Distoangular: ✓ Distoangular
179. Which of the following is most difficult impaction of 3rd molar?
 - Mesioangular
 - Vertically impacted
 - Inverted impacted
 - Distoangular: ✓ Inverted impacted
180. A 25-year-old female patient complains of decreased mouth opening since 4 days. This could be due to:
 - Impacted 3rd molar
 - Oral submucous fibrosis
 - Oropharyngeal fibrosis
 - Bony ankylosis of TMJ: ✓ Impacted 3rd molar

181. The direction of bevel of the chisel during bone cutting is:
- Away from bone to be sacrificed
- Towards the bone to be sacrificed
- Independent of the bone to be sacrificed
- Parallel to stress lines: ✓ Away from bone to be sacrificed

182. After surgery of 3rd molar, patches of anesthesia on chin is due to damage of:
- Lingual nerve
- Inferior alveolar nerve
- Mental nerve
- Mylohyoid nerve: ✓ Inferior alveolar nerve

183. The most common impacted teeth is:
- Mandibular 3rd molars
- Maxillary canine
- Maxillary central incisors
- Mandibular canine: ✓ Mandibular 3rd molars

184. Most desirable incision while designing of a flap is:
- Horizontal
- Vertical
- Curved
- Elliptical: ✓ Vertical

185. Longer the root the extraction is:
- More difficult
- More easy
- Less difficult
- Less easy: ✓ More difficult

186. Contributory factor to pericoronitis of an impacted mandibular 3rd molar is:
- Trauma by opposing tooth
- Previous radiation therapy
- Systemic disease
- Infected follicular cyst: ✓ Trauma by opposing tooth

187. Contributory factor to pericoronitis of an impacted mandibular 3rd molar is:
- Streptococci and bacterial infection
- Previous radiation therapy
- Systemic disease
- Infected follicular cyst: ✓ Streptococci and bacterial infection

188. Contributory factor to pericoronitis of an impacted mandibular 3rd molar is:
- Low hygiene
- Previous radiation therapy
- Systemic disease
- Infected follicular cyst: ✓ Low hygiene

189. 48 hrs after extraction of impacted mandibular 3rd molar patient returns to your office complaining of moderate pain radiating to the ear. His temperature is 39 degree C. Swelling is minimal. The most probable diagnosis is:
- Trauma to inferior alveolar nerve during injection
- Postoperative infection of parotid space
- Postoperative infection of masticatory space
- Postextraction alveolitis: ✓ Postextraction alveolitis

190. 5 days after extraction of an impacted mandibular 3rd molar, your patient presents with hard, painful swelling after 12 hrs deviation near angle of mandible. This is most likely due to:
- Angioneurotic oedema
- Haematoma
- Infection
- Surgical trauma: ✓ Infection

191. In extraction of mandibular 3rd molars the main reason why the posterior incision should be placed more buccally is:
- To prevent damage to lingual nerve
- Incision should be on sound bone
- To prevent damage to retromolar artery
- All are correct: ✓ All are correct

192. During extraction of a maxillary molar a root tip is displaced inside the maxillary sinus, treatment is:
- Caldwell Luc Operation
- Hemimaxillectomy
- Refer surgical exploration for 6 weeks till socket heals completely
- No treatment indicated: ✓ Caldwell Luc Operation

193. In oro-antral communication most communication occurs during extraction of:
- Maxillary 1st premolar
- Maxillary 2nd premolar
- Maxillary 1st molar
- Maxillary 3rd molar: ✓ Maxillary 1st molar

194. An oro-antral communication during extraction:
- Requires no treatment immediately
- Immediate prolapse of antral lining into mouth
- Reflux of fluids into nasal cavity while drinking
- Must be closed surgically immediately: ✓ Must be closed surgically immediately

195. While extracting maxillary 1st molar root is displaced into maxillary sinus, management is:
- Leave it
- Retrieve through socket
- Ask patient to blow nose
- Raise a flap and create a window in canine fossa to remove the root: ✓ Raise a flap and create a window in canine fossa to remove the root

196. Closure of large chronic oro-antral fistula is best accomplished by:
- Caldwell-Luc procedure
- Palatal flap
- Buccal flap
- Palatal flap and Buccal flap: ✓ Palatal flap

197. Cyst commonly found between lateral upper incisor and canine is:
- Incisive canal cyst
- Ranula
- Globulomaxillary cyst
- Median palatal cyst: ✓ Globulomaxillary cyst

198. 198. Cyst formed over an erupting tooth:

- Dentigerous or eruption cyst
- Primordial cyst
- OKC
- Periodontal cyst: ✓ Dentigerous or eruption cyst

199. Creamy white suspension of keratin that appears like pus without an offensive smell is found in:

- Dentigerous cyst
- Primordial cyst
- OKC
- Periapical cyst: ✓ OKC

200. 200. The bone cysts that are less than 2 cm in diameter can be treated by:

- Enucleation
- Marsupialization
- No-treatment
- None of All: ✓ Enucleation

201. Radicular cyst is treated by:

- Excision
- Resection
- Curettage
- Radiotherapy: ✓ Curettage

202. Which of the following is not an advantage of marsupialization?

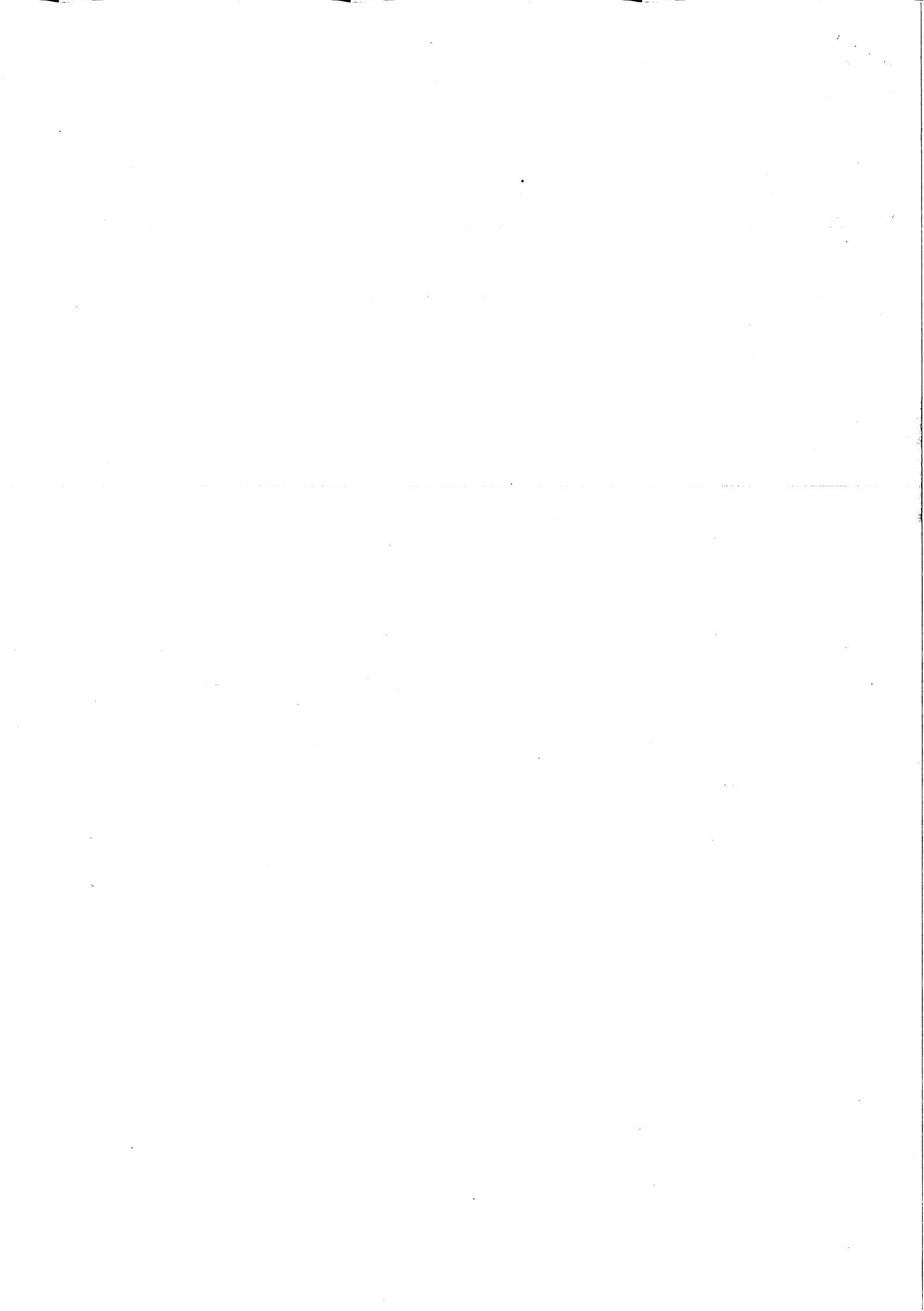
- Exposure of very little bone
- Preservation of vital structures
- Rapid healing
- Conserve surgical structures: ✓ Rapid healing

203. Expected surgical procedure most frequently indicated for odontogenic cyst is:

- Incision drainage
- Sclerosing solution
- Marsupialisation
- Enucleation: ✓ Enucleation

204. The most appropriate method to differentiate between a dentigerous cyst and an ameloblastoma is through:

- Radiographic examination
- Aspiration cytology
- Microscopic examination
- Clinical features: ✓ Microscopic examination



جامعة الأزهر - غزة

فلسطين



AL AZHAR
UNIVERSITY

GAZA - PALESTINE
DR. HAYDAR A. SHAFI
FACULTY OF DENTISTRY

Final Exam
Orthodontic I

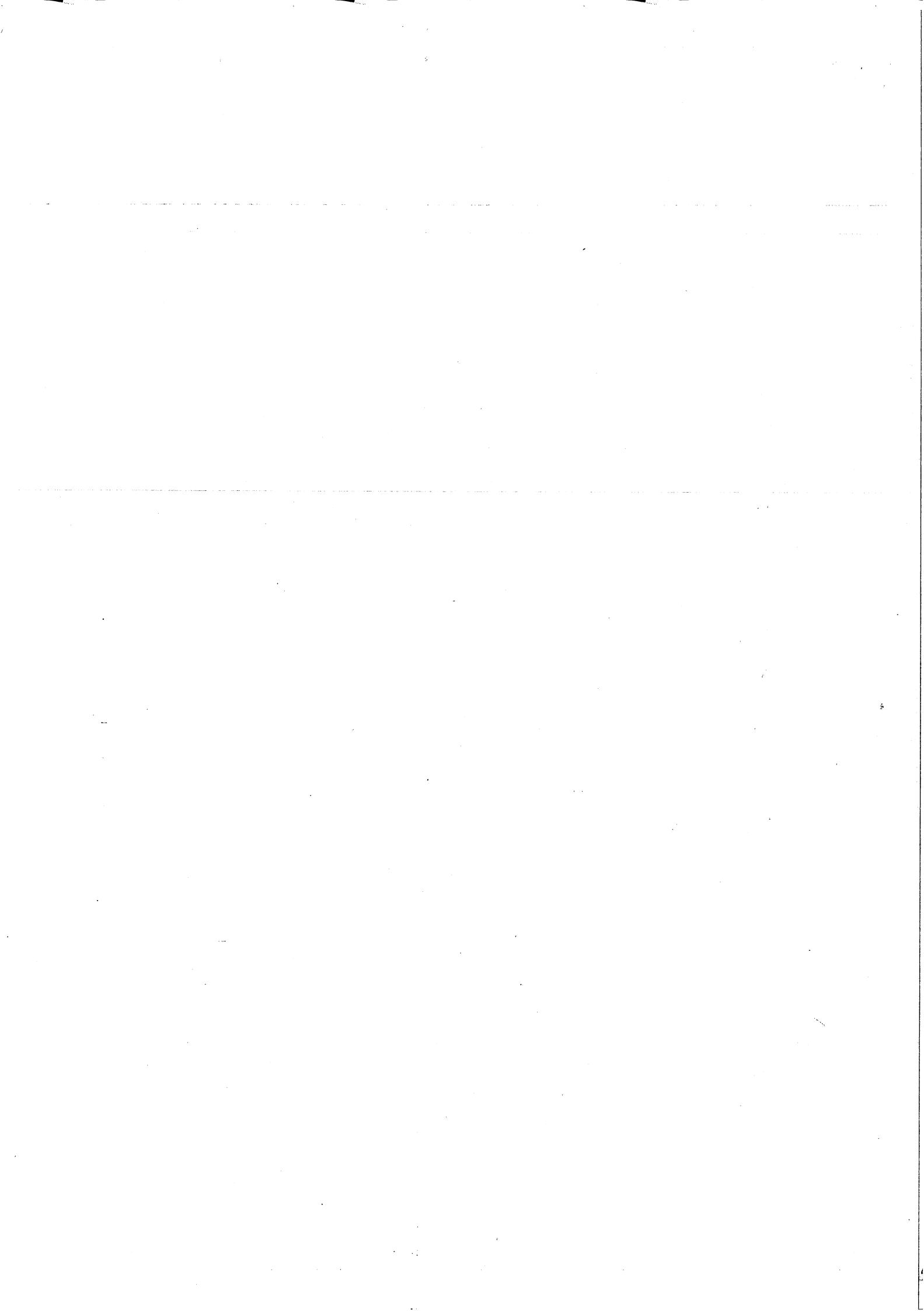
اسم الطالب:

كلية د. حيدر عبد الشافي
لطب الفم والأسنان

الرقم الجامعي:
ال المستوى:

Question I (True or False):

1. (X) One of the most important aims of orthodontic is to prevent abnormality of the masticatory organ, because when the abnormality established it is impossible to restore it.
2. () Normally pharyngeal apparatus structures disappear during development, but if they persist we will have congenital head and neck abnormalities.
3. (✓) The fetus face has taken on a human appearance by the end of the eighth week.
4. (X) In order to facilitate the fuse of palatine shelves in the midline, the tongue becomes relatively smaller and moves forward.
5. (X) Cleft lip and cleft palate are congenital abnormalities; they are not separate congenitally so they occur concomitantly.
6. (✓) The eyes of the child appear larger in proportion when compared to the adult.
7. (X) Chondrogenesis is the process of converting cartilage into bone.
8. (✓) The maturity indicator based on eruption age is less accurate than the dental age maturity indicator (based on tooth crown and root calcification).
9. (✓) All skull bones depend on growth by surface deposition for their growth even though they may have commenced to grow in cartilage.
10. (X) The newborn has his frontal sinus and has no frontal bone.
11. (X) In the neonate the mandible is made of three parts (two rami and mandible body).
12. () Eruption of the primary teeth: mandibular laterals erupt 6 months ahead of the maxillary laterals (10 months).
13. (X) Recent studies show that the spacing in primary teeth significantly after the primary dentition is completed.
14. (✓) The germs of all the permanent teeth are formed on the roots of their primary predecessors.
15. (✓) Usually un-spaced primary teeth tend to be associated with growth in inter-canine width.

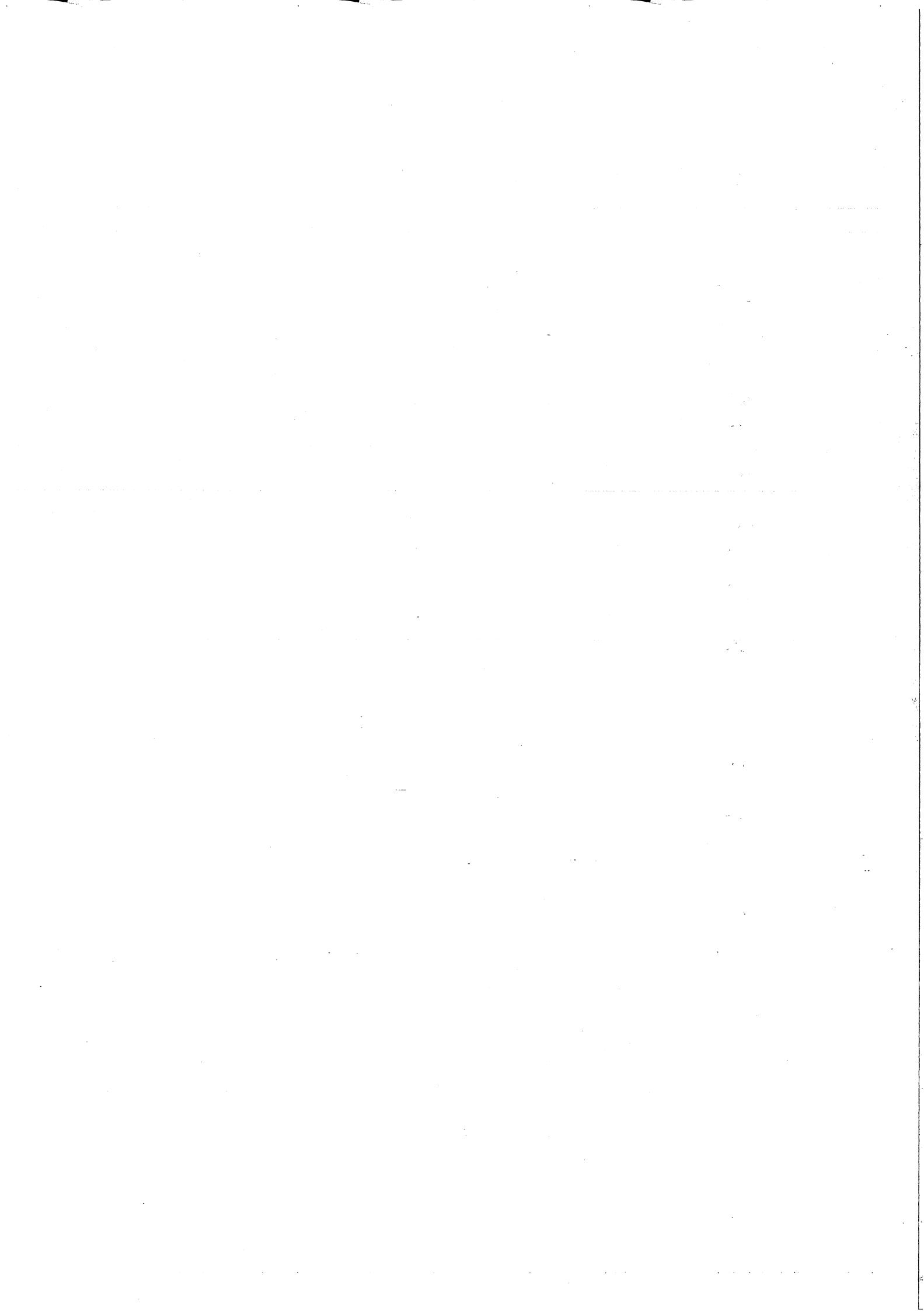


16. (✗) There are significant changes in the dental arch size after the eruption of the third molars.
17. (✓) In the mandible: there is decrease in the arch length and arch perimeter after 10 years.
18. (✓) If the dental arch is farther away from Frankfurt-horizontal plane, it is called abstraction.
19. (✓) Angle's Classification: in Class III the mandibular angle is often markedly obtuse and the body elongated.
20. (✗) Angle IV has two divisions (1 and 2); it does not have a subdivision.
21. (✗) Depending on the cast analysis: it is easy to distinguish between acquired and heredity protruded anterior teeth.
22. (✗) Labial frenum: Its insertion in the inner surface of the upper lip, but its origin changed by age.
23. (✗) There is high correlation between anodontia and the size of the jaw.
24. (✗) When abnormalities of the tongue size cause malocclusion, true macroglossia is 40% of cases.
25. (✓) Thumb sucking habit: if it stop at the end of 7 year, no harmful effect on dental occlusion.
26. (✗) Harmful effect of lip-sucking reaches its maximum when the space between the maxillary and mandibular incisors becomes equal to the thickness of the upper lip.
27. (✓) There is a high correlation between the position of lower lip with the position of the upper incisors.
28. (✗) If we diagnosis endogenous protracted tongue posture early (before 15 years), we will have good treatment results and good prognosis.
29. (✗) We can diagnosis premature loss of primary teeth according to population norms.
30. (✓) There is a high correlation between the life spans of primary tooth and the early loss of it.
31. (✗) Recent studies have shown: congenital syphilis cause typical form of malocclusion, 25% of cases have sever open bite. Syphilitic
32. (✓) Epilepsy does not cause direct malocclusion. mechanism

Question II (Multiple Choices):

33. Neural growth:

- A. Grows rapidly during prenatal and early postnatal life.
- B. Grows rapidly during pubertal growth spurt.
- C. Does not cease until 18 to 20 years.
- D. Slows a little in the last few weeks before birth.
- E. A & C.



34. Longitudinal studies:

- A. The most valuable data.
- B. Large sample size.
- C. long-term data collection.
- D. Sample of different ages.
- (E) A & C.**

35. Pre-normal occlusion:

- A. This relation exam when teeth separated from each other.
- B. The lower dental arch is in advance of the upper.
- C. The upper arch in a forward position.
- D. The condyles are in their normal position.
- (E) B & D.**

36. Class II (Division 1):

- A. The upper arch is usually broad and square.
- (B) V-shaped narrow upper arch.**
- C. The mandible is frequently of good size.
- D. A & B.
- E. B & C.

37. True prenormal Class III:

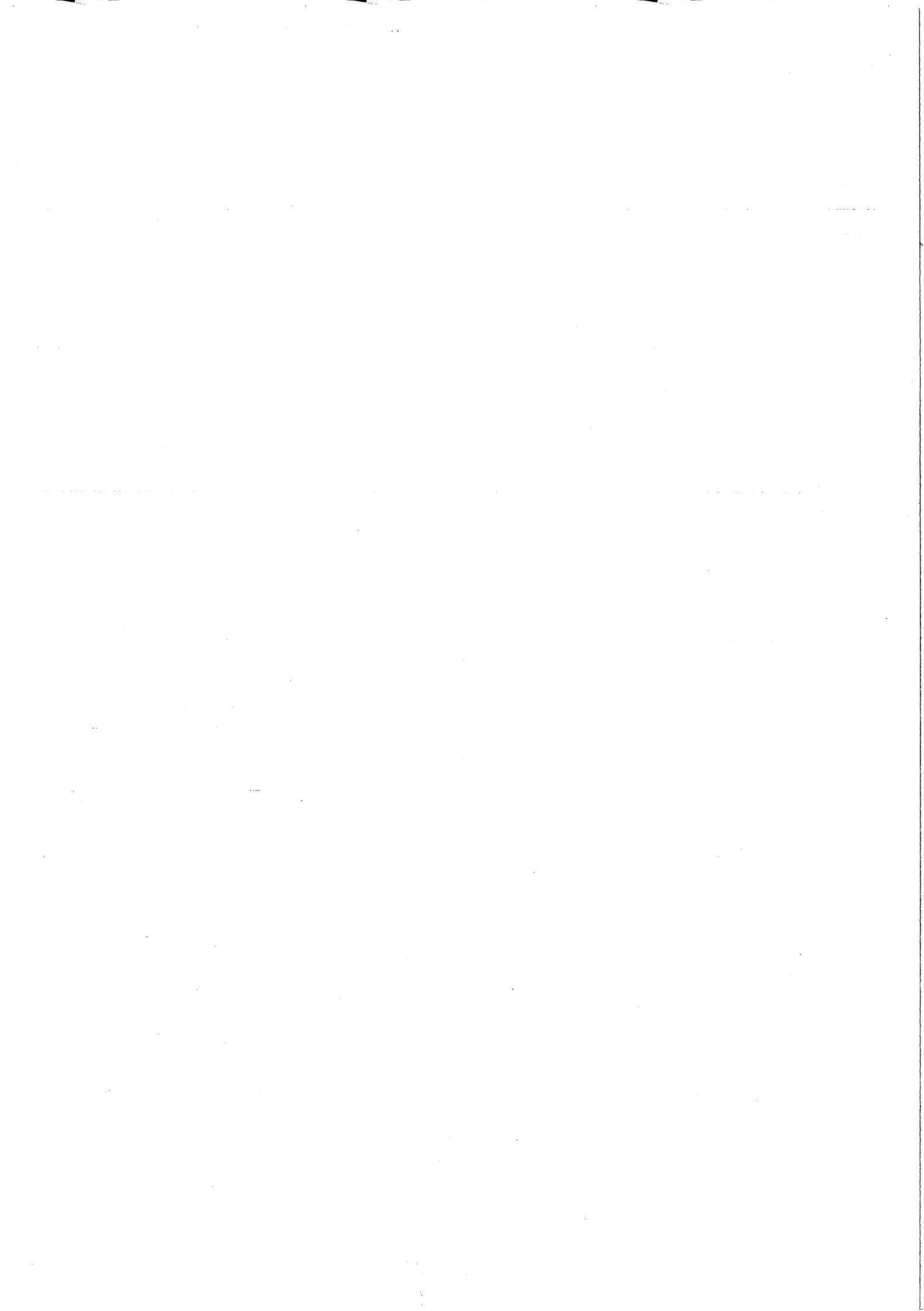
- A. The upper incisors inclined lingually.
- B. The lower incisors inclined labially.
- (C) In centric occlusion, the condyle is within the glenoid fossa.**
- D. The incisor overbite is large.
- E. A & B.

38. Simple tongue-thrust swallow:

- A. Teeth are apart.
- (B) Teeth in maximum contact.**
- C. No contraction of the mandibular elevators.
- D. Associated with tonsillitis.
- E. B & C.

39. Malocclusion of prolonged mouth breathing:

- A. Narrow V-shape maxilla.
- B. Protrusion of upper anterior teeth.
- C. Broad mandible.
- (D) All above.**
- E. A & C.



40. Indefinite lip line:

- A. Cause Class II division 1 malocclusion.
- B. Cause Class II division 2 malocclusion.
- C. Accompanied with severe maxillary deficiency.
- D. Proclination of upper incisors.
- E. A & D.

41. Intrauterine fetal molding:

- A. 10 % of fetus.
- B. Result in maxillary deficiency.
- C. Result in mandibular deficiency.
- D. Produce severe long-term malformation.
- E. A & B.

42. Cleido cranial dysostosis:

- A. Maxillary retrusion.
- B. Mandibular protrusion.
- C. Supernumerary teeth are present.
- D. All above.
- E. A & B.

43. Rickets:

- A. Wide maxillary arch.
- B. Delayed eruption of primary teeth.
- C. Premature loss of primary teeth.
- D. Tendency to Class II malocclusion.
- E. B & C.

44. We can see crowding in:

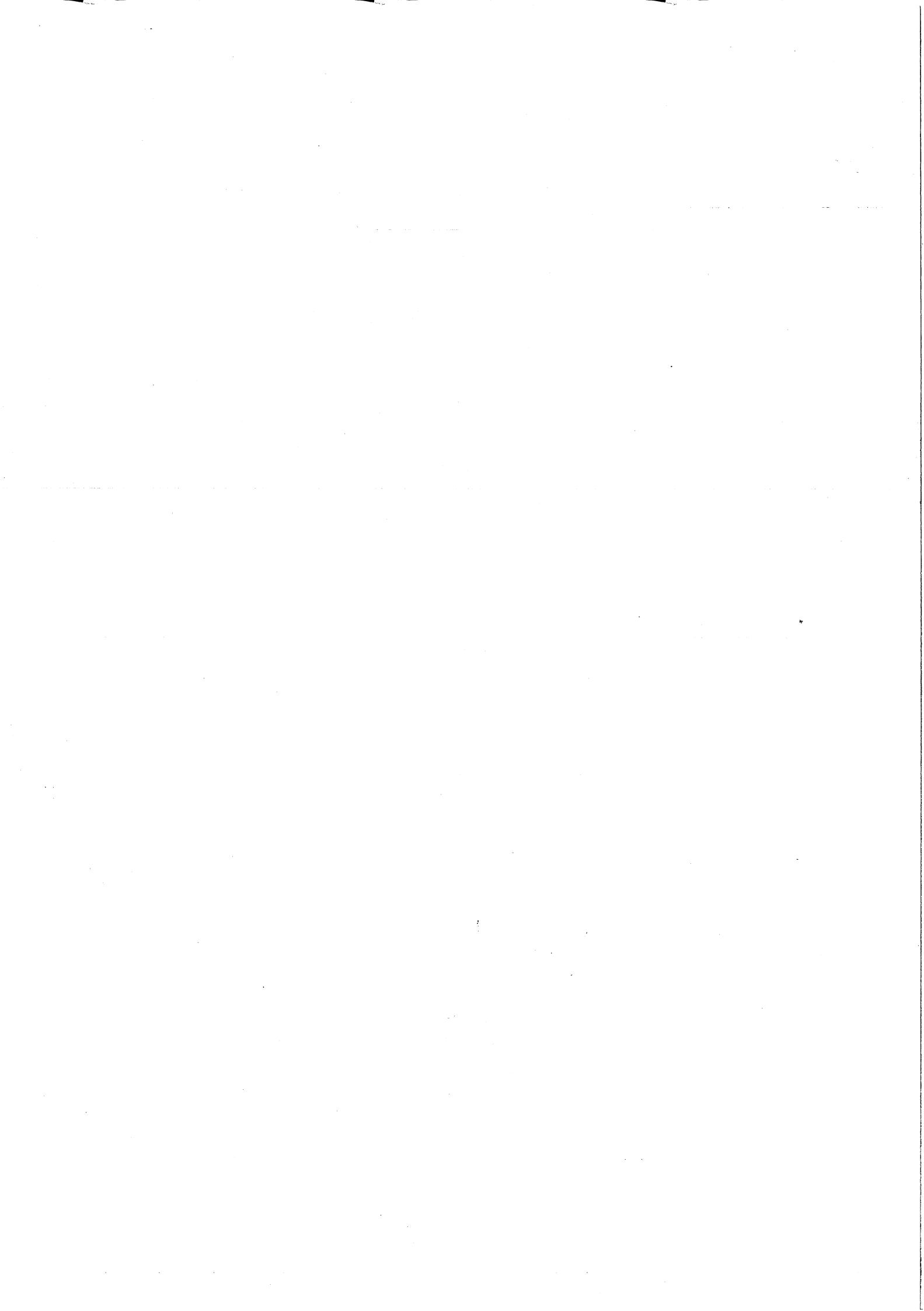
- A. Too great use of the filling material.
- B. Hypopituitarism. *→ jaws underdeveloped*
- C. Hyperpituitarism.
- D. A & B.
- E. A & C.

Question III (Complete the following sentences):

45. The period of the fetus from _____ until _____

46. The medial nasal prominences move toward each other and form the _____

47. Any change in bone morphology or spatial relationship by one of two processes: remodeling and



48. At a growing suture there are 5 layers of tissue.
49. The lower permanent first molar develops in the ascending ramus of the mandible with its occlusal surface tilted medially.
50. There is a Leeway space of 3.4 mm. in the mandible bilaterally while it is 1.8 in the maxilla bilaterally.
51. When the dental arch is nearer to the midsagittal plane, it is called contraction. If the dental arch is farther away, it is named disto-.
52. Class II accounts for about 25 % of all cases of malocclusion.
53. Angle's Classification: When the condition is present on one side only, it is referred to as Sidakisian.
54. Evolutionary changes: some studies believe that in the future, man will have neither third molar nor max. lateral.
55. Thumb sucking habit: anterior open bite is resulted from excessive eruption of posterior teeth. One mm elongation posteriorly opens the bite 2 mm anteriorly.
56. Hypertonic lip changes the axial inclination of upper incisors, resulting into II - 2 malocclusion.
57. The retracted tongue: seen in less than 10 % of the children.
58. Optimum calcium phosphorous ratio is 1:1 or 1:1.5.
59. Tooth development is under the action of the thyroid gland, while eruption of the teeth is influenced by thyroid gland.
60. Osteodentin and osteocementum could be formed in hyper-.

Question IV (Answer the following Short questions):

1. How can we overcome the relapse tendency after treatment of malocclusion accompanied with too large tongue?

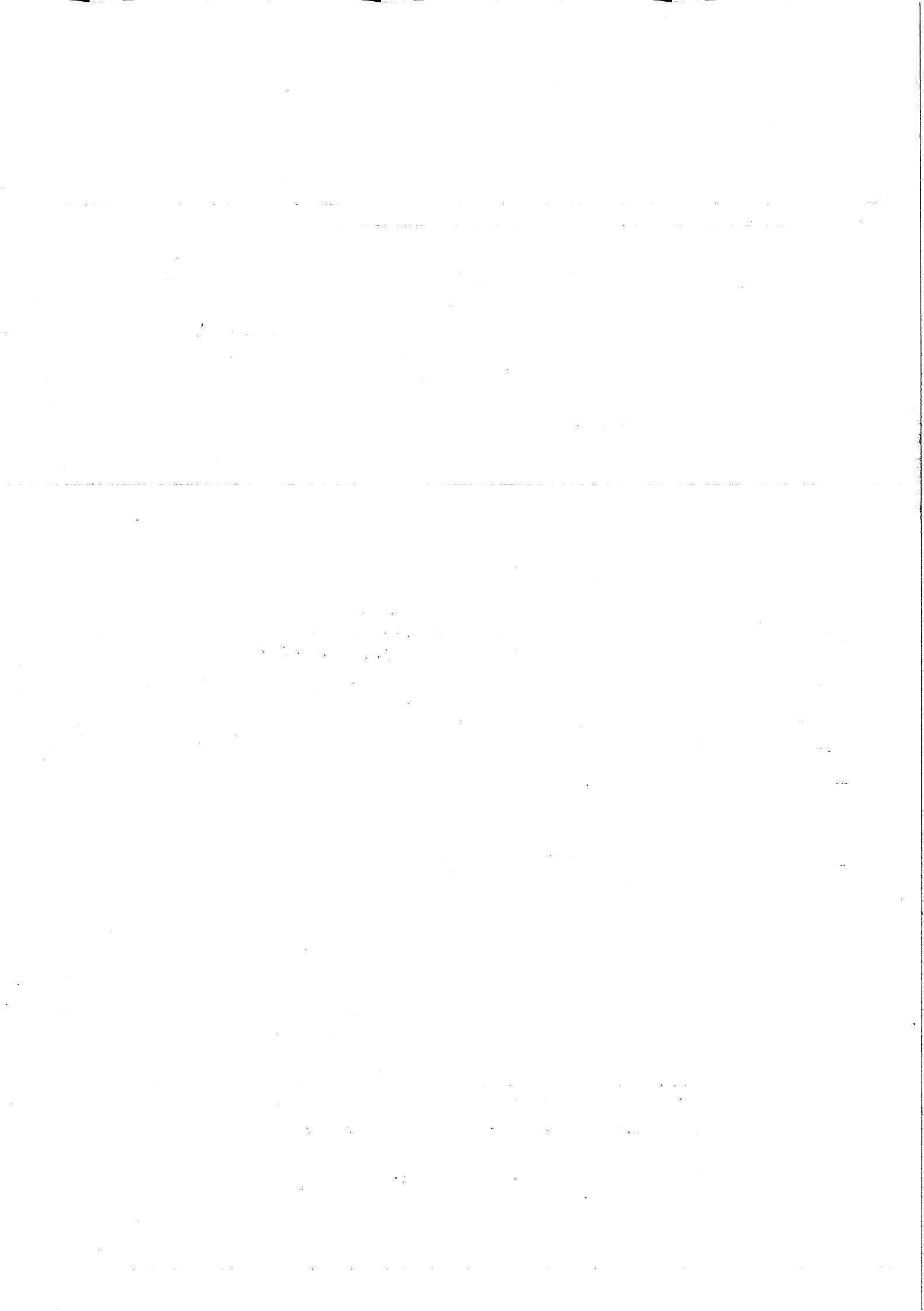
Slicing

2. What are the most common teeth to be ankylosed?

*Right > left
mand. E → mand. S → max.*

pr / max > permanent

2nd mol > 1st



3. Definition of osteomalacia.

4. Definition of Close-Bite.

5. What is the cause of late teen crowding?

With my best wishes
Dr. Hayzem El-Ayoubi



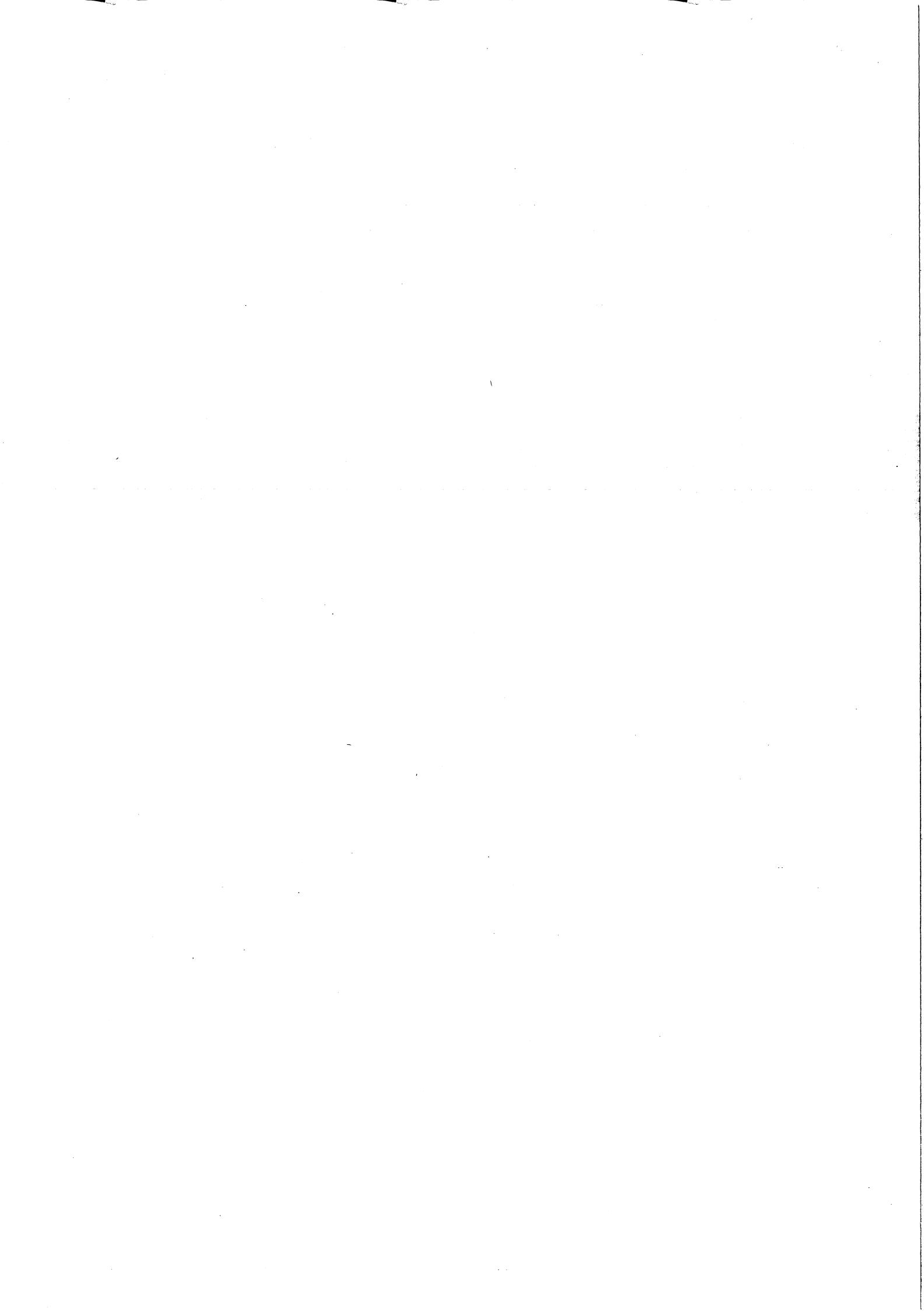
- **Indications for radiographic examination :**
History of pain or trauma , Familial history of dental anomalies , Postoperative evaluation of healing. (MCQ)
- Radio. Examination for Recall patient of Permanent Dentition at **18 to 36 month intervals** ×
- Growth and development radiographic examination consisting of a periapical/ occlusal or panoramic examination ×
- the use of topical anesthetic paste (ointment or cream) is better than the use of topical anesthetic spray
- The parents, if present in the operating room during anesthesia **should** try to help by encouraging words ×
- Allow time (**about 2 minutes**) to work before the injection is given
- The concealment of the syringe from the child is **not recommended** ×
- palatal injection should be avoided as it is impossible to give this without causing discomfort, the alternative is to wait for the buccal infiltration then intrapapillary injection
- the injection must be made slightly lower and more **anteriorly** than for the adult ×
- The time spent in placing the rubber dam is negligible and will invariably be made up and additional time realized
- It has been found through experience that many apprehensive or uncooperative children can often be controlled more easily with a rubber dam in place
- minute pulp exposure may be easily detected when the tooth is isolated
- The depth of pulpal floor should be established just beneath the dentinoenamel junction (0.5 mm) to avoid pulp exposure.
- Occlusal spot preparations are applicable in all of the primary molars ×
- Occlusal spot preparations can be in patients with high caries index. ×
- In Class II, the side walls of the occlusal step should converge from the pulpal wall to the occlusal surface
- in the area of the isthmus, this area should be made as wide as possible buccolingually (MCQ)
- optimum average width of the isthmus should be approximately one-third of the intercuspal dimension of the tooth ×
- The axio-pulpal line angle and the enamel of gingival seat should be beveled ×
- In primary teeth the enamel rods at the cervix slope occlusally.
- If extensive proximal lesions are present, Therefore, removal of one or both of the cusps, depending on the amount of carious involvement , covering with a chrome steel crown .
- The material of choice for this minimally invasive cavity design is an adhesive restorative material
- Amalgam restor. Is less affected by moisture than other tooth colored dental restorative materials

- Advantages of resin - modified glass ionomers: Less sensitive to water , releases fluoride , Better esthetics , Less tooth enamel needs to be removed
- RMGI used with When patient cooperation is good and low caries index ×
- Compomers is one of the most successful materials introduced for the treatment of primary teeth
- Compomers less time acid etch ×
- Stainless steel crown can be used as a temporary restoration for decayed permanent molars
- Pulp exposures caused by caries occur **more** frequently in primary than in permanent teeth because primary teeth have relatively large pulp chambers, more prominent pulp horns and thinner enamel and dentine.
- In primary molars with proximal cavities, pulp involvement occurs in about 85 % of those with broken marginal ridges .
- Spontaneous pain is a throbbing constant pain that may keep the patient awake at night , indicates advanced pulp damage .
- If the tooth is sensitive to percussion, this indicates' apical or pulpal inflammation or both. (MCQ)
- The most favorable condition for vital pulp therapy is the small pinpoint exposure surrounded by sound dentine
- Pulp exposure can be accurately detected from an xray film. ×
- Vitality tests give an indication of whether the pulp is vital and the extent of the pulp disease. ×
- If the pulp of the affected tooth responds at lower reading than normal this denotes **hyperemia or pulpitis**
- In the IPC first visit , the overhanging walls of enamel should be left as such because it provides retention for the dressing.
- In the IPC , the linear material is ZOE or fortified zinc oxideeugenol ×
- DPC should be limited to traumatic exposure .
- Direct pulp capping is not encouraging in primary dentition “pulp tissue ages early and less cellular elements are available”
- Pulpotomy means capping the radicular pulp tissues .
- Formocresol Pulpotomy is recommended for permanent teeth with carious exposure ×
- A chrome steel crown is the ideal restoration after pulpotomy
- In pulpectomy No widening of the root canal.
- Pulpectomy of the primary molars is often considered impracticable
- The canals are ribbon shaped (narrow mesiodistally and wide bucco-lingually)
- A sinus is expected to disappear following control of infection and a mobile tooth becomes firm as periapical bone reforms
-

- Case 1 | 8 years old child with swelling, sinus, draining fistula or chronic abscess associated with a deep carious lesion in permanent first molar (diagnosis , treatment , problems with incomplete root formation)

Non-vital pulp , appexification and pulpectomy , opened root end

- Case 2 | sever mobile primary first molar tooth cause sever alveolar bone loss (treatment, why)



Name: _____

Date: 17/12/2011

Oral Surgery Midterm Exam

- 1- All of the following are principles of adequate access except:
 - a- Incision and flap
 - b- Cutting bone
 - c- Anesthesia
 - d- Retraction
 - e- Cleaning the field of operation
- 2- All of the following are dental management considerations for patients with stable angina or past history of myocardial infarction except:
 - a- Morning appointments and short appointments.
 - b- Limited use of vasoconstrictor
 - c- Avoidance of epinephrine-impregnated retraction cord
 - d- Antibiotic prophylaxis is recommended
 - e- Adequate postoperative pain control
- 3- All of the following are arrhythmias associated with major perioperative risk except:
 - a- High-grade atrioventricular (AV) block
 - b- Symptomatic ventricular arrhythmias in the presence of underlying heart disease
 - c- Pathological Q waves on electrocardiogram (ECG) (markers of previous myocardial infarction)
 - d- Supraventricular arrhythmias with uncontrolled ventricular rate
- 4- Which of the following is dental procedure for which endocarditis prophylaxis is recommended for patients with highest risk?
 - a- Taking of dental radiographs
 - b- Placement of removable prosthodontic or orthodontic appliances
 - c- Making intraligamental anesthesia injection
 - d- Shedding of deciduous teeth and bleeding from trauma to the lips or oral mucosa
- 5-
 - A) Patients who are already taking penicillin or amoxicillin for eradication of an infection or for long-term secondary prevention of rheumatic fever, clindamycin, azithromycin, or clarithromycin should be selected for prophylaxis if treatment is immediately necessary.
 - B) An alternative approach is to wait for at least 10 days after completion of antibiotic therapy before administering prophylactic antibiotics. In this case, the usual regimen can be used.
 - a- Both A and B are true
 - b- A is true B is false
 - c- A is false B is true
 - d- Both A and B are false

6- Which of the following drugs is not contraindication for asthmatic patient?

- a- Aspirin
- b- Barbiturates
- c- Acetaminophen
- d- Erythromycin

7- Which of the following is false?

- a- The thyroid problem of primary significance in oral surgery is thyrotoxicosis, because it is the only thyroid disease in which an acute crisis can occur.
- b- Development of connective-tissue diseases like Sjögren's syndrome and systemic lupus erythematosus should be considered when evaluating a patient who has a history of Graves' disease.
- c- If severe hyperthyroidism is suspected from the history and inspection, the gland should palpated to ensure the diagnosis.
- d- The use of epinephrine and other sympathomimetics warrants special consideration when treating patients who have hyperthyroidism and are taking nonselective β -blockers.

8- Which of the following is false?

- a- The apex of a flap should never be wider than the base.
- b- An axial blood supply should be included in the base of the flap.
- c- The flap itself must be smaller than the bone deficit.
- d- The length of the flap should be no more than twice the width of the base.

9- Which of the following is false?

- a- Absorbable sutures may be used to hold wound edges in approximation temporarily, until they have healed sufficiently to withstand normal stress.
- b- Natural absorbable sutures are digested by body enzymes which attack and break down the suture strand.
- c- Compared to the enzymatic action of natural absorbables, hydrolyzation results in a greater degree of tissue reaction following implantation.
- d- If a patient has a fever, infection, or protein deficiency, the suture absorption process may accelerate, causing too rapid a decline in tensile strength.

10- Which of the following principles of suturing is false?

- a- The needle should pierce the tissue perpendicular to its surface.
- b- When one side of the incision line is fixed and other end free, the needle should be passed from the fixed to free end.
- c- The knot should not be placed over the wound margins.
- d- The needle should be grasped with the help of needle holders at approximately 3/4th of its distance from the tip of the needle.

11- Which of the following is false?

- a- Alginic acid is placed on the bleeding surface, creating a protective membrane that applies pressure to the capillaries and helps hold the blood clot in place.
 - b- Fibrin sponge promotes coagulation, creating a normal hemostatic blood clot, but it also functions as a plug over the edges of the bleeding area.
 - c- Oxidized cellulose is used topically as a hemostatic material, because it releases cytotoxic acid, which has significant affinity for hemoglobin.
 - d- Bone wax's hemostatic action is brought about through chemical obstruction of the osseous cavity, which contains the bleeding vessels.
- mechanism*

12- Which of the following instruments has a sharp, pointed end and a broader flat end. The pointed end is used to reflect dental papillae from between teeth, and the broad end is used for elevating the tissue from the bone?

- a- Farabeuf retractor
- b- Molt periosteal elevator
- c- Austin retractor
- d- Seldin periosteal elevator

13- The hemostat and needle holder have the following differences except:

- a- The short beaks of the hemostat are thinner and longer compared to those of the needle holder.
- b- On the needle holder, the internal surface of the short beaks is grooved and crosshatched while the short beaks of the hemostat have parallel grooves
- c- There is a curved type of hemostat while the needle holder always has straight type.
- d- The needle holder can release the needle with simple pressure, whereas the hemostat requires a special maneuver, because it does not have that gap in the last step of the locking handle.

14- Which of the following is false?

- a- Straight elevators are the most commonly used type of elevator for the removal of teeth and roots, in both the upper and lower jaws.
- b- The shank of the straight elevator is narrow and long and connects the handle to the blade.
- c- The convex surface of the blade is placed buccally, either perpendicular to the tooth or at an angle, and always in contact with the tooth to be luxated.
- d- The elevator is held in the dominant hand, and the index finger is placed along the blade almost reaching its end.

15- The most severe tissue reaction is seen with which type of suture material?

- a- plain catgut
- b- chromic catgut
- c- polyglycolic acid
- d- polyglactin 910

16- which scalpel below is universally used for oral surgical procedures?

- a- No. 2 blade
- b- No. 6 blade
- c- No. 10 blade
- d- No. 15 blade

17- Dead space in wound usually fills with:

- a- Pus
- b- Water
- c- Blood
- d- Tissue

18- All of the following are systemic contraindications to elective surgery except:

- a- Blood dyscrasias (i.e., hemophilia, leukemia)
- b- Controlled diabetes mellitus
- c- Addison's disease or any steroid deficiency
- d- Nephritis
- e- Cardiac disease

19- Which of the following can be used for removing bone?

- a- Rongeur forceps
- b- Chisel and mallet
- c- Bone file
- d- Bur and handpiece
- e- All of the above

20- Before dental treatment, prophylactic antibiotic coverage is indicated for patients with each of the following conditions except:

- a- Previous coronary artery bypass graft surgery
- b- Rheumatic heart disease
- c- Prosthetic aortic valve
- d- Total joint prosthesis
- e- Mitral valve prolapse with valvular regurgitation

21- Which size suture listed below has the least strength and smallest diameter?

- a- 9-0
- b- 3-0
- c- 2
- d- 5

22- Management of an acute asthmatic episode occurring during oral surgery includes all of the following except:

- a- Terminate all dental treatment
- b- Patient should administer their own bronchodilator using an inhaler
- c- Administer nitroglycerin
- d- Administer oxygen
- e- Monitor vital signs

23- Which of the following are important points in the management of diabetic patient?

- a- Schedule an early morning appointment and avoid lengthy appointments
- b- Consult physician if any questions concerning modification of insulin regimen arise
- c- Watch for signs of hypoglycemia
- d- Treat infections aggressively
- e- All of the above.

24- Chronic bronchitis is primarily a disease of:

- a- Alcoholics
- b- Cigarette smokers
- c- Miners
- d- Patients with a family of allergy

25- Diabetes Mellitus Type 2 is associated with all of the following characteristics, except:

- a- Normal or increased insulin synthesis
- b- Onset in adulthood
- c- Autoimmune origin
- d- Associated with obesity
- e- Rare ketoacidosis

26- A serious condition in which the quantity of blood pumped by the heart each minute (cardiac output) is insufficient to meet the body's normal requirements for oxygen and nutrients is called :

- a- Heart block
- b- Ventricular tachycardia
- c- Congestive heart failure
- d- Atrial fibrillation

27- The unpleasant sensation of difficulty in breathing is called:

- a- Hypercapnea
- b- Dyspnea
- c- Hypocapnea
- d- apnea

28- chronic obstructive pulmonary disease (COPD) is a group of disorders characterized by airflow obstruction during respiration. Which one of those disorders listed below is marked by dyspnea and wheezing expiration caused by episodic narrowing of the airways?

- a- Bronchial asthma
- b- Chronic bronchitis
- c- Emphysema
- d- Bronchiectasis

29- A 52-year-old woman requests removal of a painful mandibular second molar. She tells you that she has not rested for two days and nights because of the pain. Her medical history is unremarkable, except that she takes 20 mg of prednisone daily for erythema multiforme. How do you treat this patient?

- a- Have patient discontinue the prednisone for two days prior to the extraction
- b- Give steroid supplementation and remove the tooth with local anesthesia and sedation
- c- Instruct the patient to take 3 grams of amoxicillin one hour prior to extraction
- d- No special treatment is necessary prior to extraction

30- A person who has been on suppressive doses of steroids will:

- a- Never regain full adrenal cortical function
- b- Take as much as a year to regain full adrenal cortical function
- c- Take as little as a week to regain full adrenal cortical function
- d- Take usually a couple of days to regain full adrenal cortical function

31- How much hydrocortisone is secreted by the adrenal cortex daily?

- a- About 1 mg
- b- About 100 mg
- c- About 20 mg
- d- About 200 mg

32- The correct position for ending a vertical releasing incision is :

- a- Mid-buccal of the tooth
- b- At a line angle of the tooth
- c- Mid-lingual of the tooth
- d- Any of the above

33- All of the following are resorbable sutures except:

- a- Plain gut
- b- Chromic gut
- c- Nylon
- d- Vicryl
- e- Dexon

34- Thrombocytopenia that is less than _____ is an absolute contraindication to elective surgical procedures because of the possibility of significant bleeding.

- a- 50,000 / mm³
- b- 57,000 / mm³
- c- 100,000 / mm³
- d- 125,000 / mm³

35- Hemophilia A is characterized by a deficiency of :

- a- Clotting factor IX
- b- Clotting factor VIII
- c- Clotting factor XI
- d- Von Willebrand factor

36- Which statement is true concerning Type 2 diabetes?

- a- Type 2 Diabetes is less common than Type 1 Diabetes
- b- Type 2 Diabetes usually develops in young persons
- c- The typical Type 2 diabetes patient is skinny although there are exceptions
- d- Type 2 Diabetes is associated with insulin resistance rather than the lack of insulin like seen in Type 1 Diabetes

37- A fasting blood glucose level above _____ or a non-fasting glucose level greater than _____ is indicative of diabetes.

- a- 100 mg\dl, 140 mg\dl
- b- 80 mg\dl, 100 mg\dl
- c- 50 mg\dl, 75 mg\dl
- d- 140 mg\dl, 200 mg\dl

38- All of the following are ways of eliminating dead space except:

- a- Close the wound in layers to minimize the postoperative void
- b- Apply pressure dressings
- c- Use drains to remove any bleeding that accumulates
- d- Allow the void to fill with blood so that a bold clot will form

39- The preferred test to assess the level of anticoagulant therapy in a patient taking warfarin is:

- a- Prothrombin time (PT)
- b- Ivy bleeding time
- c- International normalized ratio (INR)
- d- Partial thromboplastin time (PTT)

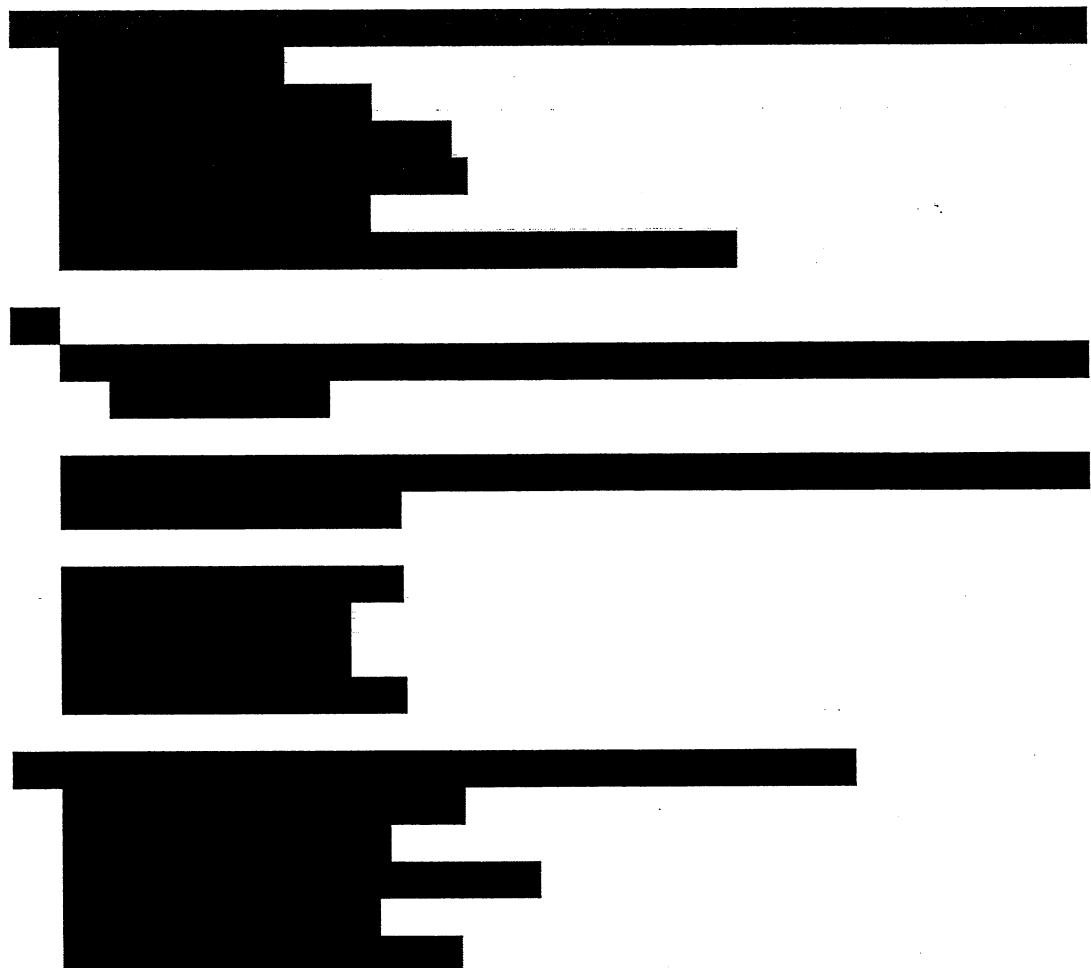
40- All of the following are true statements concerning the principles of suturing technique except:

- a- The needle should be perpendicular when it enters the tissue
- b- Sutures should be placed from mobile tissue to thick tissue
- c- Sutures should be placed from thin tissue to thick tissue
- d- Tissues should be closed under tension
- e- Sutures should be 2-3 mm apart

41- Which of the following is not contraindication for teeth extraction?

- a- Extraction of teeth in recently irradiated patients
- b- Teeth that are located within an area of malignant tumor
- c- Patients receiving bisphosphonates
- d- Mild pericoronitis around an impacted mandibular third molar





Name: _____

Date: 02/12/2012

Oral Surgery Midterm Exam

- 1- All of the following are principles of adequate access except:
 - a- Incision and flap
 - b- Cutting bone
 - c- Anesthesia
 - d- Retraction
 - e- Cleaning the field of operation

- 2- All of the following are stress-reduction measures except:
 - a- Good communication
 - b- Oral sedation
 - c- Excellent local anesthesia
 - d- Sublingual nitroglycerin
 - e- Intraoperative N2O/O2

- 3- A patient requires a lower first permanent molar tooth to be extracted. Their medical history reveals that they have idiopathic thrombocytopenic purpura. Which of the following should be carried out to minimize the risk of complications associated with the procedure?
 - a- The patient should be given desmopressin prior to the extraction.
 - b- The patient should have their factor IX levels measured and be given the appropriate amount of factor IX before the extraction.
 - c- The patient should have a full blood count and be given platelets if necessary.
 - d- The patient should be given intramuscular tranexamic acid prior to the extraction.

- 4- Which of the following statements is false regarding the various types of diabetes mellitus?
 - a- Type 2 diabetes is often associated with obesity
 - b- The onset of type 1 diabetes is usually in younger patients (less than 30 years)
 - c- Type 2 is commonly caused by destruction of the pancreatic islet cells leading to insulin insufficiency
 - d- Patients with type 1 diabetes are more likely to get ketosis than those with type 2 diabetes.

- 5- Which of the following conditions might not make a patient susceptible to infective endocarditis following dental treatment?
 - a- Previous history of rheumatic fever
 - b- Congenital cardiac lesion
 - c- Diagnosis of atrial fibrillation
 - d- Heart murmur

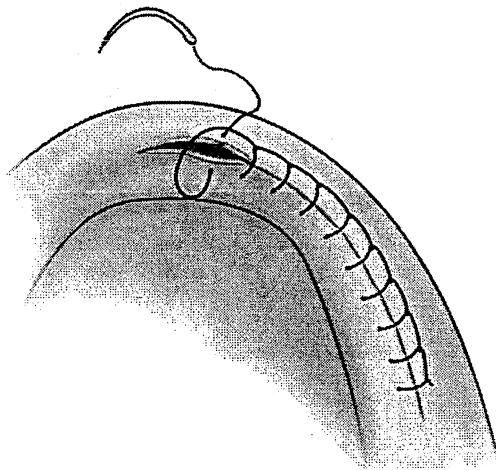
- 6- A patient complains of severe chest pain while in your dental chair. Appropriate management includes:
- Lie the patient flat
 - Lie the patient in the recovery position
 - Administer sublingual glyceryl trinitrate
 - Administer Glucogel buccally
- 7- Which of the following is true? Pregnant women:
- Rarely get gingivitis
 - May become hypotensive when supine ↗
 - Can take aspirin safely
 - Must always be given prilocaine and felypressin as a local anaesthetic.
- 8- Patients with which of the following conditions may not be on long term anticoagulants?
- Atrial fibrillation
 - Previous deep vein thrombosis
 - Prosthetic heart valves
 - Ventricular fibrillation
- 9- Which of the following is false?
- The apex of a flap should never be wider than the base.
 - An axial blood supply should be included in the base of the flap.
 - The flap itself must be smaller than the bone deficit.
 - The length of the flap should be no more than twice the width of the base.
- 10- Which of the following flap is the result of a curved incision, which begins just beneath the vestibular fold and has a bow-shaped course?
- The envelope flap
 - The trapezoidal flap
 - The triangular flap
 - The semilunar flap
- 11- Which of the following is false?
- Absorbable sutures may be used to hold wound edges in approximation temporarily, until they have healed sufficiently to withstand normal stress.
 - Natural absorbable sutures are digested by body enzymes which attack and break down the suture strand.
 - Compared to the enzymatic action of natural absorbables, hydrolyzation results in a lesser degree of tissue reaction following implantation.
 - If the sutures become wet or moist during handling, prior to being implanted in tissue, the absorption process may begin later *Kast*
- 12- Which of the following principles of suturing is false?
- The needle should pierce the tissue perpendicular to its surface.
 - When one side of the incision line is fixed and other end free, the needle should be passed from the free to fixed end.
 - When one side of the tissue is thinner than the other side, then the needle should pass from the thicker to the thinner side.

- d- The suture should not be tied so tightly that it results in blanching of the tissues.

13- Which of the following is false?

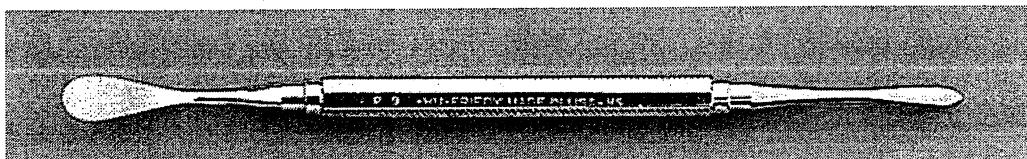
- a- Alginic acid is placed on the bleeding surface, creating a protective membrane that applies pressure to the capillaries and helps hold the blood clot in place.
- b- Fibrin sponge promotes coagulation, creating a normal hemostatic blood clot, but it also functions as a plug over the edges of the bleeding area.
- c- Oxidized cellulose is used topically as a hemostatic material, because it releases cytotoxic acid, which has significant affinity for hemoglobin.
- d- Bone wax's hemostatic action is brought about through chemical obstruction of the osseous cavity, which contains the bleeding vessels.

14- What is the type of the suture that shows below?



- a- Vertical mattress suture
- b- Continuous suture
- c- Continuous locking suture
- d- Horizontal mattress suture

15- What is the instrument that shows below?



- a- Farabeuf retractor
- b- Molt periosteal elevator
- c- Austin retractor
- d- Seldin periosteal elevator

16- The hemostat and needle holder have the following differences except:

- a- The short beaks of the hemostat are thinner and longer compared to those of the needle holder.
- b- On the needle holder, the internal surface of the short beaks is grooved and crosshatched while the short beaks of the hemostat have parallel grooves
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- b- The shank of the straight elevator is narrow and long and connects the handle to the blade.
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- d- The elevator is held in the dominant hand, and the index finger is placed along the blade almost reaching its end.

18- The most severe tissue reaction is seen with which type of suture material?

- a- plain catgut
- b- chromic catgut
- c- polyglycolic acid
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19- Which scalpel below is universally used for oral surgical procedures?

- a- No. 2 blade
- b- No. 6 blade
- c- No. 10 blade
- d- No. 15 blade

20- Dead space in wound usually fills with:

- a- Pus
- b- Water
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21- Which of the following can be used for removing bone?

- a- Rongeur forceps
- b- Chisel and mallet
- c- Bone file
- d- Bur and handpiece
- e- All of the above

22- Before dental treatment, prophylactic antibiotic coverage is indicated for patients with each of the following conditions except:

- a- Previous coronary artery bypass graft surgery → History of AP, MI
- b- Rheumatic heart disease
- c- Prosthetic aortic valve
- d- Total joint prosthesis
- e- Mitral valve prolapse with valvular regurgitation

23- A 52-year-old woman requests removal of a painful mandibular second molar. She tells you that she has not rested for two days and nights because of the pain. Her medical history is unremarkable, except that she takes 20 mg of prednisone daily for erythema multiforme. How do you treat this patient?

- a- Have patient discontinue the prednisone for two days prior to the extraction
- b- Give steroid supplementation and remove the tooth with local anesthesia and sedation
- c- Instruct the patient to take 3 grams of amoxicillin one hour prior to extraction
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25- Thrombocytopenia that is less than _____ is an absolute contraindication to elective surgical procedures because of the possibility of significant bleeding.

- a- 50,000 / mm³
- b- 57,000 / mm³
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26- Which of the following is not contraindication for teeth extraction?

- a- Extraction of teeth in recently irradiated patients
- b- Teeth that are located within an area of malignant tumor
- c- Patients receiving bisphosphonates
- d- Mild pericoronitis around an impacted mandibular third molar

27- In mandibular teeth extraction all of the following structures must be evaluated except:

- a- The size of the roots
- b- The inferior alveolar canal
- c- Floor of the maxillary sinus
- d- The mental foramen
- e- The number of roots on the tooth to be extracted

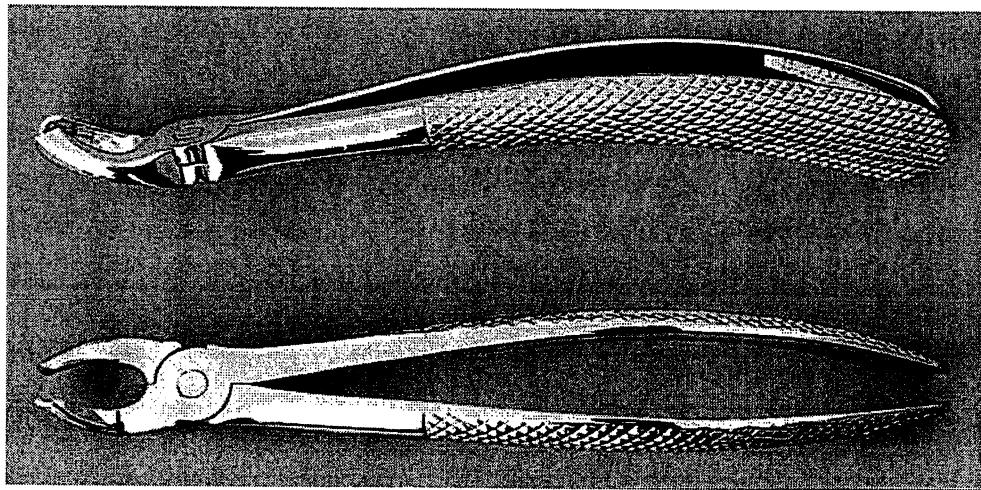
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- A) Bone that is more radiolucent is likely to be less dense, which makes the extraction easier.
- B) If there was endodontic therapy many years before the extraction process, the extraction will be easy
- a- Both A and B are true
- b- A is true B is false
- c- A is false B is true
- d- Both A and B are false

29- Which of the following is not indication for teeth extraction?

- a- Severe periodontal disease.
- b- Supernumerary teeth.
- c- Teeth associated with pathology.
- d- Severe pericoronitis.
- e- Prebisphosphonate therapy

30- What is the instrument that shows below?

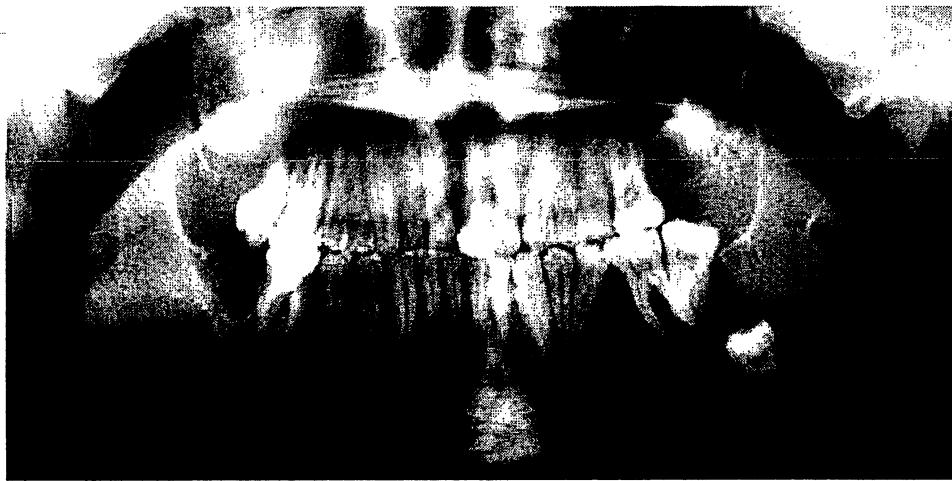


- a- Mandibular right molar forceps
- b- Maxillary right molar forceps
- c- Mandibular left molar forceps
- d- Maxillary left molar forceps

- 1- The most severe tissue reaction is seen with which type of suture material?
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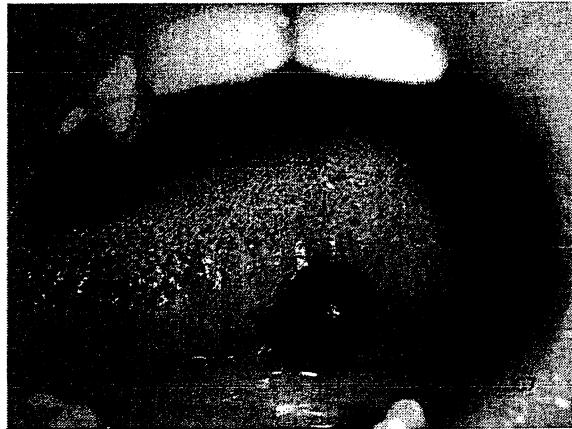
d- Mild pericoronitis around an impacted mandibular third molar

- 9- A patient with dry socket develops a severe dull throbbing pain
 a- Two to three hours following a tooth extraction
 b- One day following a tooth extraction
 c- Two to four days following a tooth extraction
 d- Immediately following a tooth extraction
- 10- Extraction of a maxillary second molar has resulted in perforation of maxillary antrum 0.5 cm in diameter. An acceptable procedure would be
 a- Caldwell-Luc procedure.
 b- Creation of nasal antrostomy window for proper aeration and drainage.
 c- Smoothing bone margins of the socket and placement of sutures across the socket.
 d- Insertion of iodoform gauze packing into the socket to allow healing by second intention.
- 11- Which of the following instrument is used to tease the very small root end of a tooth?
 a- Crane pick
 b- Barry's
 c- Heidbrink
 d- Cryer
 e- Seldin
- 12- Which of the following is not indication for use of antibiotics in dentofacial infections?
 a- Rapidly progressive swelling
 b- Diffuse swelling
 c- Dry socket
 d- Osteomyelitis
- 13- A 35-year-old man presents with painless expansion of the buccal aspect of the mandible in the third molar area. A dental panoramic radiograph is shown below. What is the most likely diagnosis?



- a- Radicular cyst
b- Residual cyst
c- Keratocyst
d- Follicular cyst

14- A 36-year-old man was concerned about the sudden appearance of blood-filled blisters, which were occurring with increasing frequency on the lateral of the tongue. As it is shown in the picture below. Some reached to 2 cm across and were painful until they burst. He was medically fit and well and his asthma, present since childhood, was well controlled. What is the most likely diagnosis?



- a- Bullous lichen planus
- b- Mucous membrane pemphigoid
- c- Angina bullosa haemorrhagica
- d- Malignant melanoma

15- An asymptomatic multilocular radiolucency of the body of the mandible in a 35 years old man could be all of the following except:

- a- Ameloblastoma
- b- Calcifying epithelial odontogenic tumor
- c- Odontogenic keratocyst
- d- Complex odontoma

16- A 43 year old man presents with an asymptomatic anterior palatal swelling. A radiograph shows a 1x1 cm lucency and divergence of roots of upper central teeth. All teeth in the area are vital. This is most likely a(n):

- a- Periapical granuloma
- b- Aneurismal bone cyst
- c- Nasopalatine canal cyst
- d- Dermoid cyst

17- The major mechanisms for the destruction of osseointegration (loss of bone around dental implant) are which of the following?

- a- Related to surgical technique
- b- Similar to those of natural teeth
- c- Related to implant material
- d- Related to nutrition

18- Which of the following surgical procedures would be considered the least invasive treatment for TMJ complaints?

- a- Splint therapy
- b- Arthrocentesis
- c- Arthroscopy
- d- Disc removal

19- Which of the following is not a classification of mandible fractures?

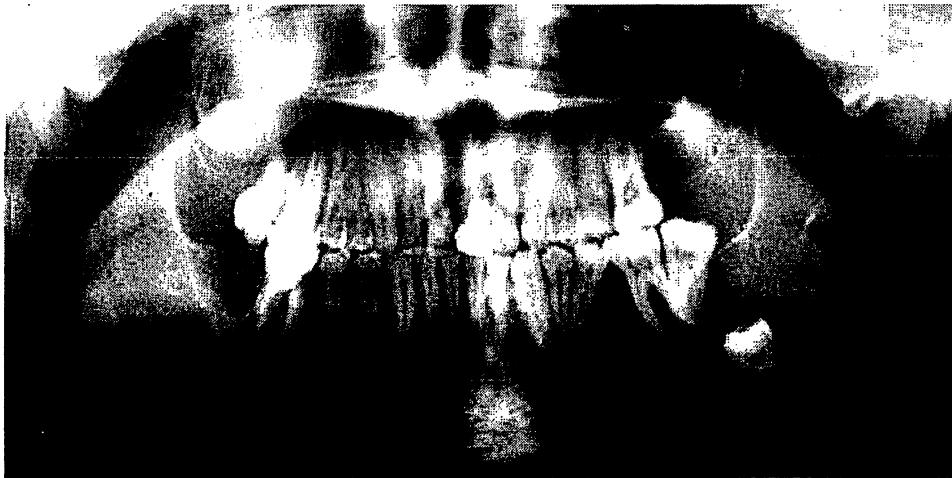
- a- Anatomic location
- b- Description of the condition of the bone fragments at the fracture site
- c- Angulation of the fracture and muscle pull
- d- LeFort level

- 20- In patient who have a LeFort II fracture, a common finding is paresthesia over distribution of the:
- a- Infraorbital nerve.
 - b- Inferior alveolar nerve.
 - c- Mylohyoid nerve.
 - d- Hypoglossal nerve
- 21- Condylar neck fracture is associated with
- a- Deviation of jaw opposite the injured side on mouth opening
 - b- Deviation of jaw toward the injured side on mouth opening
 - c- Anesthesia of lower lip
 - d- Anesthesia of infra orbital nerve area
- 22- Craniofacial dysjunction is seen in
- a- LeFort I fractures
 - b- Fracture angle of mandible
 - c- LeFort II fractures
 - d- LeFort III fractures
- 23- External fixation is indicated in fracture mandible in
- a- Angle of mandible fractures
 - b- Condylar fractures
 - c- Fracture mandible with extensive tissue loss
 - d- Mental fracture
- 24- Gillies approach is used to reduce
- a- Fracture Condylar process
 - b- Fracture mentum of mandible
 - c- Fracture maxilla
 - d- Fracture zygoma
- 25- Fracture mandible running from lingual to buccal direction is said to be:
- a- Horizontally favorable
 - b- Horizontally unfavorable
 - c- vertically favorable
 - d- vertically unfavorable
- 26- in intermaxillary fixation
- a- Wires are used to bind the fractured fragments
 - b- Wiring the teeth together immobilizing the jaws
 - c- Plates are used to fix the fractured fragment
 - d- Intramedullary nails are used to fix the fracture

- 1- The most severe tissue reaction is seen with which type of suture material?
- a- plain catgut
 - b- chromic catgut
 - c- polyglycolic acid
 - d- polyglactin 910
- 2- Which of the following drugs is not contraindication for asthmatic patient?
- a- Aspirin
 - b- Barbiturates
 - c- Acetaminophen
 - d- Erythromycin
- 3- Which of the following is false?
- a- The apex of a flap should never be wider than the base.
 - b- An axial blood supply should be included in the base of the flap.
 - c- The flap itself must be smaller than the bone deficit.
 - d- The length of the flap should be no more than twice the width of the base.
- 4- Which scalpel below is universally used for oral surgical procedures?
- a- No. 2 blade
 - b- No. 6 blade
 - c- No. 10 blade
 - d- No. 15 blade
- 5- Diabetes Mellitus Type 2 is associated with all of the following characteristics, except:
- a- Normal or increased insulin synthesis
 - b- Onset in adulthood
 - c- Autoimmune origin
 - d- Associated with obesity
 - e- Rare ketoacidosis
- 6- A 52-year-old woman requests removal of a painful mandibular second molar. She tells you that she has not rested for two days and nights because of the pain. Her medical history is unremarkable, except that she takes 20 mg of prednisone daily for erythema multiforme. How do you treat this patient?
- a- Have patient discontinue the prednisone for two days prior to the extraction
 - b- Give steroid supplementation and remove the tooth with local anesthesia and sedation
 - c- Instruct the patient to take 3 grams of amoxicillin one hour prior to extraction
 - d- No special treatment is necessary prior to extraction
- 7- Thrombocytopenia that is less than _____ is an absolute contraindication to elective surgical procedures because of the possibility of significant bleeding.
- a- 50,000 \ mm³
 - b- 57,000 \ mm³
 - c- 100,000 \ mm³
 - d- 125,000 \ mm³
- 8- Which of the following is not contraindication for teeth extraction?
- a- Extraction of teeth in recently irradiated patients
 - b- Teeth that are located within an area of malignant tumor
 - c- Patients receiving bisphosphonates

d- Mild pericoronitis around an impacted mandibular third molar

- 9- A patient with dry socket develops a severe dull throbbing pain
- a- Two to three hours following a tooth extraction
 - b- One day following a tooth extraction
 - c- Two to four days following a tooth extraction
 - d- Immediately following a tooth extraction
- 10- Extraction of a maxillary second molar has resulted in perforation of maxillary antrum 0.5 cm in diameter. An acceptable procedure would be
- a- Caldwell-Luc procedure.
 - b- Creation of nasal antrostomy window for proper aeration and drainage.
 - c- Smoothing bone margins of the socket and placement of sutures across the socket.
 - d- Insertion of iodoform gauze packing into the socket to allow healing by second intention.
- 11- Which of the following instrument is used to tease the very small root end of a tooth?
- a- Crane pick
 - b- Barry's
 - c- Heidbrink
 - d- Cryer
 - e- Seldin
- 12- Which of the following is not indication for use of antibiotics in dentofacial infections?
- a- Rapidly progressive swelling
 - b- Diffuse swelling
 - c- Dry socket
 - d- Osteomyelitis
- 13- A 35-year-old man presents with painless expansion of the buccal aspect of the mandible in the third molar area. A dental panoramic radiograph is shown below. What is the most likely diagnosis?



- a- Radicular cyst
- b- Residual cyst
- c- Keratocyst
- d- Follicular cyst

14- A 36-year-old man was concerned about the sudden appearance of blood-filled blisters, which were occurring with increasing frequency on the lateral of the tongue. As it is shown in the picture below. Some reached to 2 cm across and were painful until they burst. He was medically fit and well and his asthma, present since childhood, was well controlled. What is the most likely diagnosis?



- a- Bullous lichen planus
- b- Mucous membrane pemphigoid
- c- Angina bullosa haemorrhagica
- d- Malignant melanoma

15- An asymptomatic multilocular radiolucency of the body of the mandible in a 35 years old man could be all of the following except:

- a- Ameloblastoma
- b- Calcifying epithelial odontogenic tumor
- c- Odontogenic keratocyst
- d- Complex odontoma

16- A 43 year old man presents with an asymptomatic anterior palatal swelling. A radiograph shows a 1x1 cm lucency and divergence of roots of upper central teeth. All teeth in the area are vital. This is most likely a(n):

- a- Periapical granuloma
- b- Aneurismal bone cyst
- c- Nasopalatine canal cyst
- d- Dermoid cyst

17- The major mechanisms for the destruction of osseointegration (loss of bone around dental implant) are which of the following?

- a- Related to surgical technique
- b- Similar to those of natural teeth
- c- Related to implant material
- d- Related to nutrition

18- Which of the following surgical procedures would be considered the least invasive treatment for TMJ complaints?

- a- Splint therapy
- b- Arthrocentesis
- c- Arthroscopy
- d- Disc removal

19- Which of the following is not a classification of mandible fractures?

- a- Anatomic location
- b- Description of the condition of the bone fragments at the fracture site
- c- Angulation of the fracture and muscle pull
- d- LeFort level

- 20- In patient who have a LeFort II fracture, a common finding is paresthesia over distribution of the:
- a- Infraorbital nerve.
 - b- Inferior alveolar nerve.
 - c- Mylohyoid nerve.
 - d- Hypoglossal nerve
- 21- Condylar neck fracture is associated with
- a- Deviation of jaw opposite the injured side on mouth opening
 - b- Deviation of jaw toward the injured side on mouth opening
 - c- Anesthesia of lower lip
 - d- Anesthesia of infra orbital nerve area
- 22- Craniofacial dysjunction is seen in
- a- LeFort I fractures
 - b- Fracture angle of mandible
 - c- LeFort II fractures
 - d- LeFort III fractures
- 23- External fixation is indicated in fracture mandible in
- a- Angle of mandible fractures
 - b- Condylar fractures
 - c- Fracture mandible with extensive tissue loss
 - d- Mental fracture
- 24- Gillies approach is used to reduce
- a- Fracture Condylar process
 - b- Fracture mentum of mandible
 - c- Fracture maxilla
 - d- Fracture zygoma
- 25- Fracture mandible running from lingual to buccal direction is said to be:
- a- Horizontally favorable
 - b- Horizontally unfavorable
 - c- vertically favorable
 - d- vertically unfavorable
- 26- in intermaxillary fixation
- a- Wires are used to bind the fractured fragments
 - b- Wiring the teeth together immobilizing the jaws
 - c- Plates are used to fix the fractured fragment
 - d- Intramedullary nails are used to fix the fracture

Name: _____

Date: 04/04/2013

Oral Surgery Midterm Exam

- 1- Which of the following is true? Apical surgery:
 - a- Should be carried out using a semilunar incision when the tooth is restored with a crown
 - b- May be undertaken on posterior teeth
 - c- Need not involve the removal of all the gutta-percha from the walls of the cavity in the root end
 - d- May be described as successful even when there is no regeneration of periapical bone

- 2- A- An apicectomy is indicated when conventional Nonsurgical root canal treatment, with an orthograde root canal filling, has failed or is impractical and the tooth is associated with clinical symptoms or signs of continuing periradicular disease.
B- If orthograde treatment has failed, the reason for failure should be diagnosed and, whenever possible, NSRCT retreatment attempted.
 - a- A is true but B is false
 - b- B is true but A is false
 - c- Both A and B is true
 - d- Both A and B is false

- 3- which of the following is false?
 - a- The semilunar flap is indicated for surgical procedures of limited extent and is usually created at the anterior region of the maxilla.
 - b- The major advantage of the submarginal incision is esthetics.
 - c- The disadvantage of the gingival sulcus incision is somewhat more difficult to replace and to suture.
 - d- Compared with the semilunar incision, the submarginal provides less risk of incising over a bony defect and provides better access and visibility.

- 4- which of the following steps of operation of endodontic surgery may cause treatment failure?
 - a- Reflection of a full-thickness flap with a sharp periosteal elevator.
 - b- Removal of labial bone covering apical third of root with surgical round bur using handpiece with irrigation with sterile saline solution.
 - c- Removal of periapical lesion with hemostat and curette. Some areas of the lesion may be inaccessible to the curettes total removal is not necessary.
 - d- Resection of apex with fissure bur and beveling at a 45° angle. Sufficient root apex must to removed to provide a larger surface and to expose additional canals.
 - e- Preparation of root end and filling with an inappropriate marginal sealing of retrocavity

- 5- Lesion that characteristically occurs on the alveolar ridges of infants is:
 - a- Congenital lymphangioma
 - b- Fordyce granules
 - c- Bohn's nodules
 - d- White sponge nevus

- 6- A patient present with an asymptomatic soft, fluctuant swelling of the angle of mandible anterior to sternocleido-mastoid muscle which he stated to be present since his childhood days. Regional lymph nodes are nonpalpable with normal radiographic pictures of the area and normal blood and urine examination. Aspiration of swelling shows yellow-brown fluid. Most probable diagnosis in the condition is:
- a- Thyroglossal duct cyst
 - b- Dermoid cyst
 - c- Branchial cleft cyst
 - d- Ranula
- 7- A patient present with tender swelling in the palatal area. Associated teeth were normal. Radiographic examination of the area shows radiolucent area with honeycomb appearance. Excessive bleeding was encountered upon entering into the lesion. Most probable diagnosis of the lesion is:
- a- Radicular cyst
 - b- Aneurysmal bone cyst
 - c- Hemorrhagic bone cyst
 - d- Mid-palatal cyst
- 8- The soft tissue incision used for removal of a mandibular torus should be placed;
- a- Directly above the torus to allow maximum exposure.
 - b- Directly over the torus with extension to the floor of the mouth for exposure.
 - c- Inferior to the torus in the area of the floor of the mouth.
 - d- Over the edentulous alveolar crest or in the gingival crevice around the natural dentition.
- 9- A tooth involved with a radicular cyst was extracted .The cyst was left behind it is called a
- a- Ranula.
 - b- Dentigrous cyst.
 - c- Follicular cyst.
 - d- Residual cyst
- 10- A lateral periodontal cyst can arise from a preexisting periapical granuloma.
- a- True
 - b- False
- 11- A lateral periodontal cyst is usually seen in the mandibular premolar and canine area and max. lateral incisor area.
- a- True
 - b- False
- 12- A potential complication of a dentigerous cyst is a transformation of epithelial lining into an ameloblastoma.
- a- True
 - b- False
- 13- A median palatine cyst is often heart shaped and occurs mostly in women.
- a- True
 - b- Fals

14- Which of the following is false?

- a- Radicular cysts develop about the apex of a diseased tooth
- b- Odontogenic keratocysts are typically expansile
- c- Fissural cysts do not displace the roots of the adjacent teeth
- d- Eruption cysts are related to the root of the unerupted teeth

15- Which of the following is false?

- a- Dentigerous or follicular cysts are a fluid-filled expansion of the dental follicle and are attached to the crown of the tooth at the cemento-enamel junction.
- b- The most commonly involved teeth are reported to be the mandibular third molar and maxillary canine.
- C- Radiographically, a circumscribed, unilocular, radiolucent area is seen with a thin radiopaque lamina dura associated with the crown of the involved tooth. The tooth and adjacent structures may be displaced.
- d- If the tooth is to be retained for orthodontic reasons, it is advantageous to enucleate the cyst.

16- Multiple keratocysts are found in:

- a- Marfan syndrome
- b- Gorlin-Goltz syndrome
- c- Pierre- Robin syndrome
- d- Down syndrome

17- Which of the following is false? The parodontal cyst:

- a- Occurs on the lateral aspect of third molars
- b- Is stimulated by pericoronitis
- c- Arises from the epithelial rests of Malassez
- d- Has a communication with oral cavity

18- Which of the following is false?

- a- The duration of a lesion may provide valuable insight into its nature.
- b- A change in the radiographic and/or clinical size of a lesion is an important piece of information for the dentist to determine.
- c- It is important to determine the symptoms these are associated with the lesion.
- d- There is no relationship between heredity and the lesions occurs in the oral cavity.

19- Which of the following is false?

- a- A cyst usually appears as a radiolucency with sharp borders, whereas a radiolucency with ragged, irregular borders might indicate a malignant or more aggressive lesion.
- b- Sialography involves the injection of radiopaque dye into glandular ducts to produce an indirect image of the gland architecture and delineate any pathologic lesions within the gland.
- c- When soft tissue lesions are proximate to bone, radiographs may indicate whether the lesion is causing an osseous reaction, eroding into the bone, or arising from an intraosseous origin.
- d- There is no advantages to computerized tomograms over plain radiographs in examination of oral lesions.

20- Which of the following is indication for biopsy?

- a- Lesions with no identifiable cause that persist for less than 14 days despite local therapy.
- b- Any lesion that has grown rapidly for obvious reason.
- c- Any lesion that is the basis of extreme concern to the patient.
- d- Any lesion that has rhythmic pulsation.

21- Which of the following is false?

- a- Two main types of aspiration biopsy are used in clinical practice.
- b- The first is used only to explore whether a lesion contains a fluid.
- c- The second is used actually to aspirate cells for pathologic diagnosis.
- d- A 16- to 18gauge needle is used for FNAP.

22- The least basic surgical goal for management of oral pathological lesion is:

- a- Eradication of lesion.
- b- Functional rehabilitation of pt.
- c- Aesthetic improvement.
- d- Diagnostic purpose.
- e- Study purpose.

23- An incisional biopsy is indicated in which one of the following lesions?

- a- Squamous cell carcinoma
- b- Fibroepithelial polyp of the lip
- c- Buccal hemangioma
- d- Palpable submandibular gland lump
- e- Amalgam tattoo

24- What is the correct treatment for an a symptomatic torus palatinus?

- a- Antibiotics
- b- Excision
- c- Incisional biopsy
- d- Excisional biopsy
- e- None of the above

25- The removal of intraseptal bone and the repositioning of the labial cortical bone is called:

- a- Clarck's technique
- b- Kazanjian's technique
- c- Lip switch technique
- d- Dean's technique

26- The complications of maxillary tori removal include all of the following except:

- a- Postoperative hematoma formation
- b- fracture or perforation of the floor of the nose
- c- Recurrence
- d- necrosis of the flap

27- After maxillary tuberosity reduction impressions can generally be taken _____ postoperatively.

- a- 1 week
- b- 2 weeks
- c- 4 weeks
- d- 3 days

28- A generalized hyperplastic enlargement of mucosa and fibrous tissue in the alveolar ridge and vestibular area is called:

- a- Inflammatory papillary hyperplasia
- b- Epulis gravidarium
- c- Epulis fissuratum
- d- None of the above.

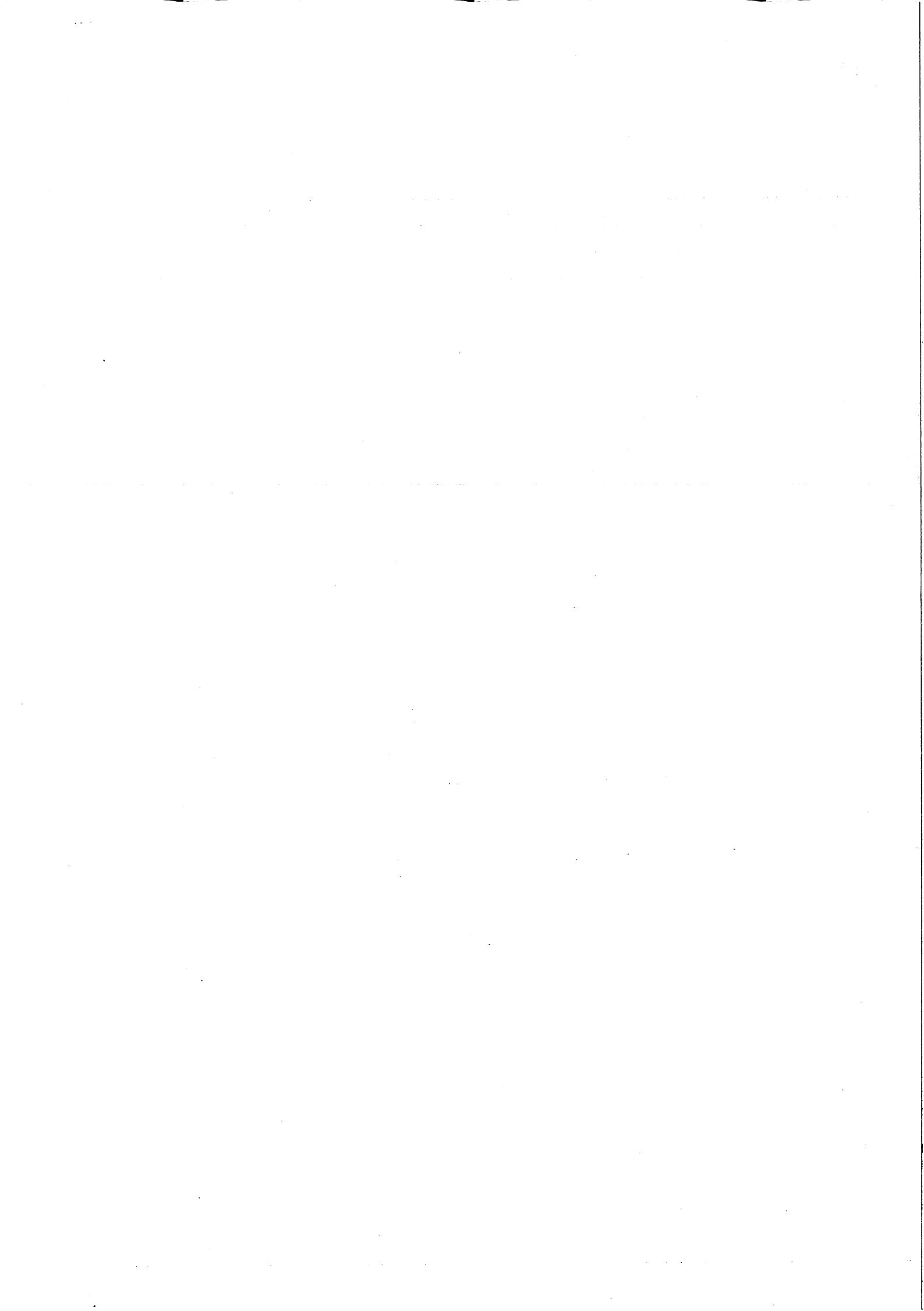
29- Before the exploration of any intrabony pathologic lesion, which type of biopsy must always be done?

- a- Cytologic smear
- b- Incisional biopsy
- c- Excisional biopsy
- d- Aspiration biopsy

30- 15-year-old patient has a numb lower lip and pain in her right posterior mandible. Radiogram shows uniform thickening of the periodontal membrane space of first molar tooth. The tooth shows abnormally increase mobility. Which one of the following should be seriously considered?

- a- Periapical cyst
- b- Periapical granuloma
- c- Traumatic bone cyst
- d- Malignancy

Good Luck....



1- When maxillary and mandibular teeth are to be extracted simultaneously the order of extraction should be:

- a. Maxillary teeth followed by mandibular teeth
- b. Mandibular teeth followed by maxillary teeth
- c. It does not matter which teeth are removed first
- d. For anterior region mandibular first and for posterior region maxillary first

2- Best treatment for pericoronitis associated with impacted mandibular third molar Is:

- a. Irrigating under the operculum
- b. Antibiotic and analgesic therapy
- c. Extraction of impacted third molar
- d. Operculectomy

3- A swelling over lies an extraction wound and it crackles on palpation. Most likely diagnosis is:

- a. Ecchymosis
- b. Cellulitis
- c. Emphysema
- d. Empyema

4- During the extraction of maxillary first molar, the palatal root tip of molar slipped into the maxillary sinus. Proper way to approach to recovery Is through the:

- a. Same socket by enlarging the opening through which the root entered the sinus
- b. Maxillary incisive fossa
- c. Maxillary incisive fossa medial to canine
- d. Lateral nasal wall in the middle meatus of the nose

5- A mandibular left second molar is unerupted in a 14- year-old boy. Radiological examination reveals a dentigerous cyst surrounding the unerupted tooth. The treatment of choice is:

- a. Observe for at least 2 years
- b. Aspirate and send the contents of the cyst to biochemical analysis
- c. Uncover the crown and keep it exposed
- d. Extract the tooth under local anesthesia

6- The best time of extraction in pregnancy:

- a. First trimester
- b. Second trimester
- c. Third trimester
- d. None of the above

7- Incisional biopsy of an ulcer is taken:

- a. At the center of the lesion
- b. Edge of the lesion
- c. Edge of the lesion along with normal tissues
- d. At any part of the lesion

8- During the extraction of the left mandibular third molar, the following nerve is at risk to injury:

- a. Lingual nerve
- b. Mental nerve
- c. Long buccal nerve
- d. Facial nerve

9- During removal of impacted mandibular third molar, bone is removed up to beyond:

- a. Cementoenamel junction
- b. Furcation area
- c. Half of roots
- d. Height of contour of crown

10- Severe trismus resulting from acute dental pathology indicates swelling in which one of the following spaces:

- a. Sublingual
- b. Carotid
- c. Retropharyngeal
- d. Masticator

11- Incision and drainage (I and D) In an area of acute infection should be performed when?

- a. Induration has occurred
- b. Localization has occurred
- c. Acute pain is present
- d. There is fever which is above 38.5°C

12- During the apicectomy on a maxillary lateal incisor, one should take care not to perforate or damage the:

- a. Maxillary sinus
- b. Labial frenum
- c. Floor of the nose
- d. Contents of the incisive canal

13- In an otherwise asymptomatic cystic swelling there is sudden neurapraxia in inferior alveolar nerve region It can be due to:

- a. Infection of cyst
- b. Expansion of periosteum due to cyst
- c. Neuritis
- d. Neuralgia

14- The cysts less than 2 cm in size are best treated by:

- a. Incision
- b. Marsupialization
- c. Enucleation
- d. Aspiration

15- After removal of second premolar And placement of gelfoam into the socket, the best suture is:

- a. vertical mattress
- b. figure of eight
- c. horizontal mattress
- d. 2 simple interrupted

16- One day after odontectomy of mandibular third molar, blue black spots are seen in patients neck, these spots indicates:

- a. Thrombocytopenic purpura
- b. Postoperative ecchymosis
- c. Impaired blood circulation
- d. Cellulities

17- Before dental treatment, prophylactic antibiotic coverage is indicated for patients with each of the following conditions except:

- a. Previous coronary artery bypass graft surgery
 - b. Rheumatic heart disease
 - c. Prosthetic aortic valve
 - d. Mitral valve prolapse with valvular regurgitation
- 18- Management of an acute asthmatic episode occurring during oral surgery includes all of the following except:
- a. Terminate all dental treatment
 - b. Patient should administer their own bronchodilator using an inhaler
 - c. Administer nitroglycerin
 - d. Administer oxygen
- 19- The most common complication after tooth extraction is :
- a. hemorrhage
 - b. fibrinolytic alveolitis
 - c. delayed healing
 - d. infection
- 20- The initial toxic reaction to lidocaine injection is:
- a. Twitching of muscles
 - b. Shivering
 - c. Talkativeness of patient
 - d. Sleepy feeling
- 21- In Gow Gates technique the anesthetic solution is deposited :
- a. At the mandibular fossa
 - b. At the foramen ovale
 - c. At the anterior region of condyle
 - d. In pterygomaxillary space
- 22- Methemoglobinemia occurs in patients receiving large doses of:
- a. Procaine
 - b. Mepivacaine
 - c. Prilocaine
 - d. Bupivacaine
- 23- Which of the following block anesthesia procedure most likely to result in hematoma?
- a. Mental nerve block
 - b. Infraorbital nerve block
 - c. Posterior superior alveolar nerve block
 - d. Inferior alveolar nerve block.
- 24- Maxillary sinus infection of odontogenic origin is most commonly caused by:
- a. Aerobic bacteria.
 - b. Anaerobic bacteria.
 - c. Fungal.
 - d. Viral.
- 25- Maxillary sinus is usually involved in fractures:
- a. Le fort 1.

- b. Zygomatic arch fracture.
- c. Le fort 3
- d. Nasoethmoidal fracture.

26- Major duct of submandibular gland is:

- a. Bartholin's duct.
- b. Minor salivary gland's duct.
- c. Stenson's duct.
- d. Wharton's duct.

27- Lip switch procedure is also called:

- a. Sub mucosal vestibuloplasty.
- b. Labial frenectomy.
- c. Transpositional flap vestibuloplasty.
- d. Maxillary augmentation procedure.

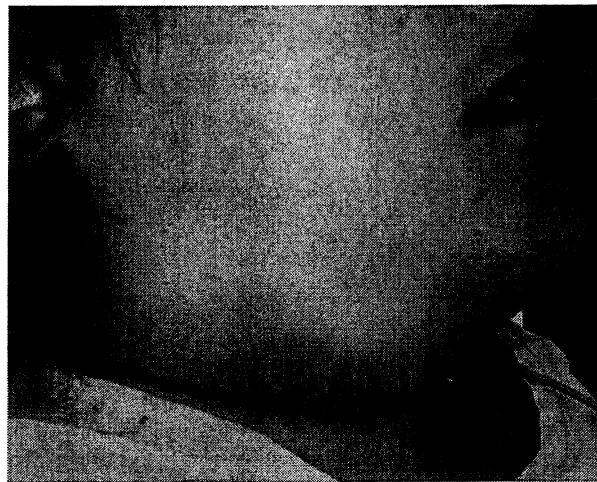
28- Myofacial pain dysfunction syndrome can be precipitated by:

- a. High filling or malocclusion
- b. Psychogenic factors
- c. Bruxism
- d. All of the above

29- A 7 -year-old boy presented with fracture of left subcondylar region with occlusion undisturbed, the treatment would be:

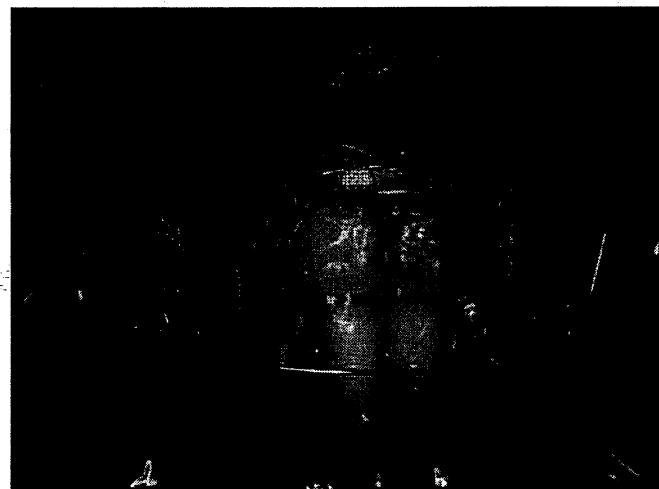
- a. Immobilization for 7 days
- b. Immobilization for 14 days with intermittent active opening
- c. No immobilization with restricted mouth opening for 10 days
- d. No immobilization and active movement

30- A 51-year-old woman was transferred to hospital, where she had presented with fever, sweats and an increasingly painful swelling of the jaw 5 days after removal of a wisdom tooth. At presentation, she had difficulty swallowing and speaking. Although alert and oriented, she was febrile, had a "husky" voice and was starting to drool. Examination revealed a large sublingual, brawny mass extending bilaterally, bilateral submandibular swelling, and a swollen, protruded tongue. What is your diagnosis?

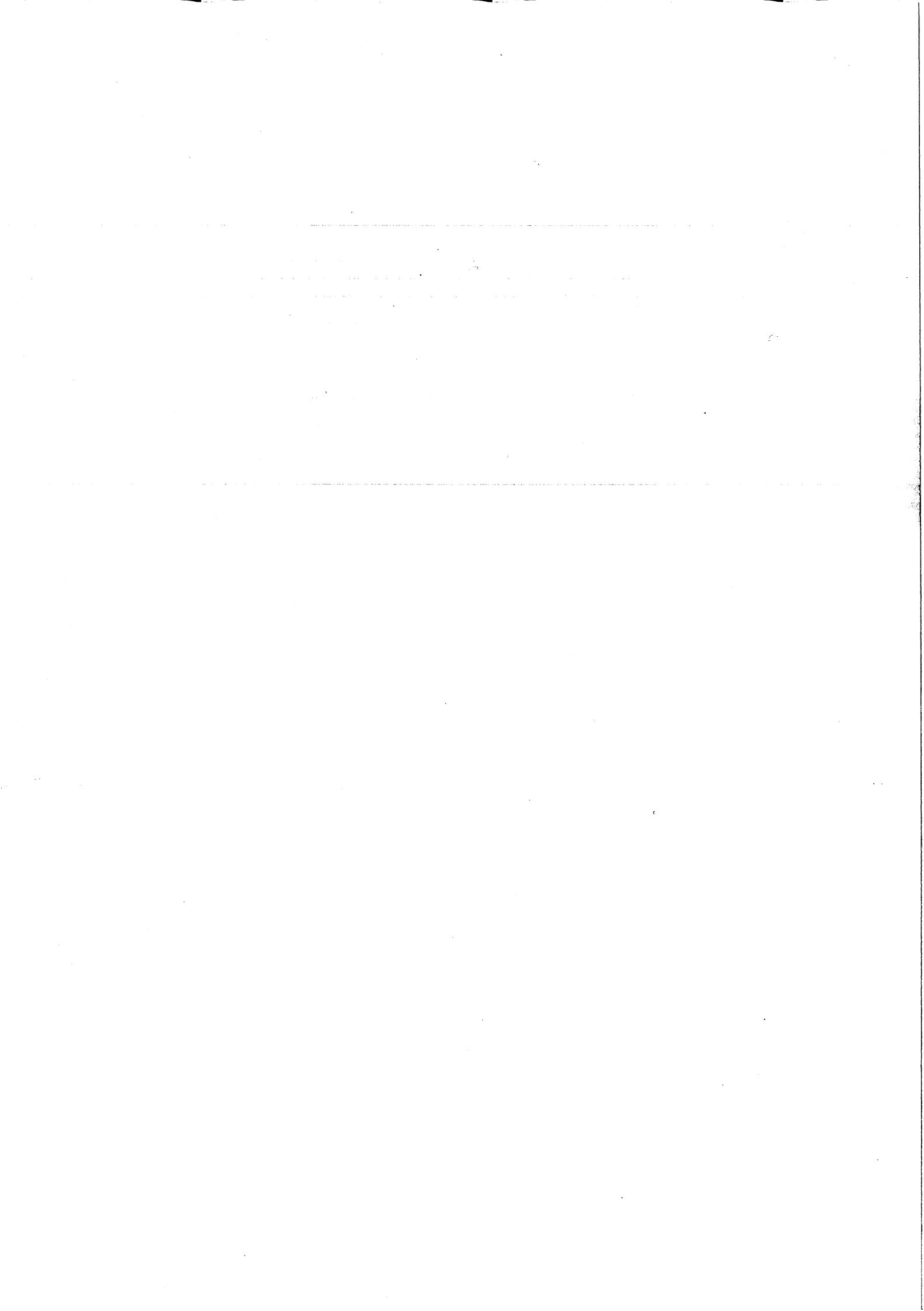


- a. Acute submandibular sialadenitis
- b. Ludwin's angina
- c. Dermoid cyst
- d. Submandibular space abscess

31- Which type of treatment do you see in the picture below?



- a. Intermaxillary fixation with Ivy loop wiring technique
- b. Intermaxillary fixation with Continuous loop wiring technique
- c. Intermaxillary fixation with arch bar
- d. Rigid fixation with mini plate



اسئلة الريموف 3 للميد الفصل الاول : سنة 2011

اسئلة الريموف النصفي كانو 8 اعتقد smile رمز تعبيري

اول سؤال شو نوع refractory denture base الي يستخدم لها
يعني بتحمل حرارة عالية) الجواب هو طبعا cast (denture base

السؤال الثاني شو الفسيولوجيکال ميثود لتسجيل horizontal jaw ?
realtion اي حد بكتب اشي من mechanical كل السؤال غلط
السؤال الثالث شو مشاكل low vertical diamntion ؟

السؤال الرابع شو هو ؟ silvers man space

السؤال الخامس شو المادة الي يستخدمها في selective
presure tech؟ الجواب بولي ايثر

السؤال السادس شو مواصفات الامبريشن بعد ما اخدها ؟

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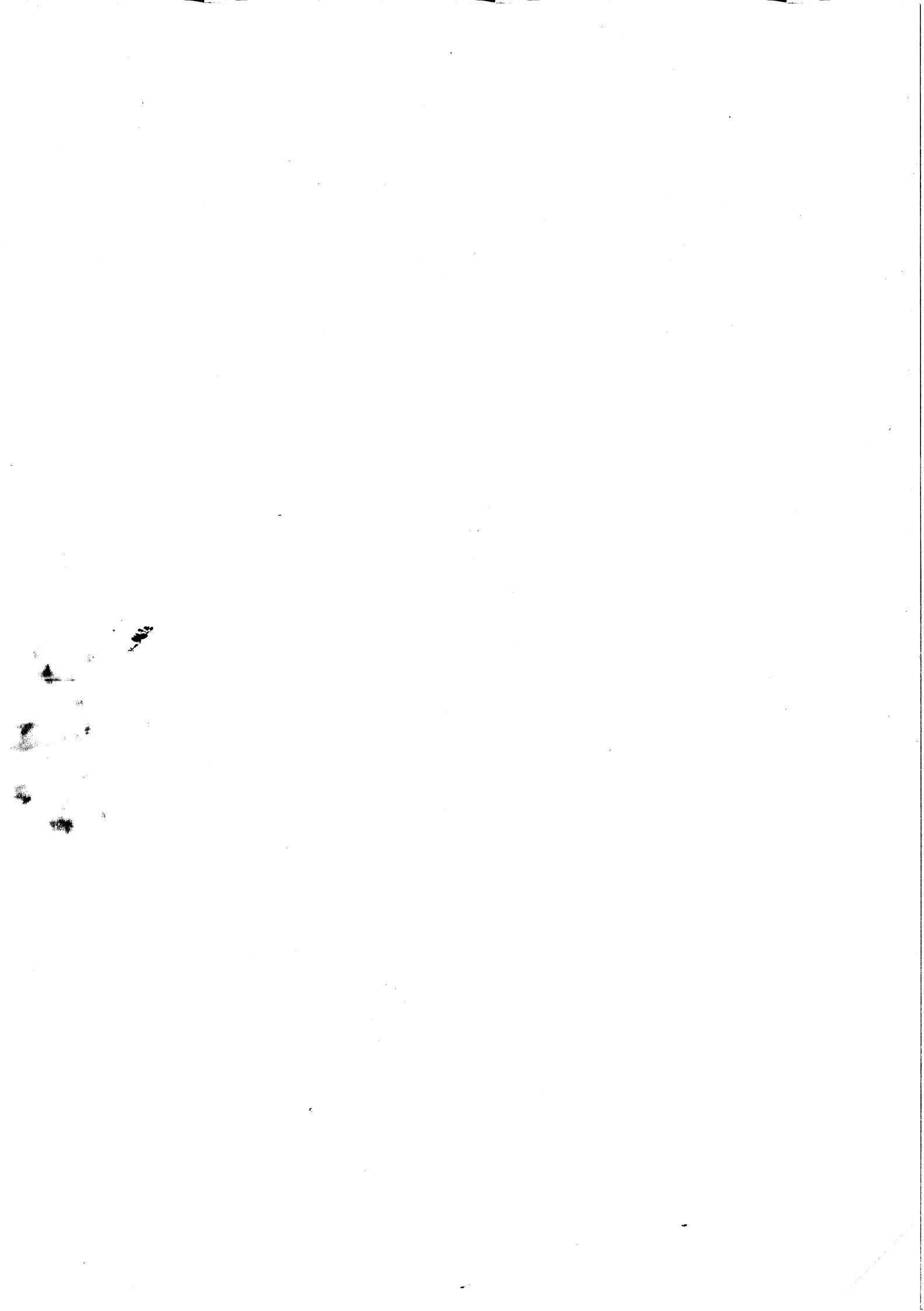
اسئلة الكويرز

قصدة سيكشنايل وون ستيب what type of impreation tech ?

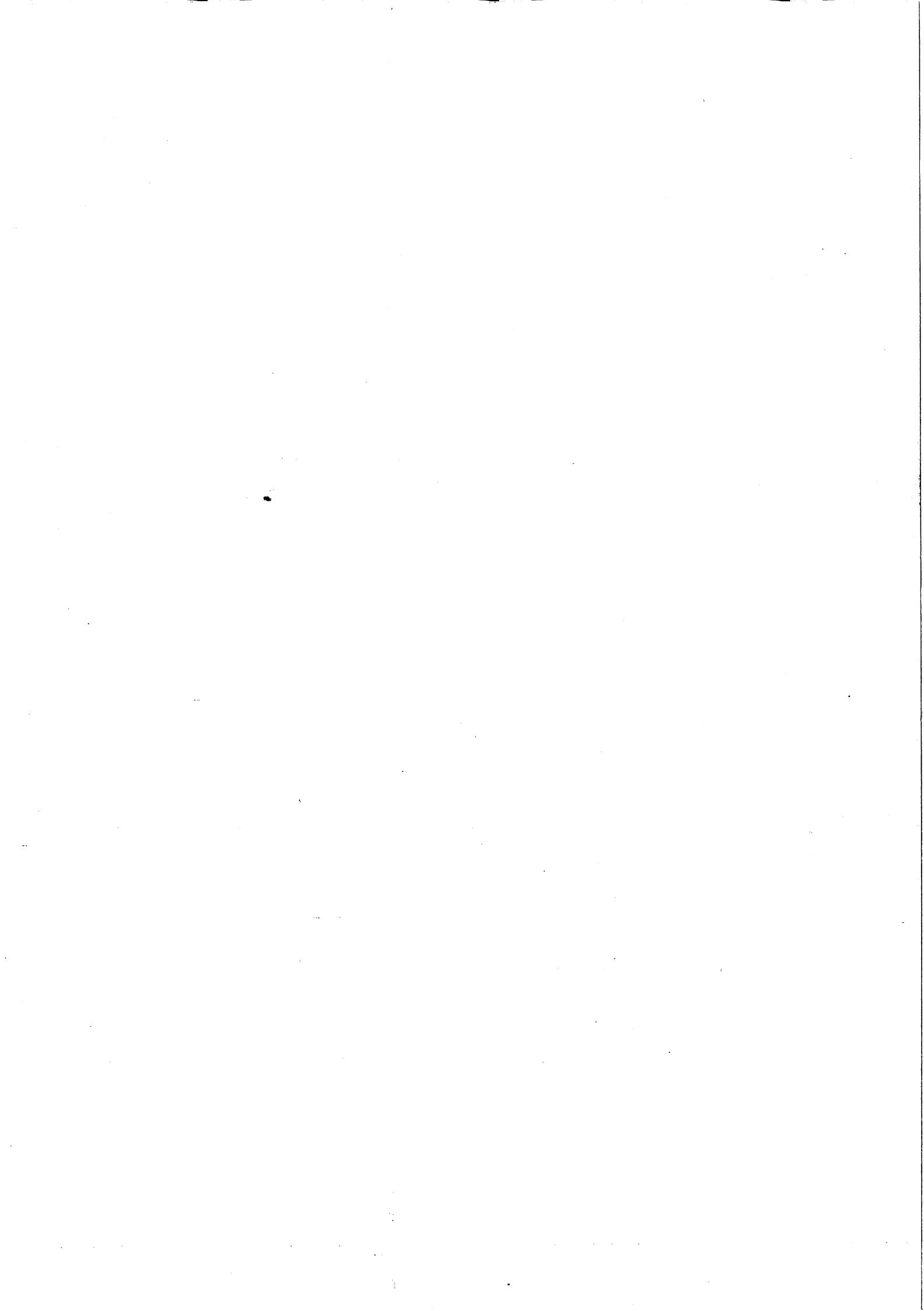
how to correct post dam during tray in ?

شو مواصفات السبيشنايل تري ؟

بالفاينال كان صعب اجا كل اختياري وسؤال مقالي all
bodily movment of mandible ?



True or False		31	x
1	x	32	/
2			MCQs
3	/	33	E
4	x	34	E
5	x	35	E
6	/	36	B
7	x	37	C
8	/	38	B
9	/	39	D
10	x	40	A
11	x	41	B
12	/	42	D
13	x	43	E
14	/	44	D
15	/		Complete
16	x	45	8 week – birth
17	/	46	Intermaxillary segment
18	/	47	Translation
19	/	48	5
20	x	49	Mesially
21	x	50	1.8
22	x	51	Distraction
23	x	52	25%
24	x	53	Subdivision
25	/	54	Max. lateral
26	x	55	2 mm
27	/	56	Class II – D 2
28	x	57	10 %
29	x	58	1:1 to 1:1.5
30	/	59	Thyroid
		60	Hyperparathyroidism



1. Is the sudden increase in growth rate during the age of the organism -----
 2. The period of the fetus: -----
 3. Exposure of embryos to viruses or drugs, during ----- weeks may result in congenital abnormalities
 4. by the end of the ----- week the face has taken on a human appearance.
 5. The medial nasal prominences move toward each other, fuse in the midline, and form the -----
 6. the lateral palatine shelves become elongated and the tongue becomes relatively smaller and moves -----
 7. is a condition that may result from failure of fusion between maxillary process and mandibular arch -----
 8. At birth the face forms only one-eighth of the bulk of the head, whereas in the adult it forms -----
 9. movement of bone in the same direction of its own growth -----
 10. Methods of bone growth in the skull are Endochondral bone growth , Growth by surface deposition and -----
 11. **The important synchondrosis includes:** The spheno-occipital synchondrosis , The intersphenoidal synchondrosis , ----- , The intra-occipital synchondrosis.
 12. At a growing suture there are ----- layers of tissue .
 13. Two theories exist regarding the mechanism responsible for the separation of the bones bounding a suture: The classical theory and -----
 14. In childhood middle phase ----- years .
 15. the angle of the mandible is ----- degrees at birth to ----- degrees in adult.
 16. The first deciduous molars erupt at about -----
 17. somewhat wider spaces may be found mesial to the maxillary canines and distal to the mandibular canines and termed ----- .
 18. Leeway space of 3.4 mm. in the mandible bilaterally while it is only 1.8 mm. in the maxilla .
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تأكد من الحلول خاصة الصح و الغلط

19. The human brain for example, attains more than 90% of its full adult size by 6 years although its functional maturation continues for much longer time (/)
20. Cleft lip and cleft palate are not separate congenital abnormalities, but they often occur concomitantly. (x)
21. Cleft lip will be apparently by the second month in utero since this the time where the fusion of the lip is usually completed (/)
22. lymphatic tissues grow rapidly in early life and reach their maximum extent to about 11 to 14 years (/)
23. The ears of the infant and child move downwards during growth (/)
24. **Synchondrosis:** cartilaginous joint in which the cartilage divides and subsequently converted into bones. (/)
25. **Primary displacement:** The movement of bone in same direction to the adjacent bone . (x)
26. Remodeling It is the change in size and no change in the shape of bone (x)
27. In the mandible, midline symphysis is another region for endochondral growth (/)
28. The newborn has his frontal sinus and has no frontal bone . (x)

29. the maxilla grow forward or make room for the erupting teeth by depositing new bone on its anterior surface (x)
30. In the neonate the mandible is made of three halves (x)
31. the bony chin becomes more prominent with age mostly as a result of bone resorption above the chin , rather than bone deposition on the chin (/)
32. The dental age maturity indicator based on eruption age has an advantage over the maturity indicator based on tooth crown and root calcification . (x)
33. The groove distal to the canine segment continues on the buccal side of the gum pad and is called the lateral sulcus. (/)
34. When the gum pads are approximated, in the back they touch at the first permanent molar segment. (x)
35. Permanent dentition starts calcification after birth with the exception of cusps of the first permanent molars (/)
36. There is less variability in occlusal relationship in the permanent teeth than in the primary dentition (x)
37. the maxillary primate space is usually closed by the eruption of the permanent maxillary incisor. (/)
38. The germs of all the permanent teeth are formed on the lingual side of their deciduous predecessors. (/)
39. the lower permanent first molar develops in the ascending ramus of the mandible with its occlusal surface tilted mesially. (/)
40. During the eruption of the permanent incisors and especially the permanent canine, there is about 3 - 5 mm. increase in the upper arch (/)
41. increase in maxilla intercanine width stops earlier than that of the mandible (x)
42. un-spaced deciduous teeth tend to be associated with slightly more growth in inter-canine width (/)
43. After the eruption of the third molars significant changes take place in the dental arch size and relations. (x)

MCQs

44. there are two growth centers at each suture, one for each bony unit. These growth centers are independent
45. Longitudinal study is the most valuable data and long-term data collection .
46. at 3 years age there may be what is called excessive overbite .
47. "Late Teen Crowding" of the lower incisors especially seen in boys , the mandibular arch perimeter decreases more.
48. In the maxilla there is a slight increase in the arch length and the arch perimeter between 6 and 10 years , This is followed by a decrease after 10 years .