

801. Which one of the following is true in regards to osseointegration implants in dentistry?
- Fibrous tissues are formed and integrated directly between titanium and bone.
 - Following insertion, implants can be immediately loaded without problem.
 - The success of the implants is directly proportional to its area of contact with bone.
 - The success of the implants depends mostly on low torque preparation and insertion of the fixture.
 - The success of integration is accurately investigated by immediate radiographic examination.

Answer: C.

802. Titanium is used in dentistry:
- In a very pure form in implants.
 - In an alloy with aluminium in casting for crowns and bridges.
 - In an alloy with nickel in orthodontic wires.
 - A and B.
 - A, B and C.

Answer: E.

803. Most dental implants are made of:
- Bioactive glass.
 - Commercially pure titanium.
 - Titanium-aluminum-vanadium alloy.
 - High crystallinity hydroxyapatite coated titanium.
 - Type III gold.

Answer: B.

804. The best way of getting good retention in full veneer crown is by:
- Tapering.
 - Lengthening the prep.

Answer: B.

805. The floor of an ulcer is not:
- smooth.
 - keratinized.
 - sloughed.
 - fungated.
 - epithelialised.

Answer: E.

Option E: The epithelium would be partially or totally disintegrated. As a general ulcer is defined as any breach in epithelium continuity with some loss of underlying connective tissue.

Option B: the question is asking about the floor of an ulcer and ketainzation usually appear on the surface of normal mucosa not the ulcerated one. Even not all of mucosa are keratized, only the masticatory musosa is keratized.

Option A: Smooth = Aphthous ulcer.

Option C: Slough= Pressure ulcers.

Option D: Fungating= Squamous cell carcinoma.

806. floor of ulcer, what is not ture?
- Smooth.
 - Epithelialized.
 - Fungated.
 - Punched.
 - Granulated.

Answer: B.

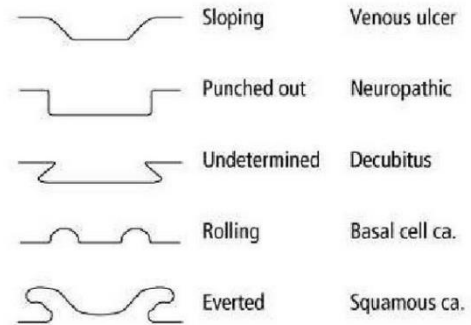
807. What is not true about the margin of an ulcer?

- A. Undermined.
- B. Punched out.
- C. Rolled.
- D. None of the above.

Answer: D.

All other options represents different type of ulcer margins.

Edge



808. A 29 year old patient developed multiple ulcerated lesions on the buccal attached gingiva one day ago. No fever, malaise or lymphadenopathy is present. The most likely diagnosis is:

- A. primary herpetic gingivostomatitis.
- B. recurrent herpes simplex infection.
- C. aphthous ulcers.
- D. necrotizing ulcerative gingivitis.

Answer: B.

809. What will develop after prophylaxis?

- A. Acellular pellicle is formed immediately after.
- B. cellular pellicle is formed immediately after.
- C. Acellular pellicle is formed after 48 hours.
- D. cellular pellicle is formed after 48 hours.

Answer: A.

810. Which of the following is ONE indication of indirect pulp capping?

- A. When further excavation would lead to pulp exposure.
- B. Excavation of a very deep caries.
- C. When carious lesion has just penetrated DEJ.

Answer: A.

811. When a removable partial denture is fabricated to occlude with natural teeth, the occlusal form of the artificial teeth is influenced by the:

- A. endodontic condition of the abutment teeth.
- B. occlusal form of the remaining teeth.
- C. need to produce a fully balanced occlusion.
- D. None of the above.

Answer: B.

812. How should the occlusion in partial removable dentures be designed?

- A. artificial teeth should be out of occlusion.
- B. artificial teeth should not interfere with the incisal guidance established by the remaining natural teeth.

Answer: B.

813. The best way to protect the abutments of a Class I removable partial denture from the negative effects of the additional load applied to them is by:

- A. splinting abutments with adjacent teeth.
- B. keeping a light occlusion on the distal extensions.
- C. placing distal rests on distal abutments.

- D. using cast clasps on distal abutments.
- E. regular relining of the distal extensions.

Answer: E.

814. *The light emitted by the polymerization lamp has to be checked from time to time. The meter used for this only measures light in the range of:*

- A. 100-199 nm.
- B. 200-299 nm.
- C. 300-399 nm.
- D. 400-499 nm.

Answer: D(474nm).

815. *How many mg of fluoride ions are obtained from 2.2mg tablet of NaF*

- A. 0.5mg.
- B. 1 mg.
- C. 1.5mg.
- D. 10mg.

Answer: B.

816. *A suddenly swollen upper lip that lasts for 48 hours or more is most likely:*

- A. Hemangioma.
- B. Angioneurotic oedema.
- C. Mucocele.
- D. Cyst.

Answer: B (Boucher).

Option B: develops within 5-30mins and may last up to 24-36 hrs.

Option C: is more affecting the lower lip, at a specified area and last longer.

817. *Loss of sensation/paraesthesia in the lower lip may be produced by:*

- A. Bell's palsy.
- B. Traumatic bone cyst.
- C. Trigeminal neuralgia.
- D. Osteomyelitis.
- E. Ludwig's angina.

Answer: D (Odell case 16) (the same in 1000 MCQS question 28 but with different option).

818. *In anxious and psychologically stress patient ANUG is often more severe because:*

- A. Stress cause histamine and serotonin release.
- B. Stress causes catecholamine and corticosteroid release.
- C. Stress cause people to neglect oral hygiene.

Answer: B.

819. *What is the least probable consequence in thumb-sucking?*

- A. Reclining of lower incisors.
- B. Protrusion of upper incisors.
- C. Formation of deep palate with big overbite.

Answer: C.

There will increase in over-jet with possibility of open-bite.

820. *A change in continuity of the occlusal plane is often observed after ankylosis of a tooth. This change is caused by:*

- A. differential eruption sequences.
- B. the ankylosed teeth sinking into the alveolar bone.
- C. localized growth inhibition of the alveolar process.
- D. continued eruption of non-ankylosed teeth and growth of the alveolar process.

Answer: D.

821. *What is not important in obturation materials for primary teeth?*

- A. good apical seal.
- B. Radiopacity.
- C. Antibacterial.
- D. Resorbable.

Answer: A.

822. *What does not help in establishing the caries risk in children?*

- A. History of caries.
- B. Lactobacillus count.
- C. Dietary habits.
- D. Brushing habits.
- E. Genetic predisposition.

Answer: B (Cameron, 6).

Lactobacillus count is mentioned in Cameron page 6 for CARIES ACTIVITY TEST which is not the case here, at the bottom of same page 6 to 7 it is actually stating of RISK ASSESSMENT which is the question asking for and all are mentioned except B.

823. *Which of the following regarding the alternate route of analgesic drug administrations is INCORRECT?*

- A. Rectal suppositories are very effective.
- B. Rectal suppositories are not liked by Australians.
- C. intramuscular Pethidine is recommended.
- D. In hospitals, subcutaneous morphine is effective.
- E. IV pethidine is not recommended.

Answer: E.

Option D: Morphine SC infusion is effective in palliative care

Option E: Only if we have special equipment.

824. *Which of the following are typical consequences of dental crowding; assuming no primary teeth has been lost prematurely?*

- A. Overlapping of lower incisors.
- B. Palatal displacement of upper canines.
- C. Impaction of 15 and 25 between first premolars and first molars.
- D. Mesial tipping of 16 and 26.
- E. Rotation of 16 and 26.

Answer: A.

825. *What is the dominant microflora in acute necrotic ulcerative gingivitis (ANUG)?*

- A. Spirochaetes and fusobacterium SP.
- B. Spirochaetes and eikenella corrodes.
- C. Polymorphs and lymphocytes.
- D. Actinobacillus actinomycetes comitans oral capnocytophaga.
- E. Porphyromonas gingivalis and prevotella intermedia.

Answer: A.

826. A 12 years-old child presents with symptoms of widespread gingivitis with bleeding and general malaise for several weeks. How would you manage this patient?

- A. Prescribe Metronidazole 100mg.
- B. Locally debride, give oral hygiene instruction and prescribe H₂O₂ mouth wash.
- C. Give a prophylaxis with ultrasonic scaling.
- D. Refer for haematological screening.
- E. Advise for bed rest with supportive and palliative treatment.

Answer: D.

827. A diabetic patient with moist skin, dry mouth and weak pulse; what would you do?

- A. Give glucose orally.
- B. Administer O₂.
- C. Administer adrenaline.
- D. Inject insulin.

Answer: A.

Hypoglycemic attack.

828. The laboratory findings in Paget's disease show:

- A. Elevated calcium, elevated phosphate, and elevated alkaline phosphate.
- B. Normal calcium, normal phosphate and elevated alkaline phosphate.
- C. Decreased calcium, increased phosphate and elevated alkaline phosphate.
- D. Increased calcium, normal phosphate and decreased alkaline phosphate.
- E. Normal calcium, increased phosphate and elevated alkaline phosphate.

Answer: B.

Patients with Paget's disease show high elevations in serum alkaline phosphatase levels but usually have normal blood calcium and phosphorus levels. Although serum bone-specific alkaline phosphatase is considered the most sensitive marker of bone formation, it is not widely available; thus total serum alkaline phosphatase is typically used in routine clinical practice.

829. A lady with persistent pockets 5 to 6 mm in anterior region:

- A. modified widman flap.
- B. apically modified flap.
- C. scaling and root planning.

Answer: A.

Option A: Modified widman flap is used to gain an access for complete removal of plaque, calculus, and contaminated cementum

- minimal post-operative root exposure (esthetics/sensitivity)
- reduction of probing depths
- chance for some regeneration

Option B: apically positioned flap is not indicated in anterior region due to chance of recession.

Option C: If periodontal pockets less than 5 mm then non-surgical approach is used as scaling and RP.

830. In a patient who has gingival recession of 3mm and probing pocket depth of 5mm, what is the attachment loss?

- A. 2mm.
- B. 5mm.
- C. 3mm.
- D. 8mm.
- E. 10mm.

Answer: D.

831. 5 mm probing depth means:

- A. Patient has periodontitis.
- B. Probe is 5 mm beyond gingival margin.
- C. Probe is 5 mm beyond dentino-enamel junction.

Answer: B.

832. This middle-aged patient has extreme painful episodes related to the lower right area. What is the diagnosis of the white slough in the buccal vestibule?

- A. Oral leukoplakia.
- B. Oral candidosis.
- C. Aspirin burn.
- D. Lichenoid reaction.
- E. Frictional keratosis.

Answer: C.



833. By which of the following mechanism reduces Aspirin pain?

- A. It is antiinflammatory by the release of hitamine.
- B. It blocks the cyclooxygenase pathway.

Answer: B.

Aspirin's ability to suppress the production of prostaglandins and thromboxanes is due to its irreversible inactivation of the cyclooxygenase (COX) enzyme. Cyclooxygenase is required for prostaglandin and thromboxane synthesis. Aspirin acts as an acetylating agent where an acetyl group is covalently attached to a serine residue in the active site of the COX enzyme. This makes aspirin different from other NSAIDs (such as diclofenac and ibuprofen), which are reversible inhibitors.

834. A patient is resistant to caries but has a periodontal disease. In this case, sucrose in diet is important because:

- A. Sucrose is greatly involved in plaque development.
- B. S. mutans produces Levans frictions which are used by periodontal pathogens.
- C. The streptococcus mutans cannot survive with a continual supply of sucrose.
- D. Existing plaque must continue to get sucrose in order to grow.

Answer: A.

835. In minor oral surgery, what is TRUE in regard to antibiotics?

- A. Amoxil satisfactorily covers the dental spectrum.
- B. Metronidazole and Amoxil have the same penetrating power.
- C. It is evident that it will reduce post-operative swelling.
- D. There is convincing evidence that Prophylactic prescription of antibiotics will reduce postoperative infections.
- E. Most oral infections get anaerobic after 2 to 3 days.

Answer: A.

Amoxil covers around 91% of oral bacterial infections (TG).

836. What is true in treating a patient with secondary herpes simplex?

- A. Acyclovir inhibits viral transcription when applied in the prodromal phase.
- B. Idoxuridine is better than acyclovir when applied topically.
- C. Antivirals are contraindicated in immuno-compromised patient.

Answer: A.

837. *For herpes simplex, what is not true?*

- A. Acyclovir is effective in prodromal stage.
- B. Can be diagnosed with immunofluorescence tests.
- C. Can be diagnosed with viral culture.
- D. Secondary herpes simplex infection is mainly on gingiva.

Answer: D.

838. *Size of focal spot influence radiographic:*

- A. Definition.
- B. Density.
- C. Contrast.
- D. All the above.

Answer: A.

Small focal spot increase sharpness and reduce penumbra.

839. *The initial priority in treatment of horizontal fractures is:*

- A. Preservation of pulp.
- B. Immobilisation.
- C. Root canal treatment.
- D. Calcium hydroxide treatment.

Answer: B.

840. *What effect has placing a sealant over pits and fissures on the progression of caries?*

1. Decreased new caries.
 2. Increased new caries.
 3. Progression of exististing caries.
 4. Decreased progression of existing caries.
 5. No effect on existing caries.
- A. 1 and 3.
 - B. 1 and 4.
 - C. 1 an5.

Answer: B.

Sealants are used to:

- prevent caries in newly erupted teeth.
- arrest incipient caries.
- prevent odontopathogenic bacterial growth in sealed fissures.
- prevent infection of other sites.

841. *The efficacy of pit and fissure sealants is affected by:*

- A. opacity of the sealant.
- B. type of polymerization reaction.
- C. occlusal relationship.
- D. stage of tooth eruption.
- E. systemic fluoride treatment.

Answer: D.

842. *In advanced periodontitis with marked mobility, teeth may be splinted:*

- A. to improve comfort for the patient.
- B. as splinting helps in transmitting the force to the adjacent teeth to reduce the load on the involved teeth.

Answer: A.

The rigidity of the splint and the number of teeth used determines how the forces are distributed. The most common indication to splint mobile teeth is to improve patient comfort and provide better control of the occlusion if the anterior teeth are mobile. It is critical that adequate crown length on the

teeth is being splinted so that the interproximal connectors do not impinge on the interdental papilla. Also, adequate space is needed between the connector and the papilla for access with dental floss anteriorly and an interproximal brush on posterior teeth (Carranza).

843. *Use of inhalation general anaesthesia:*

- A. Halothane should not be less than 5%.
- B. Oxygen must not be less than 30%.

Answer: B.

844. *In severe periodontitis; probe:*

- A. gets stopped by calculus.
- B. goes beyond junctional epithelium into the connective tissues of.
- C. touches coronal end of (at the end) junctional epithelium.
- D. touches the middle of junctional epithelium.
- E. touches sulcular epithelium.

Answer: B.

845. *58 years old male has had a 60 yo WM course of radiation given for carcinoma of tongue. Patient complains of pain associated with poor dentition. The dental management would be:*

- A. Immediate extraction of any poor teeth under local anaesthetic with antibiotic coverage.
- B. Segmental dental clearance and closure to eliminate problems.
- C. No dental treatment may be due to neuronc of neoplasms.
- D. Clearance of poor dentition followed by hyperbaric oxygen treatment plus a primary closure of wounds under antibiotic coverage.
- E. No extraction as radionecrosis is an important sequelae.

Answer: D.

846. *Characteristic of Squamous Cell Carcinoma of the tongue:*

- A. more in white skinned people.
- B. more in alcohol drinking smoking males.
- C. associated with Plummer-Wilson-Syndrome.

Answer: B.

847. *Squamous cell carcinoma of the lip, what is correct?*

- A. More in white skinned people.
- B. Treatment is always by radiotherapy.
- C. Common in upper lip.
- D. Rare in Australians.

Answer: A.

848. *Characteristic of Squamous Cell Carcinoma of the lip:*

- A. It reacts far simply to radiotherapy.
- B. metastizes mainly by blood.
- C. relatively rare in Australia.

Answer: A.

849. *Which of the following sites for squamous cell carcinoma has the best prognosis?*

- A. Lower lip.
- B. Retromolar area.
- C. Gingiva.
- D. Buccal mucosa.
- E. Hard palate.

Answer: A.

850. Which of the following is the LEAST likely primary site for the development of oral squamous cell carcinoma in the elderly?

- A. Dorsum of the tongue.
- B. Floor of the mouth.
- C. Lateral border of the tongue.
- D. Tonsillar fossa.

Answer: A.

Extraorally, lower lip is most frequent site.

Intraorally, tongue is most frequent site particularly lateral border, adjacent floor of the mouth and lingual aspect of alveolar margin forming U-shaped area extending posteriorly to oropharynx (Cawson Essentials).

851. Most common site of squamous cell carcinoma:

- A. Postero-lateral border of tongue.
- B. Floor of the mouth.
- C. Buccal mucosa.
- D. Lip.
- E. Skin.

Answer: D.

852. Which type of dentin is not formed due to pulp pathology?

- A. Reparative dentin
- B. Secondary dentin
- C. Primary dentin
- D. Reaction dentin
- E. Tertiary dentin

Answer: C.

853. All are required for the satisfactory bonding of an amalgam restoration in a badly broken molar EXCEPT:

- A. resistance form.
- B. mechanical retention.
- C. Enamel & Dentin conditioning.
- D. Pin retention.

- Bonding amalgam restorations gives promise for reduced need for mechanical retention features and resistance form which conserves sound tooth tissues.
- Bonding amalgam restorations help to restore tooth integrity and fracture resistance.
- Bonding amalgam restorations assist in the improvement of the marginal seal with potentially less sensitivity.

Answer: B (Appendix I)

Amalgambond is based on a dentinal bonding system developed in Japan by Nakabayashi and co-workers³³ more than a decade ago and is very similar to above-mentioned Superbond. Amalgambond uses a solution of 10% citric acid and 3% ferric chloride to remove the smear layer and demineralise the dentine surface. A primer is applied after the dentine is conditioned. Finally, a self-curing methacrylate resin is applied to impregnate the primed dentine. The resin contains an adhesive monomer called 4-META.

854. In children a disease with enzyme deficiency is:

- A. Hypophosphatasia.
- B. Cyclic neutropenia.
- C. Juvenile periodontitis.

Answer: A.

Option A: Hypophosphatasia is caused by deficiency of alkaline phosphatase. It is a metabolic bone disease characterized by hypomineralisation of bones and early loss of deciduous teeth in children especially incisors.

855. What is correct regarding Hydrocortisol therapy?

- A. 10 mg per day does not make a significant adrenergic depression.
- B. Hydrocortisone can be given parenterally only.
- C. Glucocorticoids have antiinflammatory action.
- D. Hydrocortisone has only glucocorticoid action.
- E. Corticosteroids cause a decrease in blood sugar.

Answer: C (Appendix II).

856. A patient reports to you with an exophytic lesion on the tongue and a raised white blood cell count of 2×10^9 per ml. You would:

- A. Do a biopsy.
- B. Refer for serologic testing.
- C. Give acyclovir.

Answer: A.

Option A: Although that we have to do serological test before biopsy to check the Ag-Ab reaction BUT the clinical feature of this lesion (exophytic), site of the lesion (tongue) and increase WBC count favor to do biopsy.

Option B: Serology is the scientific study of serum and other bodily fluids. In practice, the term usually refers to the diagnostic identification of antibodies in the serum. Such antibodies are typically formed in response to an infection (against a given microorganism), against other foreign proteins (in response, for example, to a mismatched blood transfusion), or to one's own proteins (in instances of autoimmune disease).

857. What is true about pemphigus?

- A. it is an autoimmune disease that affects basal layer.
- B. responds easily to topical corticosteroids.
- C. has exophytic lesion.
- D. antibodies circulating in blood, that can be detected.

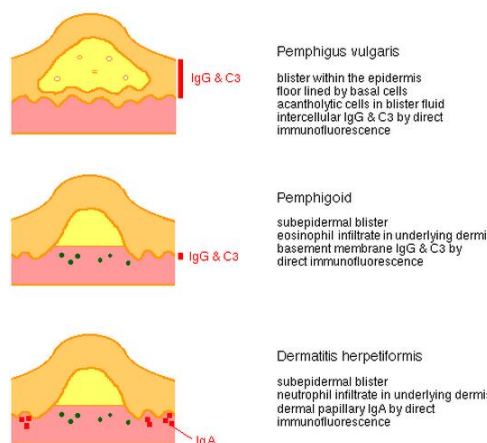
Answer: D (Appendix III).

Option A: It is an autoimmune disease affecting the desmosome.

Option B: Treatment is complicated that need oral corticosteroids or cyclosporine alone or with topical immunosuppressant (TG, 82).

Option C: it is vesiculobullous lesion.

Option D: Definitive diagnosis also requires the demonstration of anti-desmoglein autoantibodies by direct immunofluorescence on the skin biopsy. These antibodies appear as IgG deposits along the desmosomes between epidermal cells. Anti-desmoglein antibodies can also be detected in a blood sample using the ELISA technique (indirect immunofluorescence).



858. A discrete, smooth-surfaced, non-fluid filled exophytic oral mucosal lesion with no color change is indicative of a/an:

- A. mucocele.
- B. papilloma.
- C. hemangioma.
- D. fibroma.
- E. intramucosal nevus.

Answer: D.

Option B: Papilloma is not smooth surface.

859. *Strawberry gingivitis is a manifestation of:*

- A. Scarlet fever.
- B. Iron deficiency anemia.
- C. Wegner granulomatosis.
- D. Vitamin B deficiency.
- E. None of the above

Answer: C.

Option A: Strawberry tongue in scarlet fever.

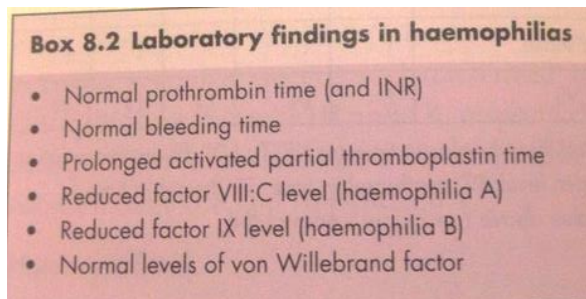
Option C: Hyperplastic gingival lesions or strawberry gingivitis, is a characteristic sign of Wegener's granulomatosis. The latter consists of reddish-purple exophytic gingival swellings with petechial haemorrhages thus resembling strawberries.

860. *Normal prothrombin time and elevated partial thromboplastin time is seen in:*

- A. factor VIII deficiency.
- B. thrombocytic purpura.
- C. Leukemia.
- D. von Willibrand disease.

Answer: A.

Option D: only in sever cases.



861. *What is the best reason to promote tooth brushing to the public?*

- A. Less fissure caries.
- B. Less gingivitis.
- C. Gingival massage.

Answer: B.

862. *What is untrue about diabetes?*

- A. Hypoglycaemia is more common than hyperglycaemia.
- B. Insulin-dependent patients are of more concern than non insulin-dependend.
- C. Adrenalin causes a decrease in the blood glucose level.

Answer: C.

Option C: Adrenalin definitely raise blood glucose.

Adrenal medulla	1) Enhances release of glucose from glycogen; 2) Enhances release of fatty acids from adipose tissue.	Raises
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863. *Which of the following is a feature of Streptococcus mutans?*

- A. It does not require a special environment to grow.
- B. It can be easily transported from one part of the oral cavity to another.
- C. It has the ability to restructure carbohydrates.

Answer: C (Boucher, 281).

864. *What does the term "caries prevalence" mean?*

- A. The total number of carious areas affected and any present caries.
- B. The individual risk for a patient to acquire caries.

Answer: B.

865. *Which of the following are features of herpetic gingivostomatitis.*

1. Irritability.
2. Fever.
3. occurs in teenagers.
4. vesicles occur only on buccal mucosa and tongue.

- A. 1+2+3.
- B. 1+2+4.
- C. 1+4.
- D. all of the above.

Answer: A.

Option 3: It can happen in teenagers as well. As improved living conditions have resulted in fewer individuals coming into contact with the virus during their childhood (Odell & TG, 79).

Option 4: It affect gingiva and oral mucosa.

866. *What is true about halothane?*

- A. It depresses the myocardium.
- B. Reflex trigeminal stimulation is uncommon.

Answer: A.

Halothane anesthesia reduces the blood pressure, and frequently decreases the pulse rate. The greater the concentration of the drug, the more evident these changes become. Atropine may reverse the bradycardia. Halothane anesthesia also causes dilation of the vessels of the skin and skeletal muscles. It does not cause the release of catecholamines from adrenergic stores.

867. *Halothane anaesthetic by:*

- A. Hepatotoxic reaction.
- B. Nephrotoxic reaction.

Answer: A.

868. *When used for conscious sedation, nitrous oxide may:*

1. produce signs of inherent myocardial depression.
 2. produce an indirect sympathomimetic action.
 3. cause the patient to sweat.
 4. produce numbness of the extremities.
- A. (1) (2) (3).
 - B. (1) and (3).
 - C. (2) and (4).
 - D. (4) only.
 - E. All of the above.

Answer: E.

N₂O when used as a conscious sedation only produce numbness of extremities. If used as an inhalation anesthetic agent with halothane or enflurane it can cause direct myocardial depressant and also stimulate the sympathetic nervous system as a result of these two actions, cardiac output remain unchanged.

869. *A patient in your dental chair suddenly becomes agitated with shallow breathing, full pulse and a blood pressure of 150/80. You would:*

- A. Give oxygen.
- B. Give insulin.
- C. Give glucose.
- D. Place patient in supine position.

Answer: D.

Increased systolic but normal diastolic pressure is suggestive of anxiety. This condition is vasovagal and the patient should be placed in a supine position with the legs raised. The patient has shallow breathing not having difficulty in breathing (hyperventilation). In vasovagal bradycardia occurs initially due to pooling of blood into extremities therefore venous return is reduced and so the patient has shallow breathing. Even the pulse is weak initially, which rebounds to become rapid.

Management of hyperventilation is different (Appendix IV)

870. *Endodontic therapy is CONTRAINDICATED in teeth with:*

- A. inadequate periodontal support.
- B. pulp stones.
- C. constricted root canals.
- D. accessory canals.
- E. curved roots.

Answer: A.

871. *After performing an apicoectomy, which of the following should be placed in the bony defect prior to suturing the flap?*

- A. Corticosteroids.
- B. Antibiotic powder.
- C. Oxidized cellulose.
- D. Bone wax.
- E. Nothing.

Answer: E.

872. *A primordial cyst:*

- A. develops in place of a tooth.
- B. attaches to the apex of a tooth.
- C. attaches to the crown of a tooth.
- D. remains after the tooth is extracted.

Answer: A.

873. *The primordial cyst probably results from:*

- A. cystic degeneration of the stellate reticulum **early in the formation of the tooth.**
- B. epithelial remnants in the periodontal ligament.
- C. an extension of pulpal inflammation after death of the pulp.
- D. failure of formation of the enamel matrix.
- E. the dental lamina.

Answer: A.

874. *The most appropriate treatment for a unicystic ameloblastoma of the posterior mandible in an 18 year old patient is:*

- A. Root canal therapy.
- B. Hemi mandibulectomy.
- C. Block resection.
- D. Curettage.
- E. Radiotherapy.

Answer: D.

Unicystic ameloblastoma **recurrence rate of lesion is lower** than that for characteristic ameloblastoma, thus indicating less aggressive type of lesion. Despite the obvious risk of recurrence, conservative treatment with enucleation and curettage seemed to be justified in preference to mutilating radical surgery. Especially the patient is very young and resection cause disfigurement.

875. *Radiographically, the lamina dura is a:*

- A. thick layer of bone forming the inner surface of the alveolus.
- B. thin radiolucent line around the roots of the teeth.
- C. thick layer of cortical bone.
- D. thin radiopaque line around the roots of the teeth.

Answer: D.

876. *Benzodiazepines have all of the following actions EXCEPT:*

- A. muscle relaxation.
- B. sedation.
- C. amnesia.
- D. anticonvulsant action.
- E. analgesia.

Answer: E.

877. *A patient presents with constant excruciating pain from a tooth that feels "long" and is sensitive to pressure. The most likely diagnosis would be a/an:*

- A. acute pulpitis.
- B. chronic abscess.
- C. acute apical periodontitis.
- D. granuloma.

Answer: C.

878. *Having just completed endodontic treatment on a maxillary central incisor, you are preparing the canal for a post when you inadvertently perforate the labial surface of the root. You would:*

- A. extract the tooth.
- B. cement the post using zincoxyphosphate cement.
- C. cement the post, then raise a flap and seal the defect surgically with amalgam.
- D. re-prepare the canal so the post is now totally within the canal and cement the post.

Answer: C.

879. *In restoring occlusal anatomy, the protrusive condylar path inclination has its primary influence on the morphology of*

- A. cusp height.
- B. anterior teeth only.
- C. mesial inclines of maxillary cusps and distal inclines of mandibular cusps.
- D. mesial inclines of mandibular cusps and distal inclines of maxillary cusps.

Answer: D.

880. *Which of the following is most often associated with a non-vital tooth?*

- A. Periapical cyst.
- B. Internal resorption.
- C. Periapical cementoma.
- D. Hyperplastic pulpitis.

Answer: A.

881. *An ameloblastoma can develop from the epithelial lining of which of the following cysts?*

- A. Periapical.
- B. Dentigerous.
- C. Residual.
- D. Lateral periodontal.

Answer: B.

882. *A patient with complete dentures complains of clicking. The most common causes are*

- A. reduced vertical dimension and improperly balanced occlusion.
- B. excessive vertical dimension and poor retention.
- C. use of too large a posterior tooth and too little horizontal overlap.
- D. improper relation of teeth to the ridge and excessive anterior vertical overlap.

Answer: B.

883. *Twenty-four hours after placement of a Class II amalgam restoration, a patient returns complaining of discomfort when "biting". There are no other symptoms. It is most likely that the:*

- A. pulp was exposed.
- B. restoration is leaking.
- C. restoration is in supra-occlusion.
- D. amount of base material is inadequate.

Answer: C.

884. *For which of the following teeth is the risk of root fracture increased if a rotational force is used during extraction?*

- A. Upper canine.
- B. Lower canine.
- C. Upper first bicuspid.
- D. Lower first bicuspid.
- E. Upper lateral incisor.

Answer: C.

Upper 1st premolar is more liable to fracture even with buccopalatal movement that is why it is called king of fracture. Then upper lateral incisor because of distopalatal curvature.

885. *The most appropriate treatment following the extraction of a first primary molar in a 4-year old child is:*

- A. regular assessment of arch development.
- B. to perform space analysis.
- C. insertion of a space maintainer.
- D. extraction of the contra-lateral molar.
- E. extraction of the opposing molar.

Answer: C.

886. *A mucocele differs from a mucoepidermoid carcinoma because the mucocele:*

- A. contains mucus.
- B. affects young people.
- C. occurs on the lower lip.
- D. is caused by trauma.

Answer: D.

Mucocele is not restricted to lower lip only, it might occur on buccal mucosa or any other area could be easily traumatized.

887. *While the teeth are set in wax, dentures are tried in to:*

- A. verify the maxillomandibular records.
- B. verify the vertical dimension of occlusion.
- C. evaluate esthetics.
- D. All of the above.

Answer: D.

888. *Under normal conditions, the most definitive test to confirm the loss of pulp vitality is*

- A. applying warm gutta percha to the crown.
- B. cutting into the dentin without anaesthetic.
- C. applying ethyl chloride to the crown.
- D. performing a radiographic examination of the tooth.
- E. performing an electric pulp test.

Answer: B.

A test preparation can be performed to help in the evaluation of pulpal vitality when a large restoration in the tooth may be resulting in false-negative responses with other evaluation methods. Or if other pulp testing failed to give a definite diagnosis (Odell)

889. For which of the following pathological conditions would a lower central incisor tooth be expected to respond to heat, cold and electric pulp test?

- A. Apical cyst.
- B. Acute apical abscess.
- C. Periapical osteofibrosis.
- D. Chronic apical periodontitis.

Answer: C.

periapical osteo fibrosis is a cementoma pathology around vital teeth.

890. What clinical evidence would support a diagnosis of acute dento-alveolar abscess?

- 1. A negative reaction to the electric vitality tester.
 - 2. A positive reaction of short duration to cold.
 - 3. A positive reaction to percussion.
 - 4. Presence of a draining fistula.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: B.

891. Which of the following microorganisms are most frequently found in infected root canals?

- A. Streptococcus viridans.
- B. Staphylococcus aureus.
- C. Lactobacilli.
- D. Enterococci.
- E. Staphylococcus albus.

Answer: D.

892. In the mandibular first premolar, the occlusal dovetail of an ideal disto-occlusal amalgam preparation is usually not extended into the mesial fossa because of the:

- A. small lingual lobe.
- B. large buccal cusp.
- C. large buccal pulp horn.
- D. prominent transverse ridge.

Answer: D.

893. When removal of carious dentin results in an exposure of non-vital pulp, the treatment of choice is to:

- A. institute endodontic treatment.
- B. cap the exposed pulp horn with calcium hydroxide.
- C. occlude the cavity with a light packing of cotton moistened with eugenol.
- D. place a temporary restoration and observe.

Answer: A.

894. The initial treatment of choice for a 16-year old patient, who presents with multiple extensive carious lesions, is to place the patient on a preventive regime and to:

- A. place amalgam restorations over the next few months.
- B. excavate caries and place temporary restorations within the next few weeks.
- C. delay any treatment until the hygiene improves.
- D. restore all teeth with composite resin over the next few months.

Answer: B.

895. *A protective mechanism of the dental pulp to external irritation or caries is the formation of:*
- A. pulp stones.
 - B. secondary dentin.
 - C. secondary cementum.
 - D. primary dentin.

Answer: B.

But the best is tertiary dentin or reparative dentin

896. *Condensing osteitis in the periapical region is indicative of a/an:*
- A. acute inflammation of the pulp.
 - B. pulpal abscess.
 - C. chronic inflammation of the pulp.
 - D. early apical abscess formation.
 - E. None of the above.

Answer: C.

Condensing osteitis is a periapical inflammatory disease that results from a reaction to an infection of periodontal origin. This causes more bone production rather than bone destruction in the area (most common site is near the root apices of premolars and molars). The lesion appears as a radiopacity in the periapical area hence the sclerotic reaction. The sclerotic reaction results from good patient resistance and a low degree of virulence of the offending bacteria. The associated tooth may be carious or contains a large restoration. Usually associated with a non-vital tooth

897. *Which of the following conditions is most likely to be associated with a draining fistula?*
- A. Chronic periapical periodontitis.
 - B. Reversible pulpitis.
 - C. Hypercementosis.
 - D. Traumatic bone cyst.

Answer: A.

898. *Contraction of the external (lateral) pterygoid muscle pulls the disc of the temporomandibular joint:*
- A. forward and medially.
 - B. backward and medially.
 - C. forward and laterally.
 - D. backward and laterally.
 - E. None of the above.

Answer: A.

899. *Hyperkeratosis, acanthosis, dysplasia, increased mitosis, intact basal cell layer and chronic inflammatory cells are histologic features that may be found in*
- A. squamous cell carcinoma.
 - B. carcinoma in situ.
 - C. papillofibroma.
 - D. endothelioma.

Answer: B.

900. *Osteomyelitis of the mandible may follow:*
1. radiotherapy.
 2. dentoalveolar abscess.
 3. fracture.
 4. Vincent's angina.
- A. (1) (2) (3)

- B. (1) and (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: E.

Vincent's Angina is an acute necrotizing infection of the pharynx caused by a combination of fusiform bacilli (*Fusiformis fusiformis* - a Gram -ve bacillus) and spirochetes (*Borrelia vincentii*). These are the same organisms that cause a gingivostomatitis known as trench mouth.

901. Which of the following is/are associated with an unerupted tooth?

- 1. Odontogenic adenomatoid tumor.
 - 2. Periapical cemental dysplasia.
 - 3. Calcifying epithelial odontogenic tumor.
 - 4. Cementoblastoma.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: B.

902. A 15-year old presents with hypoplastic enamel on tooth 15. All other teeth are normal. This was most probably caused by a/an:

- A. vitamin D deficiency.
- B. generalized calcium deficiency.
- C. high fever encountered by the patient when he had measles at age 3.
- D. infection of tooth 5.5 during the development of tooth 1.5.
- E. hereditary factor.

Answer: D.

903. **The greatest single factor in reducing radiation exposure in dentistry is:**

- A. higher kVp.
- B. proper filtration.
- C. high speed film.
- D. collimation of the X-ray beam.

Answer: D.

904. Which of the following sites for squamous cell carcinoma has the best prognosis?

- A. Lower lip.
- B. Retromolar area.
- C. Gingiva.
- D. Buccal mucosa.
- E. Hard palate.

Answer: A.

905. A decrease of which of the following is indicative of hypoparathyroidism?

- A. Serum phosphorus.
- B. Serum calcium.
- C. Thyroid activity.
- D. Serum alkaline phosphatase.

Answer: B.

906. *The microscopic appearance of the central giant cell granuloma of the jaws is similar to that of lesions which occur in:*

- A. hyperparathyroidism.
- B. Paget's disease.
- C. cleidocranial dysplasia (dysostosis).
- D. hyperpituitarism.

Answer: A.

907. *A patient who uses nitroglycerine has:*

- A. rheumatic heart disease.
- B. asthma.
- C. coronary artery disease.
- D. high blood pressure.
- E. cardiac arrhythmia.

Answer: C.

908. *The normal white cell differential count for neutrophils is:*

- A. 10-19%.
- B. 20-29%.
- C. 30-39%.
- D. 40-65%.
- E. 66-90%.

Answer: D.

909. *The benign neoplasm that originates from squamous epithelium is called a/an:*

- A. adenoma.
- B. choriocarcinoma.
- C. chondroma.
- D. lipoma.
- E. papilloma.

Answer: E.

910. *A decrease in the neutrophil count is present in*

- A. granulocytopenia (agranulocytosis).
- B. iron deficiency anemia.
- C. myeloid leukemia.
- D. leukocytosis.
- E. thrombocytopenic purpura.

Answer: A.

911. *The apical region of a non-vital tooth with a deep carious lesion may radiographically show:*

1. widening of the periodontal space.
2. loss of lamina dura.
3. a circumscribed radiolucency.
4. calcification of the periodontal membrane.

A. (1) (2) (3)

B. (1) and (3)

C. (2) and (4)

D. (4) only

E. All of the above.

Answer: A.

912. Which of the following combinations of milliamperage and kilovoltage will give X-radiation with the maximum penetration?

- A. 10kVp - 65ma
- B. 85kVp - 5ma
- C. 90kVp - 10ma
- D. 65kVp - 15ma
- E. 75kVp - 40ma

Answer: C.

913. Intensifying screens are used when exposing extra-oral radiographic films to:

- A. improve detail.
- B. decrease exposure time.
- C. decrease scatter radiation.
- D. increase the quantity of X-rays necessary to produce a certain photographic effect on silver.
- E. None of the above.

Answer: B.

914. An end result of ionizing radiation used to treat oral malignancies is:

- A. deformity of the jaws.
- B. reduced vascularity of the jaws.
- C. increased vascularity of the jaws.
- D. increased brittleness of the jaws.
- E. none of the above.

Answer: B.

915. Selection of the appropriate kilovoltage for dental films is influenced by:

- A. line voltage fluctuation.
- B. diameter of the primary beam of radiation.
- C. type of timer.
- D. tissue density.
- E. filter thickness.

Answer: D.

916. A radiopaque area within the alveolar process containing several rudimentary teeth suggests a/an:

- A. periapical cemental dysplasia.
- B. ameloblastoma.
- C. compound odontoma.
- D. complex odontoma.
- E. Pindborg tumor.

Answer: C.

917. A patient complains of acute pain 24 hours after the insertion of a restoration in a tooth with no pre-existing periapical pathology. The tooth is vital and tender to percussion. The radiograph will show:

- A. an apical radiolucency.
- B. acute osteitis.
- C. root resorption.
- D. condensing osteitis.
- E. none of the above.

Answer: E.

918. *Radiographically, the opening of the incisive canal may be misdiagnosed as a:*

1. branchial cyst.
 2. nasopalatine cyst.
 3. nasolabial cyst.
 4. radicular cyst.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: C.

919. *On a bitewing radiograph of posterior teeth, which of the following is most likely to be misdiagnosed as proximal caries?*

- A. Cemento-enamel junction.
- B. Marginal ridge.
- C. Carabelli cusp.
- D. Calculus.
- E. Cemental tear.

Answer: A.

920. *Which therapeutic agent is absolutely CONTRAINDICATED in the treatment of herpes simplex?*

- A. Vitamin C.
- B. Acetylsalicylic acid.
- C. Antibiotics.
- D. Corticosteroids.
- E. Local anesthetics.

Answer: D.

Option D: as it reduce the effect of immune system.

Option B: Aspirin lowers the prostaglandins that cause inflammation and should reduce the severity of symptoms and recurrence.

921. *Basal cell carcinoma:*

- A. metastasizes to the submental lymph nodes.
- B. metastasizes to the submaxillary lymph nodes.
- C. metastasizes to the cervical lymph nodes.
- D. metastasizes to the pre-auricular lymph nodes.
- E. does not normally metastasize.

Answer: E.

922. *In the early stage, a periapical abscess can be differentiated from a lateral periodontal abscess by:*

- A. pain.
- B. type of exudate.
- C. tenderness to percussion.
- D. response of pulp to electrical stimulation.
- E. radiographic examination.

Answer: D.

923. *In the presence of an acute bacterial infection, laboratory tests will show an increase in*

- A. polymorphonuclear leukocytes.
- B. plasma cells.
- C. lymphocytes.
- D. monocytes.
- E. eosinophils.

Answer: A.

924. *A patient presents with apparent paralysis of one side of the face which appeared the day before. What is the most likely diagnosis?*

- A. Glossodynia.
- B. Bell's palsy.
- C. Myasthenia gravis.
- D. Trigeminal neuralgia.

Answer: B.

925. *Which of the following tumors has the best prognosis in terms of patient survival?*

- A. Osteosarcoma.
- B. Melanoma.
- C. Ameloblastoma.
- D. Adenocarcinoma.

Answer: C.

926. *Signs and symptoms of diabetic patients include:*

- 1. polyuria.
- 2. polydipsia.
- 3. glycosuria.
- 4. dysphagia.
- A. (1) (2) (3)
- B. (1) and (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: A.

927. *Which gingival manifestation(s) would be expected in a patient with a blood dyscrasia?*

- 1. Enlargement.
- 2. Bleeding.
- 3. Ulceration.
- 4. Atrophy.
- A. (1) (2) (3)
- B. (1) and (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: A.

928. *Mucocele are most commonly found in the:*

- A. upper lip.
- B. lower lip.
- C. tongue.
- D. buccal mucosa.
- E. soft palate.

Answer: B.

929. *The main purpose of collimation of an x-ray beam is to:*

- A. permit the use of lower kilovoltage during exposure.
- B. filter out useless short rays.
- C. permit use of the long cone technique.
- D. reduce the diameter of the primary beam.
- E. reduce exposure time.

Answer: D.

930. *Multiple supernumerary teeth are most commonly found in*

- A. cherubism.
- B. cretinism.
- C. hypothyroidism.
- D. cleidocranial dysplasia.
- E. Down's syndrome.

Answer: D.

931. *Which of the following results from a necrotic pulp?*

- A. Dentigerous cyst.
- B. Lateral periodontal cyst.
- C. Dental granuloma.
- D. Pulp polyp.
- E. Periapical osteofibrosis.

Answer: C.

932. *Mottled enamel is a/an*

- A. form of enamel hypoplasia.
- B. manifestation of fluorosis.
- C. enameloma.
- D. side effect of tetracycline therapy.

Answer: B.

933. *A 12-year old boy has a history of severe sore throat followed by migratory arthralgia and swollen joints of the extremities. This history is suggestive of:*

- A. gout.
- B. osteoarthritis.
- C. Still's disease.
- D. rheumatic fever.
- E. rheumatoid arthritis.

Answer: D.

934. *Myxoedema is associated with:*

- A. insufficient parathyroid hormone.
- B. excessive parathyroid hormone.
- C. insufficient thyroid hormone.
- D. excessive thyroid hormone.

Answer: C.

Myxedema or myxoedema is a term used synonymously with severe hypothyroidism. It is also used to describe a dermatological change that can occur in hypothyroidism. Myxedema refers to deposition of mucopolysaccharides in the dermis, which results in swelling of the affected area.

935. *The finding of "acid-fast" microorganisms in sputum suggests the presence of*
- A. Mycobacterium tuberculosis.
 - B. Diplococcus pneumoniae.
 - C. Streptococcus pyogenes.
 - D. Neisseria gonorrhoeae.

Answer: A.

936. *Excessive formation of scar tissue beyond the wound margin is called:*
- A. a fibroma.
 - B. a keloid.
 - C. a fibro-epithelial polyp.
 - D. epithelial hyperplasia.

Answer: B.

937. *Median palatine cysts are classified as*
- A. developmental.
 - B. residual.
 - C. idiopathic.
 - D. odontogenic.
 - E. none of the above.

Answer: A.

938. *In radiography, minimum magnification and maximum definition are achieved by:*
- A. minimum OFD (object-film distance) and minimum FFD (focal-film distance).
 - B. minimum OFD (object-film distance) and maximum FFD (focal-film distance).
 - C. maximum OFD (object -film distance) and maximum FFD (focal-film distance).
 - D. maximum OFD (object-film distance) and minimum FFD (focal-film distance).

Answer: B

939. *Ankylosis is commonly:*
- A. associated with a non-vital pulp.
 - B. the result of a root fracture.
 - C. associated with a root penetrating cavity.
 - D. resulting in a submerged tooth, out of occlusion.
 - E. found in permanent teeth.

Answer: D.

940. *An ameloblastoma is most frequently found in:*
- A. the anterior region of the maxilla.
 - B. the mandible, near the junction of the body and the ramus.
 - C. the posterior region of the maxilla.
 - D. in the anterior region of the mandible near the midline.

Answer: B.

941. *Intermittent painful swelling in the submandibular region that increases at mealtime is indicative of:*
- A. a ranula.
 - B. a blockage of Wharton's duct.
 - C. Ludwig's angina.
 - D. a blockage of Stensen's duct.
 - E. an epidemic parotitis.

Answer: B.

942. Which of the following is/are NOT usually affected by hereditary ectodermal dysplasia?

- A. Salivary glands.
- B. Teeth.
- C. Sweat glands.
- D. Hair.
- E. Fingernails.

Answer: A.

943. Which of the following histopathological features would be the most reliable indicator of the malignancy of a neoplasm?

- A. Hyperchromatism.
- B. Pleomorphism.
- C. Encapsulation.
- D. Invasion.
- E. Degeneration.

Answer: D.

944. Which one of the following would be of greatest value in determining the etiology of an oral ulceration?

- A. History of the oral lesion.
- B. Cytological smear.
- C. Systemic evaluation.
- D. Laboratory tests.

Answer: A.

945. Which of the following will impede healing following the surgical closure of an oro-antral fistula?

1. Poor flap design.
 2. Excessive tissue tension.
 3. Blowing the nose.
 4. Sinus infection.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: E.

946. The most likely complication associated with the extraction of an isolated maxillary second molar is:

- A. a dry socket.
- B. nerve damage.
- C. fracture of the malar ridge.
- D. fracture of the tuberosity.

Answer: D.

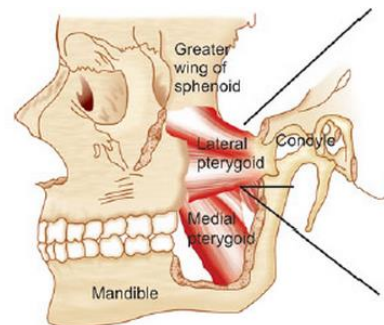
947. A Le Fort I or Guerin fracture is a

- A. fracture of the zygomatic arch.
- B. horizontal fracture of the maxilla.
- C. fracture of the malar complex involving the floor of the orbit.
- D. pyramidal fracture of the maxilla.
- E. cranio-facial dysjunction.

Answer: B.

948. An examination of a patient who has fallen on their chin and fractured the right subcondylar region would reveal

1. trismus.
 2. deflection of the mandible to the left on opening.
 3. pain and tenderness.
 4. paresthesia of the right lower lip.
- A. (1) (2) (3)
 B. (1) and (3)
 C. (2) and (4)
 D. (4) only
 E. All of the above.



Answer: B.

Condylar fractures lead to deflection of mandible on same side of injury and ankylosis will deflect mandible towards the opposite side

949. A patient presents with pain in the maxilla following a severe cold. The teeth react normally to pulp tests and there is no clinical or radiographic evidence of caries or other pathosis. The patient probably has:

- A. atypical facial neuralgia.
- B. pulpitis.
- C. sinusitis.
- D. trigeminal neuralgia.

Answer: C.

950. Which of the following features would be most indicative of a cracked tooth?

- A. Periapical radiolucency.
- B. Hypersensitivity to thermal stimuli.
- C. Pain upon pressure.
- D. Absent vitalometric response.

Answer: C.

951. **In an acute upper airway obstruction, the entry to the airway on an emergency basis should be made at the:**

- A. cricoid cartilage.
- B. thyroid notch.
- C. thyroid membrane.
- D. cricothyroid membrane.
- E. first tracheal ring.

Answer: D.

952. Ludwig's angina may cause death by:

- A. heart failure.
- B. asphyxia.
- C. convulsions.
- D. paralysis of muscles of respiration.
- E. pyemia.

Answer: B.

953. *If an odontogenic infection involves the pterygomandibular space, the most obvious clinical sign will be:*

- A. trismus.
- B. facial swelling.
- C. swelling in the submandibular area.
- D. rise in body temperature above 39°C (102°F).

Answer: A.

954. *It is difficult to obtain satisfactory anesthesia in the presence of infection near the injection site because:*

- A. the swelling causes increased pressure on the nerves.
- B. increased blood supply carries the anesthetic solution away too fast.
- C. acidity of the infected tissue inhibits action of the anesthetic agent.
- D. alkalinity of the infected tissue inhibits action of the anesthetic agent.

Answer: C.

955. *A patient who is jaundiced because of liver disease has an increased risk of*

- A. postextraction bleeding.
- B. cardiac arrest.
- C. postoperative infection.
- D. anaphylactic shock.
- E. pulmonary embolism.

Answer: A.

The synthesis of clotting factors is affected.

Other options without option E.

- A. (1) and (3)
- B. (1) (2) (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: A

956. *Which of the following antibiotics may be cross-allergenic with penicillin?*

- A. Neomycin.
- B. Cephalexin.
- C. Clindamycin.
- D. Erythromycin.
- E. Tetracycline.

Answer: B.

957. *All the followings are used to treat moderate dysplasia except:*

- A. Neomycin.
- B. Laser ablation
- C. Excision
- D. Bleomycin
- E. Erythromycin.

Answer: E.

958. *Immediately following a posterior superior alveolar block injection, the patient's face becomes quickly and visibly swollen. The immediate treatment should be to:*

- A. use pressure followed by cold packs over the swelling.
- B. use hot packs over the swelling.
- C. refer the patient to a hospital.
- D. administer 100mg hydrocortisone intravenously.
- E. administer diphenhydramine hydrochloride (Benadryl) 50mg intravenously.

Answer: A.

959. *Which of the following local anesthetics is subject to inactivation by plasma esterases?*

- A. Procaine.
- B. Lidocaine.
- C. Prilocaine.
- D. Mepivacaine.
- E. Bupivacaine.

Answer: A.

960. *The therapeutic index of a drug is the ratio of*

- A. the effective dose to the toxic dose.
- B. half the toxic dose to half the effective dose.
- C. the maximum tolerated dose to the minimum effective dose.
- D. the lethal dose for 50% of animals to the effective dose for 50% of animals.

Answer: D.

961. *Tetracyclines:*

- 1. have no side effects.
 - 2. may increase susceptibility to super infections.
 - 3. are safe to use during pregnancy.
 - 4. have a wide spectrum of antibacterial activity.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: C.

962. *Which of the following drugs has/have antispasmodic properties?*

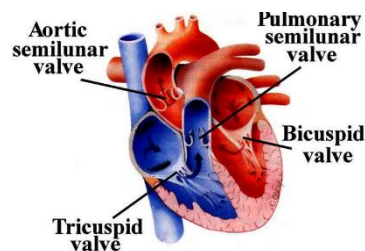
- 1. Codeine.
 - 2. Atropine.
 - 3. Acetylsalicylic acid.
 - 4. Methantheline.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: C.

963. Which valve is most commonly affected by rheumatic heart disease?

- A. Aortic.
- B. Pulmonary.
- C. Tricuspid.
- D. Mitral.

Answer: D.



964. Trismus is most frequently caused by:

- A. tetanus.
- B. muscular dystrophy.
- C. infection.
- D. mandibular fracture.

Answer: C.

965. Acetaminophen in therapeutic doses:

1. retards platelet function.
2. has strong anti-inflammatory properties.
3. produces CNS stimulation.
4. has antipyretic properties.

- A. (1) (2) (3)
- B. (1) and (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: D.

Acetaminophen (Paracetamol) is a pain reliever and a fever reducer. Acetaminophen is used to treat many conditions such as headache, muscle aches, arthritis, backache, toothaches, colds, and fevers. Paracetamol (acetaminophen) is generally considered to be a weak inhibitor of the synthesis of prostaglandins that has antipyretic but not anti-inflammatory.

966. Short-acting barbiturates are metabolized mainly in the

- A. liver.
- B. kidneys.
- C. small intestine.
- D. pancreas.
- E. spleen.

Answer: A.

967. Acquired Immune Deficiency Syndrome (AIDS) may be characterized by

1. candidiasis.
2. rapid weight loss and night sweats.
3. extreme malaise, fever or chills.
4. a smooth and red tongue.

- A. (1) (2) (3)
- B. (1) and (3)
- C. (2) and (4)
- D. (4) only
- E. All of the above.

Answer: E.

968. During drug-receptor interaction, local anaesthetics interfere with the transport of which of the following ions?

- A. Sodium.
- B. Calcium.
- C. Chloride.
- D. Potassium.
- E. Magnesium.

Answer: A.

969. A positive Nikolsky's sign is a diagnostic feature of:

- A. lichen planus.
- B. erythema multiforme.
- C. pemphigus.
- D. chronic marginal gingivitis.
- E. lupus erythematosus.

Answer: C.

970. Which properties increase the tendency of a drug to cross membranes?

- A. Non-ionized and high lipid solubility.
- B. Non-ionized and low lipid solubility.
- C. Ionized and low lipid solubility.
- D. Ionized and water solubility.

Answer: A.

971. Which of the following would you prescribe for an anxious dental patient with a peptic ulcer?

- A. Reserpine.
- B. Scopolamine.
- C. Silica gel.
- D. Diazepam.
- E. Calcium carbonate.

Answer: D.

972. Which of the following drugs is used in the treatment of MILD allergic reactions?

- A. Isoproterenol.
- B. Meperidine hydrochloride.
- C. Diphenhydramine hydrochloride.
- D. Propoxyphene.

Answer: C.

973. A 4-year old child has a normal complement of deciduous teeth, but in appearance they are grayish and exhibit extensive occlusal and incisal wear. Radiographic examination indicates some extensive deposits of secondary dentin in these teeth. This condition is typical of:

- A. cleidocranial dysplasia (dysostosis).
- B. amelogenesis imperfecta.
- C. neonatal hypoplasia.
- D. dentinogenesis imperfecta.

Answer: D.

974. Which of the following is *NOT* a sign or symptom of the myofascial pain dysfunction syndrome?

- A. Pain.
- B. Muscle tenderness.
- C. Limitation of jaw motion.
- D. "Clicking" or "popping" noise in the joints.
- E. Radiographic changes of the joint.

Answer: E.

975. The most logical explanation for causing swelling beneath the eye caused by an abscessed maxillary canine is that the:

- A. lymphatics drain superiorly in this region.
- B. bone is less porous superior to the root apex.
- C. infection has passed into the angular vein which has no valves.
- D. the root apex lies superior to the attachment of the caninus and levator labii superioris muscles.

Answer: D.

976. A patient presents with a non-healing lesion on the side of the nose. It has a rolled border and has been increasing in size. The most likely diagnosis is:

- A. a sebaceous cyst.
- B. a basal cell carcinoma.
- C. lupus erythematosus.
- D. verruca vulgaris.
- E. an epulis.

Answer: B.

977. Which of the following statements is/are true regarding diazepam?

1. Its long duration of action is partly due to active metabolites.
 2. It does not produce antianxiety effects after intramuscular administration.
 3. Intravenous administration is more reliable than oral.
 4. Its sedative effect can be reversed by naloxone.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: B.

978. In a standard inferior alveolar nerve block, which muscle is penetrated by the needle?

- A. Buccinator.
- B. Mylohyoid.
- C. Superior constrictor.
- D. Masseter.
- E. Medial (internal) pterygoid.

Answer: A.

979. *Epinephrine should NOT be used as a vasoconstrictor for patients with uncontrolled:*

- A. hyperthyroidism.
- B. hyperparathyroidism.
- C. myxoedema.
- D. asthma.

Answer: A.

Thyroid hormone increases the number of receptors available for epinephrine at the latter's target cell, thereby increasing epinephrine's effect on that cell. Another mechanism that both thyroid hormone and epinephrine increase the resting energy expenditure and release of glucose.

980. *Which of the following is the strongest stimulus to respiration?*

- A. Decrease in arterial pH.
- B. Increase in arterial oxygen.
- C. Decrease in arterial oxygen.
- D. Increase in arterial carbon dioxide.
- E. Decrease in arterial carbon dioxide.

Answer: D

981. *A 57-year old man received 10mg of diazepam intravenously. He becomes unresponsive to verbal stimuli, and his respirations are depressed to 10 per minute. Appropriate treatment is to*

- A. administer ephedrine.
- B. observe the patient.
- C. force the patient to drink coffee.
- D. support respiration with oxygen.

Answer: D.

982. *In the treatment of an acute anaphylactic reaction, the first drug that should be administered is:*

- A. hydroxyzine.
- B. epinephrine.
- C. hydrocortisone.
- D. diphenhydramine.

Answer: B.

983. *In a Factor VIII hemophiliac, which of the following laboratory findings is typical?*

- A. Prolonged clotting time.
- B. Prolonged bleeding time.
- C. Abnormally low blood platelet count.
- D. Prothrombin time 30% of normal.

Answer: A.

In order for blood to clot, the enzyme thrombin must be generated from the plasma precursor prothrombin. Thrombin then converts soluble fibrinogen into insoluble fibrin. Generation of thrombin involves the sequential activation of a number of other plasma clotting factor, this process is also being assisted by Ca^{++} and by factors released by platelets and damaged tissues . The time taken for blood to clot mainly reflects the time required for the generation of thrombin in this manner. If the plasma concentration of prothrombin or of some of the other factors is low (or if the factor is absent, or functionally inactive), clotting time will be prolonged. The expected range for clotting time is 4-10 mins.

984. *An acute periapical abscess originating from a mandibular third molar generally points and drains in the:*

- A. submandibular space.
- B. pterygomandibular space.
- C. buccal vestibule.
- D. buccal space.

Answer: A.

985. *During extraction of a maxillary third molar, the tuberosity is fractured. The tooth with the tuberosity remains attached to the surrounding soft tissue. You should*

- A. remove both and suture.
- B. leave both and stabilize, if possible.
- C. remove both, fill the defect with Gelfoam and suture.
- D. reflect the mucoperiosteum, remove the tooth, leaving the tuberosity in place and suture.

Answer: B.

986. *When sutures are used to reposition tissue over extraction sites, they should be:*

1. placed over firm bone where possible.
 2. interrupted, 15mm apart.
 3. firm enough to approximate tissue flaps without blanching.
 4. tight enough to produce immediate hemostasis.
- A. (1) (2) (3)
 - B. (1) and (3)
 - C. (2) and (4)
 - D. (4) only
 - E. All of the above.

Answer: B.

987. *What is the maximum number of cartridges (1.8ml) of a 2% local anesthetic solution that can be administered without exceeding a total dose of 300mg?*

- A. 2
- B. 4
- C. 6
- D. 8
- E. 10

Answer: D.

988. *Procaine (Novocaine) is an example of a local anaesthetic which is chemically classified as an:*

- A. amide.
- B. ester.
- C. aldehyde.
- D. ethamine.
- E. aminide.

Answer: B.

989. After an inferior alveolar nerve block injection, a patient would develop seventh nerve paralysis if the injection was made into the:

- A. internal maxillary artery.
- B. retroparotid space.
- C. internal pterygoid muscle.
- D. retromandibular vein.
- E. pterygoid plexus of veins.

Answer: B.

Seventh nerve is facial nerve.

990. A known insulin dependent diabetic patient feels unwell following the administration of a local anesthetic and becomes pale and sweaty. This condition does not respond to placing the patient in a supine position. The most likely cause is:

- A. syncope.
- B. adrenal insufficiency.
- C. hyperglycemia.
- D. hypoglycemia.
- E. carotid sinus reflex.

Answer: D.

991. A 5-year old child presents with yellow pigmentation of the deciduous teeth which under ultraviolet light gives a bright yellow fluorescence. This is diagnostic of:

- A. tetracycline pigmentation.
- B. pigmentation associated with chromogenic bacteria.
- C. amelogenesis imperfecta.
- D. enamel hypoplasia.

Answer: A.

992. The facial and lingual walls of the occlusal portion of a Class II cavity preparation for an amalgam in deciduous teeth should:

- A. be parallel to each other.
- B. diverge toward the occlusal surface.
- C. converge toward the occlusal surface.
- D. not follow the direction of the enamel rods.

Answer: C.

993. A radiographic examination of a 10-year old child reveals retention of deciduous teeth and presence of many unerupted supernumerary teeth. This is characteristic of

- A. cleidocranial dysplasia.
- B. ectodermal dysplasia.
- C. dentinogenesis imperfecta.
- D. congenital hypothyroidism.

Answer: A.

Option B: Ectodermal dysplasia is not a single disorder, but a group of syndromes all deriving from abnormalities of the ectodermal structures. In the development of tooth buds frequently result in congenitally absent teeth (in many cases a lack of a permanent set) and/or in the growth of teeth that are peg-shaped or pointed.

994. Which of the following patients should be referred for orthodontic treatment to close a diastema between maxillary central incisors?

1. An 8-year old with no abnormal oral habits.
 2. A 14-year old with no abnormal oral habits.
 3. A 3-year old with a 4mm overjet.
 4. An 8-year old with a previous thumb habit.
- A. (1) (2) (3)
 B. (1) and (3)
 C. (2) and (4)
 D. (4) only
 E. All of the above.

Answer: C.

995. A 12-year old child presents with characteristic tetracycline discoloration of the maxillary and mandibular incisors and permanent first molars. The probable age at which this child received tetracycline therapy was:

- A. 6 years.
- B. 4 years.
- C. 1 year.
- D. before birth.

Answer: C.

996. In a 4-year old child, the primary central incisor has discolored following a traumatic injury. The treatment of choice is:

- A. pulpotomy.
- B. pulpectomy.
- C. observation.
- D. extraction.

Answer: C

997. In a normal eruption pattern, the last primary tooth to be lost is the:

- A. maxillary canine.
- B. mandibular canine.
- C. maxillary first molar.
- D. mandibular second molar.
- E. maxillary second molar.

Answer: A.

998. Mandibular growth:

- A. is sustained over a longer period of time in girls.
- B. is sustained over a longer period of time in boys.
- C. occurs at the same chronologic age in both sexes.
- E. occurs two years earlier in boys than in girls.

Answer: B.

999. Hypothyroidism affects the dental developmental pattern by:

- A. interfering with jaw growth.
- B. delaying the eruption timetable.
- C. causing sclerotic bone to form over the occlusal surface of erupting teeth.
- D. accelerating the eruption timetable.

Answer: B.

Appendix I

Adhesive techniques are now used for many dental restorative materials, including amalgam. Several generations of dentine bonding agents have been developed, mainly for bonding composite resins. When bonding is used with amalgam restorations, the need for retention and resistance form is reduced, the seal is improved, and some procedures, such as amalgam sealants, which were not previously possible, can be considered. Some of the main adhesives used in amalgam bonding studies include All-Bond 2 (Bisco), Amalgambond Plus with HPA (high performance additive) powder (Parkell), Optibond 2 (Kerr), Panavia EX and Panavia 21 (Kuraray).

This 'fourth generation' is commonly known as the multipurpose bonding systems because:

1. They can be used in mixed cavities for both enamel and dentine, and
2. Some of their components can also be used for bonding to substrates such as porcelain and alloys (including amalgam).

In each case the mechanism of bonding is micromechanical into etched or grit-blasted surfaces. Components The components of the 'fourth generation' are a set of chemical agents that proceed in sequence from an initially hydrophilic component (an aqueous, alcohol or acetone solution) through to gradually more hydrophobic components.

Specifically, they comprise the following items:

1. Conditioners

These are generally acid solutions such as phosphoric acid (aq) or dilute nitric acid. Acid etching removes the smear layer, and opens the intertubular and peritubular dentine. Removal of hydroxyapatite crystals leaves a collagen meshwork that can collapse and shrink because of the loss of inorganic support, especially if desiccated. After placement, the conditioner is rinsed off. Many bonding agents, particularly those containing acetone as a solvent, work better on dentine that has been left moist after rinsing.

2. Primers

A primer is applied after rinsing of the conditioner. Primer molecules such as HEMA (hydroxy-ethyl-methacrylate), biphenyl dimethacrylate (BPDM) and 4-methacryloxyethyl trimellitate anhydride (4-META) contain two functional groups - a hydrophilic group and a hydrophobic group. The hydrophilic group has an affinity for the dentinal surface and the hydrophobic (methacrylate) group has an affinity for resin. The primer wets and penetrates the collagen meshwork, raising it almost back to its original level. The primer also increases the surface energy, and hence the wettability, of the dentinal surface.

3. Dentine adhesives

These are applied by brush or other means to cover the treated surface to permit resin wetting and penetration. They are unfilled resins that may consist of hydrophobic monomers alone, such as bis-GMA, or may include adhesion promoters to facilitate wetting of the dentine. They attach to both the primed dentine surface and copolymerise with the overlaying composite restoration.

The latest generation of bonding systems combines either the primers and the bonding resins in one bottle, or the conditioner and primer in one bottle. This represents an improvement in convenience, though not necessarily in bond strength.

Some examples are:

Single Bond (3M), One-Step (Bisco), Prime and Bond (Dentsply) and Liner Bond 2 (Kuraray).

The 'hybrid layer' The development of resin-bonding for amalgam restorations Unfilled resin, when applied, penetrates the primed dentine, copolymerising with the primer to form an intermingled layer of collagen and resin, termed the resinreinforced zone, resin-infiltrated zone, resin-infiltrated layer, or the hybrid layer. Formation of this hybrid layer, as described by Nakabayashi et al.¹⁸ in 1982, is thought to be the primary bonding mechanism of most current adhesive systems (BDJ, 28/05/2008 19:57)

Appendix II

Hydrocortisone is a naturally-occurring corticosteroid and is the main glucocorticoid secreted by the ADRENAL CORTEX. Its synthetic counterpart is used, either as an injection or topically.

Action

•Hydrocortisone is a short-acting synthetic steroid with both glucocorticoid and mineralocorticoid properties that affect nearly all systems of the body. By inhibiting the formation, storage and release of histamine from mast cells, it reduces the effects of an allergic response. It also increases the body's response to circulating catecholamines.

Indications

- To reduce inflammation during an allergic reaction, severe anaphylaxis, asthma, or COPD.
- To treat urticaria.

It has a potent anti-inflammatory properties and are used in a wide variety of inflammatory conditions. , allergy, collagen diseases, asthma, adrenocortical deficiency, shock, and some neoplastic conditions. Hydrocortisone also is used in the treatment of blood cell cancers (leukemias), and lymph gland cancers (lymphomas). Blood diseases involving destruction of platelets by the body's own immune cells (idiopathic thrombocytopenia purpura) and destruction of red blood cells by immune cells (autoimmune hemolytic anemia) also can be treated with hydrocortisone.

Side Effect:

The most important side effects of hydrocortisone therapy that the susceptibility to infection, vaccine will be inactive in those patient taking this treatment, withdrawal syndrome by sudden stop of medication. Long-term steroid therapy can cause gastrointestinal bleeding, prolonged wound healing , and suppression of the adrenocortical steroids. Patients on long term steroidal care may require additional steroids during crisis (because their bodies can't manufacture enough on their own)

Appendix III

Pemphigus vulgaris	Bullous pemphigoid
Younger patients affected	Elderly are affected
Mucosal involvement is common (Oral lesions present)	Mucosal involvement is rare (Oral lesions absent)
Antibodies against desmoglein 3 (desmosomes)	Antibodies against hemidesmosomes
Intraepidermal (superficial) blisters	Subepidermal (deep) blisters
Blisters are flaccid and rupture easily	Blisters are tense and firm
Nikolsky's sign is positive	Nikolsky's sign is negative
Acantholysis on Tzanck smear	No acantholysis on Tzanck smear
Immunofluorescence shows net like IgG	Immunofluorescence shows linear IgG
Most patients die without treatment	Prognosis is good, most patients do well
Tombstone appearance of basal layer	Eosinophilic infiltration seen on histology

Appendix IV

Table 14. Signs and symptoms of hyperventilation syndrome

Symptoms	Signs
• light-headedness/dizziness	• rapid breathing
• shortness of breath	• occasional deep sighing breaths
• feeling of panic and impending death	• rapid pulse
• blurred vision	• altered consciousness
• tingling in the fingers, toes and lips	• carpopedal spasm of the hands and fingers
• feeling of detachment	

Box 20. Management of hyperventilation syndrome

- Cease dental treatment.
- Encourage the patient to slow their breathing.
- Ask the patient to rebreathe their expired air by cupping their hands close over, but not obstructing, their mouth and nose.
- Do not give oxygen (as this prolongs the symptoms).

If the patient does not rapidly recover, review the diagnosis. Differential diagnoses include acute asthma (see p.172), heart failure and anaphylaxis (see p.182).

If acute symptoms persist for more than 5 to 10 minutes, or if carpopedal spasm is extensive (and particularly if it spreads to involve the legs):

- Call 000.