

**1. For lower premolars, the purpose of inclining the handpiece lingually is to**

- A. Avoid buccal pulp horn
- B. Avoid lingual pulp horn
- C. Remove unsupported enamel
- D. Conserve lingual dentine

**2. For an amalgam Restoration of weakened cusp you should**

- A. Reduce cusp by 2mm on a flat base for more resistance
- B. Reduce cusp by 2mm following the outline of the cusp
- C. Reduce 2mm for retention form

**3. Before filling a class V abrasion cavity with GIC you should**

- A. Clean with pumice, rubber cup, water and weak acid
- B. Dry the cavity thoroughly before doing anything
- C. Acid etch cavity then dry thoroughly

**4. Which of the following statement about the defective margins of amalgam restoration is true?**

- A. The larger the breakdown, the greater the chance of decay.

**5. The retention Pin in an amalgam restoration should be placed**

- A. Parallel to the outer wall
- B. Parallel to the long axis of tooth

**6. The most common cause of failure of the IDN "Inferior Dental Nerve" block is**

- A. Injecting too low
- B. Injecting too high

**7. Which one of the following are not used in water fluoridation**

- A. SnF<sub>2</sub>
- B. 1.23% APF
- C. H<sub>2</sub>SiF<sub>2</sub>
- D. CaSiF<sub>2</sub>
- E. 8% Stannous fluoride

**8. The best way to clean cavity before the placement of GIC is**

- A. H<sub>2</sub>O<sub>2</sub>
- B. Phosphoric Acid
- C. Polyacrylic acid

**9. The most mineralised part of dentine is**

- A. Peritubular dentine

**10. A 45 year old patient awoke with swollen face, puffiness around the eyes, and oedema of the upper lip with redness and dryness. When he went to bed he had the swelling, pain or dental complaints. Examination shows several deep silicate restorations in the anterior teeth but examination is negative for caries, thermal tests, percussion, palpation, pain, and periapical area of rarefaction. The patient's temperature is normal. The day before he had a series of gastrointestinal x-rays at the local hospital and was given a clean bill of health. The condition is**

- A. Acute periapical abscess
- B. Angioneurotic oedema
- C. Infectious mononucleosis
- D. Acute maxillary sinusitis
- E. Acute apical periodontitis

**11. Internal resorption is**

- A. Radiolucency over unaltered canal
- B. Usually in a response to trauma
- C. Radiopacity over unaltered canal

**12. On replantation of an avulsed tooth could see**

- A. Surface resorption, external resorption
- B. Internal resorption
- C. Inflammatory resorption
- D. Replacement resorption
- E. A, C and D
- F. All of the above

**13. The percentage of total dentine surface dentinal tubules make in 0.5mm away from pulp is**

- A. 20%
- B. 50%

**14. The junction between primary and secondary dentine is**

- A. A reversal line
- B. Sharp curvature
- C. A resting line
- D. A reduction in the number of tubules

**15. What is the correct sequence of events**

- A. Differentiation of odontoblast, elongation of enamel epithelium, dentine formation then enamel formation.
- B. Differentiation of odontoblast, dentine formation then enamel formation, elongation of enamel epithelium.
- C. Elongation of enamel epithelium, differentiation of odontoblast, dentine formation then enamel formation.

**16. What is the sequence from superficial to the deepest in dentine caries**

- A. Zone of bacterial penetration, demineralisation, sclerosis, reparative dentine
- B. Zone of bacterial penetration, reparative dentine, demineralisation, sclerosis.
- C. Zone of bacterial penetration, sclerosis, reparative dentine, demineralisation.

**17. The nerve supply of the pulp is composed of which type of nerve fibres**

- A. Afferent & sympathetic

**18. In which direction does the palatal root of the upper first molar usually curve towards**

- A. Facial / buccal/
- B. Lingual
- C. Mesial
- D. Distal

**19. What is the common appearance of vertical tooth fracture**

- A. Perio abscess like appearance
- B. Displacement of fragments

**20. Which of the following would be ONE possible indication for indirect pulp capping**

- A. Where any further excavation of dentine would result in pulp exposure.
- B. Removal of caries has exposed the pulp
- C. When carious lesion has just penetrated DEJ

**21. Following trauma to tooth, the next day there was no response to pulp tests you should**

- A. Review again later

- B. Start endodontic treatment
- C. Extraction of tooth

**22. What is the main purpose of performing pulp test on a recently traumatised tooth**

- A. Obtain baseline response
- B. Obtain accurate indication about pulp vitality

**23. What is the main function of EDTA in endodontics**

- A. Decalcification of dentine
- B. Cleaning debris from root canal

**24. Which is NOT TRUE in relation to the prescription of 5mg or 10mg of diazepam for sedation**

- A. Patient commonly complain of post operative headache
- B. An acceptable level of anxiolytic action is obtained when the drug is given one hour preoperatively
- C. There is a profound amnesic action and no side affects
- D. Active metabolites can give a level of sedation up to 8 hours post operatively
- E. As Benzodiazepine the action can be reversed with Flumazepil

**25. Which of the following is TRUE in regards to high risk patient**

- A. 0.1ml of blood from Hepatitis B carrier is less infective than 0.1ml of blood from HIV patient
- B. 0.1ml of blood from Hepatitis B carrier is more infective than 0.1ml of blood from HIV patient
- C. Level of virus are similar in the blood and saliva of HIV patient
- D. Level of virus in the saliva is not significant for Hepatitis B patient
- E. The presence of Hepatitis B core Antigen in the blood means that active disease is not present

**26. Your employer in an attempt to update office sterilization procedures; what would you recommend as the BEST method to verify that sterilization has occurred\*\***

- A. Use spore test daily
- B. Use indicator strips in each load and color change tape on each package
- C. Use indicator strips daily and spore test weekly
- D. Use color change tape daily and spore test monthly
- E. Use color change tape in each load and spore tests weekly

**27. A 65 year old woman arrived for dental therapy. The answered questionnaire shows that she is suffering from severe cirrhosis.**

**The problem that can be anticipated in the routine dental therapy is**

- A. Extreme susceptibility to pain
- B. Tendency towards prolonged haemorrhage
- C. Recurring oral infection
- D. Increased tendency to syncope
- E. Difficulty in achieving adequate local anaesthesia

**28. Loss of sensation in the lower lip may be produced by**

- A. Bell's palsy
- B. Traumatic bone cyst
- C. Trigeminal neuralgia
- D. Fracture in the mandible first molar region
- E. Ludwig's angina

**29. Patient received heavy blow to the right body of the mandible sustaining a fracture there. You should suspect a second fracture is most likely to be present in**

- A. Symphysis region
- B. Left body of the mandible
- C. Left sub-condylar region
- D. Right sub-condylar region
- E. sub-condylar region

**30. Signs and symptoms that commonly suggest cardiac failure in a patient being assessed for oral surgery are**

- A. Elevated temperature and nausea
- B. Palpitations and malaise
- C. Ankle oedema and dyspnoea
- D. Erythema and pain
- E. Pallor and tremor

**31. A cyst at the apex of an upper central incisor measuring 1 cm in diameter is visualized in radiograph and confirmed by aspiration biopsy; which method of treatment would you consider\*\***

- A. Extraction of the central incisor and retrieving the cyst through the socket
- B. Exteriorizing the cyst through the buccal bone and mucosa
- C. Making a mucoperiosteal flap and removing the cyst through an opening made in the alveolar bone, followed by tooth removal.
- D. Making a mucoperiosteal flap and removing the cyst through an opening made in the alveolar bone, followed by endodontic treatment.
- E. Routine orthograde endodontic treatment followed by observation.

**32. A persistent oroantral fistula for a 12 weeks period following the extraction of a maxillary first permanent molar is best treated by**

- A. Further review and reassurance since it will most probably heal spontaneously
- B. Antibiotic therapy and nasal decongestants
- C. Curettage and dressing of the defect
- D. Excision of the fistula and surgical closure
- E. Maxillary antral wash out and nasal antrostomy.

**33. The most significant finding in clinical evaluation of parotid mass may be accompanying**

- A. Lympha adenopathy
- B. Nodular consistency
- C. Facial paralysis
- D. Slow progressive enlargement
- E. Xerostomia

**34. As far as surgical removal of wisdom teeth is concerned which of the following is true\*\***

- A. Prophylactic prescription of antibiotic reduces dramatically the chances of infection
- B. Raising a lingual flap will increase the incidence of neurapraxia but will reduce the incidence of neurotmesis with respect to the lingual nerve
- C. Prophylactic prescription of dexamethasone will dramatically reduce post operative swelling
- D. Inferior dental nerve injury is unlikely since the nerve passes medial to the wisdom tooth root
- E. The use of vasoconstrictors in local anaesthetics will increase the chances of infection.

**35. Endogenous morphine like substance which can control pain is known as\*\***

- A. Bradykinins
- B. Peptides
- C. Prostaglandins
- D. Serotonins
- E. Enkephalins

**36. Platelets play an important role in haemostasis; which of the following describes this role?**

- A. They convert fibrinogen to fibrin
- B. They agglutinate and plug small, ruptured vessels
- C. They initiate fibrinolysis in thrombosis
- D. They supply fibrin stabilizing factors
- E. They supply proconvertin for thromboplastin activation

**37. Suppuration is mainly the result of the combined action of four factors; which of the following is not one of these factors**

- A. Necrosis
- B. Presence of lymphocytes
- C. Collection of neutrophils
- D. Accumulation of tissue fluid
- E. Autolysis by proteolytic enzymes

**38. Which of the following lesions CANNOT BE classified as an intra-epithelial lesion\*\***

- A. Herpes simplex infections
- B. Pemphigus vulgaris
- C. Herpangina
- D. Lichen planus
- E. Hand, foot and mouth disease

**39. In regards to HIV infection, which of the following is the earliest finding**

- A. Kaposi sarcoma on the palate
- B. Reduced haemoglobin
- C. Infection with pneumocystic carinii
- D. Reduction in white cells count
- E. B cell lymphoma

**40. Which of the following is NOT CHARACTERISTIC of trigeminal neuralgia\*\***

- A. The pain usually last for few seconds up to a minute in the early stages of the disease
- B. The pain is usually unilateral
- C. Patient characteristically have sites on the skin that when stimulated precipitate an attack of pain
- D. An attack of pain is usually preceded by sweating in the region of the forehead
- E. It is a paroxysmal in nature and may respond to the treatment with Carbamazepine

**41. Benign migratory glossitis or Geographic Tongue, manifests itself in the oral cavity as**

- A. Irregularly outlined areas of hyperkeratosis of the dorsal surface of the tongue
- B. Furrows outlined the dorsal surface radiating out from a central groove in the centre of the tongue
- C. Loss (atrophy) of filiform papillae in multiple irregularly outlined areas
- D. Irregularly outlined erythematous area of hyper trophic fungiform
- E. A fibrinous exudate on the dorsal surface
- F. Grooves (fissures) radiating from a central fissure
- G. Irregular area in the midline of the tongue

**42. Which one of the following is true about oral hairy leukoplakia**

- A. Associated with HIV virus infection and is commonly seen on the dorsal of the tongue
- B. Associated with HIV virus infection and is commonly seen on the lateral side of the tongue
- C. Usually caused by Candida species
- D. Always associated with trauma to the lateral side of the tongue
- E. Always associated with pernicious anaemia

**43. Which of the following have a tendency to recur if not treated**

- A. Giant cell granuloma
- B. Lipoma
- C. Fibrous epulis
- D. Haematoma
- E. Pulp polyps

**44. Basal cell carcinoma is characterised by**

- A. Rapid growth and metastasis
- B. Local cutaneous invasion
- C. Inability to invade bone
- D. Poor prognosis
- E. Radiation resistance
- F. Can not metastasise to the bone

**45. Carcinoma of the tongue has a predilection for which of the following sites\*\***

- A. Lateral border anteriorly
- B. Anterior dorsal surface
- C. Posterior dorsal surface
- D. Lateral border posteriorly
- E. No preferred location

**46. A patient presents complaining of a stomach upset 48 hours after starting a course of antibiotic for oral infection, this is an example of**

- A. Type I allergic reaction
- B. Nervous disorder
- C. Side effect of the drug
- D. Type IV hypersensitivity reaction
- E. Pyloric stenosis

**47. Trichloroacetic acid, a strong acid, has been used by dentists for chemical cautery of hypertrophic tissue and aphthous ulcers; its mechanism of action is**

- A. Thermodynamic action
- B. Activation of tissue enzymes
- C. Osmotic pressure
- D. Protein precipitation PPT
- E. Neutralization

**48. Which of the following adverse reaction of oral contraceptives is the most common and the most serious**

- A. Hypotension
- B. Hepatotoxicity
- C. Uterine neoplasia
- D. Thromboembolism disorder
- E. Decreased resistance to infection

**49. A patient who has been taking quantities of aspirin might show increased post operative bleeding because aspirin inhibits\*\***

- A. Synthesis of thromboxane A<sub>2</sub> and prevents platelet aggregation
- B. Synthesis of prostacyclin and prevents platelet aggregation
- C. Synthesis of prostaglandin and prevents production of blood platelets
- D. Thrombin and prevents formation of the fibrin network
- E. Increase the absorption of vitamin K and prevents synthesis of blood clotting factors

**50. A patient who recently had a calculus removed from the kidney presented with radiolucent area in the left maxilla with clinical evidence of swelling. The disease that you would immediately suggest is**

- A. Diabetes
- B. Thyrotoxicosis
- C. Hyperparathyroidism

- D. Osteoporosis
- E. Adrenal insufficiency

**51. Typical features of Down's syndrome (Mongolism) do not include**

- A. A multiple immunodeficiencies
- B. Sever caries but minimal periodontal disease
- C. Susceptibility to infections
- D. Multiple missing teeth and malocclusion
- E. Hepatitis B carriage in institutionalised patients

**52. The patient whom you are about to treat, states that he has Von Willbrand's disease. Which one of the following preoperative hematological analysis may reflect this disease**

- A. Bleeding time and factor VIII level
- B. Bleeding time and factor IX level
- C. Bleeding time and factor X level
- D. Platelet count
- E. Thromboplastin generation time

**53. A 22 year old woman has acute gingival hypertrophy, spontaneous bleeding from the gingiva and complains of weakness and anorexia. Her blood analysis was as follows: HB=12gm, Neutrophils=90%, Monocytes=1%, Platelets=250000, WBC=100000, Lymphocytes=9%, Eosinophils=0%**

***The most likely diagnosis is***

- A. Myelogenous leukaemia
- B. Infectious mononucleosis /glandular fever/
- C. Thrombocytopenic purpura
- D. Gingivitis of local aetiological origin
- E. Pernicious anaemia /Vitamin B12 deficiency/

**54. The tonsillar lymph node is situated at the level of**

- A. Angle of the mandible
- B. C6 vertebrae
- C. Jugulodigastric crossing
- D. Clavicle
- E. Jugulo-omohyoid crossing

**55. Exposure of the patient to ionising radiation when taking a radiograph is NOT REDUCED by**

- A. The use of fast film

- B. The addition of filtration
- C. Collimation of the beam
- D. The use of an open and lead lined cone
- E. Decreasing the kilovoltage KvP

**56. X-ray films have an emulsion on one or both side of a support material. The emulsion contains particles of**

- A. Silver nitrate crystal
- B. Metallic silver in gelatine
- C. Silver bromide in gelatine
- D. Silver nitrate in gelatine
- E. Potassium bromide in gelatine

**57. The inverse Square Law is concerned with intensity of radiation using type D film of 200mm target to film distance, the exposure time was 0.25s. What would be the exposure for the same situation with 400mm target to film distance**

- A. 0.5s
- B. 1.0s
- C. 2.0s
- D. 0.25s
- E. 0.125s

**58. You wish to purchase a dental X ray machine and have the choice between 60kVp and 70kVp machines. With single change from 60kVp to 70kVp what would the approximate affects on exposure time**

- A. No effect
- B. Half the time
- C. Double
- D. Quarter
- E. Triple the time

**59. When no radiation shield is available, the operator should stand out of the primary x ray beam and a distance from the patient's head of at LEAST**

- A. 0.5 metres
- B. 1 metre
- C. 1.5 metres
- D. 2 metres
- E. 3 metres

**60. The obturating material of choice for primary teeth following complete pulpectomy is**

- A. Zn phosphate cement and formocresol combination paste
- B. Quick setting hydroxide cement
- C. Zinc oxide and eugenol cement
- D. Gutta-percha
- E. Polycarboxylate cement

**61. When primary molars are prepared for stainless steel crowns should the depth for reduction of the proximal surface be similar to the depth of the buccal and lingual surfaces**

- A. Yes; reduction of all wall is similar for best retention
- B. No, proximal reduction is greater to allow the crown to pass the contact area
- C. No, the buccal surfaces has the greatest reduction to remove the cervical bulge
- D. Yes, all undercuts are uniformly removed so that the steel crown can be seated
- E. No, because of lateral constriction, the lingual surface needs greatest reduction

**62. 8 years old child who has sustained a fracture of maxillary permanent central incisor in which 2mm of the pulp is exposed; presents for treatment three hours after injury. Which of the following should be considered**

- A. Remove the surface 1-2 mm of pulp tissue and place calcium hydroxide
- B. Place calcium hydroxide directly on the exposed pulp
- C. Pulpotomy using formocresol
- D. Pulpectomy and immediate root filling
- E. Pulpectomy and apexification

**63. Which primary teeth are LEAST affected with the nursing bottle syndrome**

- A. Maxillary molars
- B. Maxillary and mandibular canines
- C. Mandibular incisors
- D. Maxillary incisors
- E. Mandibular molars

**64. Which of the following anomalies occurs during the initiation and proliferation stages of tooth development**

- A. Amelogenesis imperfecta
- B. Dentinogenesis imperfecta
- C. Enamel hypoplasia
- D. Oligodontia
- E. Ankylosis

**65. Which is the right sequence of the histological stages of tooth development**

- A. Initiation, proliferation, histodifferentiation, morphodifferentiation, mineralization
- B. Proliferation, initiation, histodifferentiation, morphodifferentiation, mineralization
- C. Proliferation, morphodifferentiation, histodifferentiation, mineralization
- D. Initiation, proliferation, morphodifferentiation, histodifferentiation, mineralization

**66. A health 6 year old child presents with carious maxillary second primary molar with a necrotic pulp. Which treatment would be preferred**

- A. Extraction
- B. Indirect pulp treatment
- C. Pulpotomy
- D. Pulpectomy
- E. Antibiotic coverage

**67. To produce a stable correction of an upper labial segment in lingual crossbite; it is essential to**

- A. Use fixed appliances
- B. Have adequate overbite
- C. Treat during growth
- D. Use posterior capping
- E. Increase vertical dimension

**68. Which of the following are typical consequence 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

**69. The lamina dura seen on periapical radiograph as**

- A. Usual radiolucency between tooth root and surrounding bone as a thin white line.
- B. Cribriform plate of bone making the tooth socket
- C. Dense crestal bone consistent with a healthy periodontal status
- D. Pattern of radiopaque lines in supporting alveolar bone

**70. Which of the following organisms are pathognomonic of acute necrotic ulcerative gingivitis**

- 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

**71. In testing for mobility, which of the following statement is true**

- A. Heavy pressure must sometimes be used to test mobility
- B. Only lateral mobility is significant in diagnosis and treatment of chronic inflammatory periodontal disease
- C. Hyper mobility indicates that the tooth supporting structure have been weakened
- D. During the periodontal examination each tooth should be tested individually for hyper mobility
- E. Reliance on radiograph is essential

**72. Which of the following is true regarding gingivosis (Desquamative gingivitis)**

- A. It is caused by hormonal imbalance
- B. Is seen only at or after menopause
- C. Is frequently caused by lichen planus
- D. Is a variant pregnancy gingivitis
- E. Is related to nutritional disturbance

**73. The treatment of Localised Juvenile Periodontitis is frequently supplemented with tetracycline because flora involved is predominant**

- A. Aerobic
- B. Strictly anaerobic
- C. Facultative or microaerophilic
- D. Resistant to other antibiotic

**74. The most accurate way to evaluate the effectiveness of root planning is by**

- A. Inspect the root surface with an instrument for root smoothness
- B. Use air for visual inspection
- C. Activate a curette against root surface and listen for a high pitched sound which indicates a smooth, hard surface.
- D. Evaluate the soft tissue at the end of the appointment for a decrease oedema and bleeding
- E. Evaluate the soft tissues 10 to 14 days later.

**75. Probe pressure at the sulcus of pocket should not be more than enough to**

- A. Feel the top of the crestal bone
- B. Balance the pressure between fulcrum and grasp
- C. Define the location of the apical and the calculus deposit
- D. Feel the coronal end of the attached tissues
- E. Limit the lateral pressure

**76. A curette may be inserted to the level of the attached gingiva with minimal trauma to the tissues because of**

- A. Has a round base
- B. Is easy to sharpen
- C. Has rounded cutting edges
- D. Provides good tactile sensitivity
- E. Has two cutting edges

**77. Tetracycline hydrochloride conditioning of root surface in periodontal surgery is to**

- A. Sterilise the root surface
- B. May enhance binding of fibronectin and fibroblast
- C. Aids in re-mineralising the root surface
- D. Assist the biding of lamina dura
- E. Prevents post operative infections

**78. Of all the factors that increase the resistance of teeth to dental caries THE MOST EFFECTIVE is**

- A. The general nutrition of a child during the period of tooth formation
- B. The intake of fluoride during the period of enamel mineralization and maturation
- C. Periodic topical fluoride application by dental health care following tooth eruption
- D. Sufficient intake of calcium and Vitamin D during the period of enamel mineralization and maturation

**79. When the enamel of the tooth is exposed to preparation containing high concentrations of fluoride; the major reaction is**

- A. Sodium fluoride
- B. Calcium fluoride
- C. Stannous fluoride
- D. Fluorapatite

**80. Several approaches have been suggested to increase the fixation of professionally applied topical fluoride, which of the following statements IS INCORRECT regarding increasing the fixation**

- A. Increase concentration of fluoride in solutions
- B. Raise the PH of the fluoride solution
- C. Increase the exposure time to topical fluoride
- D. Pre-treat the enamel with 0.5% phosphoric acid
- E. Use NH<sub>4</sub>F rather than NaF at a lower PH

**81. Biopsy is least useful in the diagnosis of**

- A. Geographic tongue
- B. Aphthous ulcer
- C. Cysts
- D. Granuloma
- E. Myeloma

**82. In the inferior alveolar block the needle goes through or close to which muscles**

- A. Buccinator and superior constrictor
- B. Medial and lateral pterygoid
- C. Medial pterygoid and superior instructor
- D. Temporal and lateral pterygoid
- E. Temporal and medial pterygoid

**83. The extraction of maxillary deciduous molar in 5 years old child; you should use**

- A. Mostly towards the apex pressure and some movement
- B. Rotation
- C. Distal pressure and movement
- D. Labial-lingual movement

**84. What is the purpose of making a record of protrusive relation and what function does it serve after it is made**

- A. To register the condylar path and to adjust the inclination of the incisal guidance.
- B. To aid in determining the freeway space and to adjust the inclination of the incisal guidance.
- C. To register the condylar path and to adjust the condylar guides of the articulator so that they are equivalent to the condylar paths of the patient.
- D. To aid in establishing the occlusal vertical dimension and to adjust the condylar guides of the articulator so that they are equivalent to the condylar paths of the patient.

**85. The pulp horn most likely to be exposed in the preparation of large cavity in permanent molar tooth is**

- A. Mesio-Lingual in upper first molars
- B. Mesio-Buccal in upper first molars
- C. Disto-buccal in lower first molars
- D. Mesio-Lingual in lower first molars
- E. Mesio- Buccal in lower first molar

**86. The main factor controlling a decision to increase the occlusal height of teeth for extensive oral reconstruction is whether**

- A. The inter occlusal distance will be physiologically acceptable after treatment
- B. There will be sufficient tooth bulk in the abutment teeth for proper retention of the crowns
- C. At least two third of the original alveolar process will remain for adequate periodontal support
- D. The aesthetic appearance of the patient will improve sufficiently to warrant the planned reconstruction

**87. In planning and construction of a cast metal partial denture the study cast**

- A. facilitate the construction of custom/special trays
- B. minimize the need for articulating
- C. provide only limited information about inter ridge distance, which is best assessed clinically
- D. can be used as a working cast when duplicating facilities are not available

**88. Periodontal damage to abutment teeth of partial denture with distal extension can best be avoided by**

- A. Applying Stressbreakers
- B. Employing bar clasps on all abutment teeth
- C. Maintaining tissue support of the distal extension
- D. Clasping at least two teeth for each edentulous area
- E. Maintaining the clasp arms on all abutment teeth at the ideal degree of tension

**89. Which of these muscles may affect the borders of mandibular complete denture**

- A. Mentalis
- B. Lateral pterygoid
- C. Orbicularis oris
- D. Levator angulioris

E. Temporal

**90. Jaw relation of an edentulous patient has been established. The maxillary cast has been mounted on an articulator without a face bow. You decide to increase the occlusal vertical dimension by 4mm this will necessitate**

- A. Opening the articulator 4mm
- B. A new centric relation to be recorded
- C. A change in the condylar guide settings
- D. An increase in the rest vertical dimension

**91. Following extraction of the molar teeth\*\***

- A. The ridge height is lost more from the maxilla than from the mandible
- B. The maxillary ridge will get more bone lost from the palatal aspect than the buccal
- C. The mandibular arch is relatively narrower than the maxillary arch
- D. Compared with the pre-resorption state, the mandibular ridge will lose more bone from the lingual aspect than the buccal one.

**92. Which of the following is a major disadvantage to immediate complete denture therapy**

- A. Trauma to extraction site
- B. Increased the potential of infection
- C. Impossibility for anterior try in
- D. Excessive resorption of residual ridge

**93. For dental caries to progress in dentine**

- A. The dentine must contain soluble collagen
- B. Enamel must contain glycoproteins
- C. Diet must contain simple carbohydrate
- D. Diet must contain polysaccharides
- E. Pulp must contain complement

**94. Streptococcus mutans utilise which substrate to form dextran**

Refer to Boucher Microbiology

- A. Glucose
- B. Fructose
- C. Sucrose
- D. Amylopectin
- E. Dextrans

**95. At birth, some calcified dental tissues are presented**

- A. All deciduous teeth and all permanent incisors

- B. All deciduous teeth and permanent central incisors
- C. All deciduous teeth and the first permanent molars
- D. Deciduous teeth only

**96. Which one of the following statement is correct**

- A. The remnants of Ameloblast contribute to the primary enamel cuticle
- B. the last secretion of the odontoblast is cementum X
- C. The last secretion of the ameloblast is the acquired of enamel cuticle
- D. The remnants of odontoblast form the primary enamel cuticle

**97. The principle muscle responsible for the opening of the mouth is**

- A. Mylohyoid
- B. Anterior temporal
- C. Posterior temporal
- D. Anterior belly of digastric

**98. Loss of tooth in mixed dentition affects the**

- A. Same quadrant
- B. The relevant jaw
- C. The whole mouth
- D. The relevant quadrant

**99. What are the points that determine the facial line in cephalometric points, " The angle of the convex facial line"**

- A. Nasion, subnasale, pogonion
- B. Orbital, sella...

**100. What is the main purpose of using Stress breakers**

- A. To distribute the load between teeth and ridges
- B. To distribute the load between the clasps and the face end of the saddle
- C. It relieves the abutment tooth of occlusal loads that may exceed their physiologic strength

**101. What is Miller's theory about**

- A. Acidogenic micro-organism
- B. Proteolytic

**102. Tooth under occlusal trauma shows**

- A. Bone resorption
- B. Necrosis of the pulp

- C. Hypercementosis
- D. Triangulation
- E. All of the above

**103. Which is more retentive form for anterior bridge**

- A.  $\frac{3}{4}$  partial veneer crown
- B. Class V inlay
- C. Pinlay Veneer
- D. Class III inlay with pins

**104. What would not cause an airway obstruction**

- A. Laryngeal muscles paralysis
- B. Flexion of the neck
- C. Airway obstruction
- D. Extension of the neck

**105. As far as localised alveolar osteitis is concerned; which one of the following is true**

- A. The incidence in the mandible and maxilla is similar
- B. The prophylactic prescription of antibiotics prior to extraction reduces the incidence.
- C. Excessive fibrinolysis is the likely aetiology
- D. Purulent exudate must be seen for a diagnosis and irrigation is mandatory
- E. Zinc oxide eugenol and alvogyl dressing promote a rapid bone growth

**106. A patient with impacted canine; by moving the X ray tube distally the canine moves distally too; where do you expect the impacted canine**

- A. Labially impacted
- B. Palatally impacted

**107. A 10 year old boy presents with small greyish white lesion surrounded by a red halos on the soft palate and tonsillar pillars, small vesicles are found. He has fever and pain in the ear. The MOST probable diagnosis is**

- A. Herpangina

**108. The SNA angle on cephalogram, best signifies the relationship of**

- A. Mandible to cranial base
- B. Maxilla to cranial base
- C. Maxilla to mandible

- D. Mandible to porion
- E. Maxilla to Frankfort plane

**109. A child has sustained a traumatic exposure of primary central incisor, he presents to you for treatment two days after the injury. Which of the following should be considered**

- A. Pulpotomy and Ca(OH)<sub>2</sub>
- B. Pulpotomy and formocresol
- C. Direct pulp capping
- D. Pulpectomy (RCT)

**110. 8 years old child presents with all permanent incisors erupted, but yet only three permanent first molars are erupted. Oral examination reveals a large gingival bulge in the un-erupted permanent area. A panoramic radiograph shows the alveolar emergence of the un-erupted permanent first molar crown and three fourth tooth developments, there are no other radiographic abnormalities. The most appropriate diagnosis and treatment plan in such situation would be\*\***

- A. Dentigerous cyst; surgical enucleation.
- B. Idiopathic failure of eruption, surgical soft tissues exposure
- C. Ankylosis of the molar, removal of the first molar to allow the second one to erupt into its place.
- D. Ankylosis of the molar, surgical soft tissues exposure and luxation of the molar
- E. Idiopathic failure of eruption, surgical soft tissues exposure and orthodontic traction.

**111. Patient presents with rapidly progressive root caries on many teeth. Which of the following laboratory results would be a possible indicator of this**

- A. Stimulated salivary secretion rate of 1.5ml/min
- B. S. mutans concentration of 10<sup>5</sup> organism/ml
- C. A plaque sample containing 5% S. mutans
- D. A lactobacilli concentration of 10<sup>5</sup> organism/ml
- E. Salivary buffering PH 5.5

**112. Which of the following is NOT characteristic of Down's syndrome**

- A. Decreased neutrophil function
- B. Macroglossia
- C. Macrodonia
- D. An increased susceptibility to periodontal disease
- E. Congenitally missing teeth

**113. The MOST common carcinoma in the mouth is**

- A. Epidermoid carcinoma /Squamous Cell Carcinoma/
- B. Carcinoma of the lips

**114. 8 years old child presents with all permanent incisors erupted, but yet only three permanent first molars are erupted. Oral examination reveals a large gingival bulge in the un-erupted permanent area. A panoramic radiograph shows the alveolar emergence of the un-erupted permanent first molar crown and three fourth tooth developments, there are no other radiographic abnormalities. The most appropriate diagnosis and treatment plan in such situation would be**

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- E. Idiopathic failure of eruption, surgical soft tissues exposure and orthodontic traction.

**115. 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 ultra sonic scaling
- D. Refer for haematological screening
- E. Advise for bed rest with supportive and palliative treatment

**116. What is the affect of office dental prophylaxis of regular six month intervals on children's oral health**

- A. Reduce caries incidence by approximately 30%
- B. Provide a long term improvement in oral hygiene
- C. Provide a short term improvement in oral hygiene
- D. Prevent gingivitis
- E. Reduce the need for patient cooperation

**117. Plaque is considered as an infection because**

- A. Antibiotic therapy prevents or stop its formation
- B. Indication of bacterial activity
- C. It is common to both animal and human

**118. Which of the following is true in relation to dental decay**

- A. Foods that require vigorous mastication will increase salivary flow and reduce PH
- B. Tooth brushing immediately after meals is most effective because demineralisation has already started
- C. Food that encourage the mastication will increase the number of lymphocytes in saliva and thus reduce decay
- D. Vigorous mastication will increase plaque PH and lead to reduce of decays
- E. The Stephan Curve describes an increase in PH during a meal with resultant of demineralisation

**119. The BEST treatment for alveolar abscess**

- A. Endontic treatment or extraction
- B. Incision and drainage alone
- C. Extraction
- D. Endodontic

**120. In developing plaque; the adhesive polymer produced by streptococcus mutans is synthesis from**

- A. Glucose
- B. Fructose
- C. Sucrose
- D. Lactose
- E. Amylose

**121. Fluoridation is the adjustment of the fluoride content of a community water supply to optimum levels for caries prevention. Which of the following statement is correct**

- A. Tooth decay declines by 90% to 95%
- B. Tooth decay declines by 45% to 55%
- C. Greater reduction in smooth surface caries from in pit and fissures
- D. Fluoridation increases vulnerability to osteoporosis

**122. Clinical /Proximal in some papers/ caries on radiographs are seen**

- A. Smaller than the real one
- B. Larger than the real one
- C. The same size

**123. A cusp fracture immediate to Class II inlay can be detected by**

- A. History
- B. Visually
- C. Radiograph
- D. Percussion
- E. Touching the tip of the cusp / Pressure on the cusp/

**124. Recession of gingiva of several anterior teeth caused by exposure and softened cementum; what would you do**

- A. Scrap the soften cementum and apply fluoride
- B. Scrap the soften cementum and use GIC
- C. Class V amalgam

**125. Patient with class II division II; the lateral incisor is missing. You want to make a fixed bridge which of the following is suitable**

- A. Rocket bridge using central incisor as abutment
- B. Cantilever using central incisor
- C. Fixed bridge using the central incisor and bicuspid

**126. When repairing a fracture of lower complete denture. Which statement is correct**

- A. Self curing will distort the denture
- B. Cold curing will not be strong enough because of small area of attachment
- C. There is a possibility of occlusal disharmony

**127. In regards to Electrical Vitalometer**

- A. To test recently erupted teeth
- B. Check response for an electrical stimulant
- C. Reveal potential necrosis

**128. When preparing class III for composite restoration; which situation acid itching should be placed**

- A. Always should be performed to minimise marginal leakage
- B. Should not be performed because it might damage the adjacent tooth
- C. When extra retention is required
- D. Only in situations where cavity is shallow to avoid pulp irritation

**129. In which situation the translucency of a tooth is lost**

- A. Death of the pulp
- B. Complete calcification of pulp chamber
- C. Hyperaemia
- D. Pulp stone

E. All of the above

**130. Which pin system has proven to be the most retentive**

- A. Self tapping threaded pin
- B. Friction peak pin
- C. Cemented pin

**131. Reconstructing the occlusal anatomy is based on**

- A. Functional factors
- B. Depth of restoration on a tooth
- C. Necessity to restore normal anatomy

**132. How do you prepare floor of pulp chamber in molars**

- A. Swab and dry with cotton wool and excavate
- B. Use round bur to flatten the floor
- C. Under cut walls
- D. Use flat end fissure bur to make it levelled

**133. When do you finish campsite resin restorations**

- A. Immediately after curing
- B. After 24 hours
- C. A week after placement

**134. Where Café au lait spots are seen**

- A. Von Willebrand's disease
- B. Recklinghausen
- C. Neurofibroma

**135. Von Willebrand disease is**

- A. Haemophilic disease
- B. Bacterial Endocarditis
- C. Congenital cardiac disease
- D. Rheumatic fever

**136. What technique is used in the extraction of permanent 1<sup>st</sup> molars**

- A. Rotation movement
- B. Lingual movement
- C. Buccal movement

**137. Drugs contraindicated with Monoaminoxidas MAO**

- A. Barbiturates
- B. Pethidine
- C. Local Anaesthesia with felypressin
- D. Narcotic analgetics
- E. Salicylic acid

**138. Blow to mandible causing fracture in molar's right side region, you expect a second fracture of**

- A. Sub condylar of right side
- B. Sub-condylar of left side
- C. Fracture of symphysis

**139. What is the most common fracture of Class II amalgam restorations**

- A. Isthmus because of insufficient depth
- B. Internal fracture
- C. Marginal ridge site

**140. What is the advantage of composite over silicate resin**

- A. Less shrinkage
- B. Less surface erosion
- C. Less water absorption
- D. All of the above

**141. The setting expansion of casting investment is approximately**

- A. 0 to 0.1%
- B. 0.1 to 0.5%
- C. 0.5 to 1%
- D. 1.1 to 1.6%

**142. The contraction of gold alloys on solidifying is approximately**

- A. 0.5%
- B. 2.5%
- C. 1.40%
- D. 3%

**143. The un-polymerized monomer in Self-cured resin is approximately\*\***

- A. 0.5%
- B. 2.5%
- C. 5%

D. 10%

**144. A volume shrinkage of methyl meta cyrelate monomer when is polymerized\*\***

- A. 12%
- B. 15%
- C. 18%
- D. 21%

**145. Treatment of fibrous dysplasia consists of**

- A. Resection
- B. Complete excision if it affects small area; if it is large lesion, limited excision surgery because of the cosmetic considerations.
- C. Irradiation
- D. Excision and removal of adjacent teeth
- E. None of the above

**146. Treatment of all of Giant Cell lesion either salivary or multiple is**

- A. Marsupialization
- B. In velation and packing ap??
- C. Cold well??
- D. Surgical curettage
- E. None of the above

**147. Oil or water on impression for treatment casts causes**

- A. An increase of the quality
- B. No alteration
- C. A decrease of the quality
- D. Bubbles on the cast
- E. None of the above

**148. What is Path of Insertion**

- A. The movement of the appliance from the points of initial contacts to path of final rest position
- B. The movement of the appliance from the points of rest position until it is not in contact with teeth

**149. What is Path of Removal**

- A. The appliances movement from the rest position to the last contacts of its rigid parts with the supporting teeth
- B. The movement of the appliance from the points of initial contacts to path of final rest position

**150. When correction preparation for re contouring of occlusal surface is to be applied. Grinding only of the adjusted surface**

- A. Should not be felt flat
- B. Require a flat crown
- C. Require no contact with adjacent teeth
- D. Should be felt flat
- E. None of the above

**151. To obtain a desired projection of occlusal loads, the floor of the occlusal rest should**

- A. Be convex
- B. Slope from the marginal ridge towards Contact?? of abutment
- C. Slope from Contact?? of abutment towards the marginal ridge
- D. Be concave
- E. Does not slope from the marginal ridge towards Contact?? of abutment
- F. None of the above

**152. The transfer of stress by Tensile Action employs T. reaction; a process that within limit**

- A. Fails to promote bone growth
- B. Promote bone growth and maintenance
- C. Fails to promote maintenance
- D. None of the above

**153. Which of the following arrears CAN NOT be determined by survey analysis of partially edentulous cast**

- A. Areas to be revealed as blocked out to properly loca?? Rigid parts of a frame work
- B. Areas to be shaped to properly loc?? Rigid parts of framework
- C. Areas used for guideline planes
- D. Areas used for retention
- E. Areas used for support
- F. Depth of rest seats

**154. In partial dentures the guidelines "Guiding Planes" serve to**

- A. Aids in balancing occlusion
- B. Assure predictable clasp retention
- C. Form right angle with the occlusal plane
- D. Eliminate the necessity for precision attachment
- E. Eliminate the necessity for a posterior clasp

**155. Rough surface of porcelain /Porosity/ is a result of**

- A. Lack of compression
- B. Sudden high temperature

**156. The most common failure in constructing porcelain to metal is**

- A. Improper metal framework
- B. Rapid heating

**157. Prolong GIC's setting time can be achieved by**

- A. Cool down the slab
- B. Increase the amount of distilled water

**158. The maxillary canine is missing. The best way for making Cantilever bridge**

- A. Both premolars
- B. Incisors and premolars

**159. Ante's Law: Dr. Ante in 1926 stated that**

- A. "The combined pericemental area of the abutment teeth should be equal to or greater in pericemental area than tooth or teeth to be replaced"

**160. Why would you decide to replace the anterior missing teeth for partial denture using bridge**

- A. Aesthetic
- B. Overjet
- C. Overbite

**161. In regards to Gold casting alloys which one is available for bridge**

- A. Hard alloy "Type III"
- B. Type II
- C. Type I

**162. Using fluoride in the root surface caries is to protect**

- A. Enamel
- B. Dentine and cementum
- C. Cuticle

**163. The first thing to check when patient comes complaining of pain under denture is**

- A. Occlusion
- B. Soft tissues changes

**164. Fovea Palatini, is a landmark to determine the posterior bonds of upper denture**

- A. Post dam
- B. Flanges

**165. Attrition is**

- A. Process of normal wear of teeth
- B. Lost of teeth substance as a result of chemical exposure

**166. Modulus of elasticity is defined as**

- A. The stress at the proportional limit
- B. The stress-strain ratio within the proportional limit

**167. Tissue conditioning material : (Silicon lining material)**

- A. Are more resilient than plastic acrylic
- B. Can minimize any bacterial colonies

**168. The most common cause of RCT "Root Canal Treatment" failure is**

- A. The canal not filled completely (Short obturation)
- B. Over filled canals

**169. The position of cusps of maxillary first premolar during setting of teeth and on occlusal view is positioned\*\***

- A. Distally
- B. Mesially
- C. Central buccolingually

**170. Lateral canals are usually found**

- A. The middle of the root
- B. First third of the root close to the crown
- C. The apical third

**171. The cause of development of lateral canals is**

- A. Cracks in Hertwig's epithelial root sheath

**172. Transillumination is used to\*\***

- A. To find intrinsic tooth coloration

- B. To detect caries
- C. Pulp-stones
- D. Hemorrhagic pulp
- E. Calculus

**173. What is the common malignant lesion that occurs in the oral cavity**

- A. Ameloblastoma
- B. Squamous cell carcinoma
- C. Osteosarcoma

**174. Replantation of avulsed tooth 2 ½ hours after incident; the most likely diagnosis is**

- A. External resorption
- B. Internal resorption
- C. Pulp stones

**175. The emergency treatment for painless necrotic pulp is**

- A. Drainage through canals
- B. None

**176. Swelling after RCT is mainly caused by "Being asked as What is the most frequent cause of pain which occurs several days after obturation" too**

- A. Entrapped Bacteria, or the presence of bacteria in the periapical region.
- B. Under filling the root canal system
- C. Over filled root canal

**177. How do you treat dentine before applying GIC**

- A. Conditioner
- B. Pumice & water

**178. The first step in the treatment of erosion is**

- A. Pumice and water
- B. Spray with Na-bicarbonate
- C. GIC

**179. Kine-matic face bow is used for recording (to locate)**

- A. Hinge movement (position) axis

**180. Why do you polish the teeth before seating of partial dentures**

- A. To smooth the rough surface
- B. To minimize the retention of plaque
- C. To increase the adaptability of occlusal rests

**181. The contact between artificial and natural teeth in partial dentures**

- A. Slight touch in the balancing side
- B. Should not be in touch at all

**182. Polyvinyl impression material are**

- A. The most stable
- B. The most resistant to heat

**183. To remove the pulp tissue from narrow canal, you can use**

- A. Barbed broach
- B. Small K-Type file
- C. Smooth broach
- D. Reamer

**184. Wax patterns ARE NOT to be left on the bench for long time because of**

- A. Distortion
- B. Lost of elasticity

**185. The undercut for Cobalt Chrome's retentive arm clasp is**

- A. 0.75mm
- B. 0.50mm
- C. 0.25mm

**186. When surveying**

- A. Tilt the cast

**187. What statement is false**

- A. Not to survey when making the crown

**188. Gold clasp is more elastic than Cobalt Chrome, but Co-Chrome has high modulus of elasticity**

- A. The first statement is false the second is true
- B. Both are true
- C. The first is true the second is false
- D. Both are false

**189. Overdentures are best used for**

- A. Canines and premolars
- B. Posterior teeth

**190. What is main reason of ordering another Periapical radiograph of the same tooth**

- A. To disclose the other roots
- B. To observe tooth from different angle

**191. The ideal length of RCT is**

- A. At the apex
- B. As far as you can obturate
- C. 0.5 to 1.5 mm before the apex

**192. Retentive part of clasp position is**

- A. Below the survey line
- B. Above survey line
- C. As close as possible to the gingival margins

**193. To minimize the load on free end saddle partial denture**

- A. Use teeth with narrow Buccal-Lingual dimension
- B. Use mucosa-compressive impression

**194. Retentive Clasps**

- A. Alloy with high modulus of elasticity
- B. Clasp arm is gingivally located

**195. Internal resorption of RC usually**

- A. Asymptomatic
- B. Painful

**196. When doing pulpotomy with Formcresol, you will find**

- A. Necrosis
- B. Mummification

**197. Ledermix used in RCT to relieve pain because of**

- A. Antibiotics
- B. Corticosteroid

**198. In infected root canal, the two most common micro-organisms are**

- A. Streptococcus and Staphylococcus

**199. The technique of placing Gutta-Percha cones against the root canal walls providing space for additional Gutta Percha is termed**

- A. Lateral Condensation
- B. One major Gutta Percha point
- C. Laterally above condensed

**200. In periodontal membrane, what epithelial cells you can find**

- A. Epithelial rests of Malaise

**201. Applying hypertonic Fluid on the dentine the transmission of fluid through tubules will be**

- A. From inside to outside
- B. From outside to inside

**202. Transmission of fluid in dentinal tubules is by**

- A. Hydrodynamic pressure (Osmotic)
- B. Mechanical

**203. Gate theory about pain control is**

- A. One hypothesis of pain modulation is based upon the inhibitory-excitatory interaction of afferent fibre synapses.

**204. Angioneurotic oedema**

- A. Puffiness around the eyes, oedema of the upper lip with redness and dryness
- B. Caused by several deep restorations in the anterior teeth
- C. There is no caries, negative thermal tests, negative percussion and negative response to palpation

**205. In melting gold, which part of flame we will use**

- A. Reduced zone
- B. Oxidizing zone

**206. To increase the stability of the lower denture**

- A. The occlusal plane should be below the tongue

- B. The occlusal plane should be above the tongue
- C. The lingual flanges should be concave

**207. If the investment is burnout rapidly, what will happen**

- A. Back pressure porosity
- B. Cracking of the investment

**208. What is the DISADVANTAGE of gypsum dies\*\***

- A. Weak edge strength and lack of surface details
- B. Dimensional inaccuracy

**209. Overdenture advantage is\*\***

- A. Proprioceptors

**210. In electro surgery, the tissue may stick to the electrode because of**

- A. The current intensity is too high
- B. The current intensity is too low

**211. Hybrid composite resin is used in posterior teeth because it**

- A. Contains micro filled
- B. Better colour matching

**212. The best way of getting good retention in full veneer crown is by**

- A. Tapering
- B. Long path of insertion

**213. Wrought metal is to be**

- A. Marble
- B. Quenched
- C. Subjected /undergone/ to cold treatment during processing (annealed)

**214. Where do you use the floss as a guide to the rubber dam**

- A. Through the contacts.

**215. In young children what is the commonest finding after dental complaint**

- A. Acute periodontal abscess

- B. Chronic periodontal abscess
- C. Apical abscess
- D. Chronic alveolar abscess

**216. In periodontitis, the most common finding is, "Main feature of suprabony pocket"**

- A. Horizontal bone resorption
- B. Vertical bone resorption
- C. Angular bone loss

**217. Periodontitis occurs in**

- A. Alveolar bone
- B. Periodontal membrane
- C. Alveolar bone and gingiva

**218. The normal range of gingival depth "Epithelial attachment" in healthy mouth is**

- A. 1-2 mm
- B. 0-3 mm
- C. 2-3 mm
- D. 0-5 mm

**219. The commonest elements which are found in periodontal membrane are\*\***

- A. Fibroblast
- B. Epithelial cells
- C. Erythrocytes
- D. Vest cells of malaise
- E. Inflammatory plasma cells and lymphocytes

**220. The term false pocket stands for**

- A. Infra bony pocket
- B. Loss of periodontal attachment
- C. Hyperplasia of the gum

**221. What DOES NOT prevent the calculus formation "build up"**

- A. Mastication
- B. Tooth shape
- C. Tooth inclination and crowding
- D. Salivary flow
- E. Oral flora

**222. Patient presents to you with remarkable resorption of gingivae around the remaining teeth; mainly around the lower bicuspid and anterior teeth. The oral hygiene is not good, some areas of cementum appears to be soft. Which of the following would be your preferred procedure**

- A. Surface grinding followed by fluoride application
- B. Surface grinding followed by GIC restorations
- C. Class V cavity preparation for a GIC preparation
- D. Cavity preparation for amalgam preparation
- E. Application of fluoride without surface preparation

**223. Which of the following is not useful for apical infection**

- A. Chlorhexidine
- B. H<sub>2</sub>O<sub>2</sub>
- C. EDTA
- D. Ethyl alcohol
- E. Eugenol

**224. A child with fracture of tooth at the apical third of the root, what your first decision would be**

- A. Wait and recall after one month and observe for any necrotic or radiolucency
- B. Root canal treatment
- C. Extraction
- D. Apicectomy

**225. What is the first thing to consider when you get a patient with intruded 11 and 12**

- A. Replace intruded teeth in position
- B. Advice patient about consequences
- C. Leave it and observe
- D. X-ray

**226. Electrical pulp testing is least useful in /or does not detect in some papers**

- A. Traumatized teeth
- B. Just erupted teeth
- C. Multi-rooted teeth
- D. Capped teeth
- E. Necrotic pulp

**227. The palatal pulp horn of maxillary molars is located**

- A. In the pulp chamber under mesiolingual cusp

- B. In the pulp chamber opposite the mesio distal fissure of the buccal cusp
- C. Under the disto lingual cusp

**228. The most characteristic allergic reaction to drugs is**

- A. Skin rash with swollen of lips and eyes

**229. Antibiotic prophylaxis should be used for patient with**

- A. Diabetics
- B. Rheumatic fever

**230. Which is not an effect of**

- I. Sedation
- II. Excitement
- III. Analgesia
- IV. Hypnosis
- V. General anaesthesia

- A. None of the above
- B. All of the above
- C. I and II
- D. II and III
- E. I, IV and V

**231. Opioid analgesics reduce pain by the release of which naturally appearing product**

- A. Serotonin
- B. Histamine
- C. Enkephalins

**232. Toxicity as a result of anaesthetic solution can be seen more when**

- A. Injection in supine position
- B. Injection into vascular area
- C. Injection without vasoconstrictors
- D. Intravenous injection

**233. When taking Mono Amino Oxidase Inhibitors (MAOI); which are is contra indicated**

- I. Barbiturate
- II. Local anaesthetic
- III. Pethidine

#### IV. Acetyl salicylic acid

- A. All of the above
- B. None of the above
- C. I, II and III
- D. II, III and IV "check Q137 too"

#### **234. Which of the following may be caused by newly placed restoration which interferes with the occlusion**

- A. Apical abscess
- B. Pulpal necrosis
- C. Apical periodontitis

#### **235. The most important factor in surgical removal of impacted teeth is**

- A. Removal of enough bone
- B. Preoperative assessment
- C. The flap design
- D. The use of general anaesthetic

#### **236. The most important indication of malignant lesions is**

- A. Pain
- B. Paresthesia
- C. Teeth movement
- D. Tooth resorption

#### **237. Patient with lower denture and complaining of paresthesia of the lower lip; the most common cause is**

- A. Pressure on mental foramen
- B. Pressure on the genioglossi Mylohyoid muscles

#### **238. The nerve supplies TMJ is**

- A. Auricula Temporal Nerve
- B. Nerve to masseter
- C. Facial nerve

#### **239. In cleidocranial dysplasia; which of the following would expect to find**

- A. Early lose of primary teeth
- B. Multiple un-erupted teeth and pseudo anodontia

#### **240. Uni-lateral swelling in the floor of the mouth occurs frequently with meal; what is the possible diagnosis**

- A. Ranula
- B. Sub-mandibular sialolith
- C. Cyst
- D. Mucocele

**241. Which two of the following conditions present as complete vesicles**

- A. Pemphigus
- B. Herpes simplex
- C. Aphthous ulcer
- D. ANUG
- E. Erythema migrans
- F. Erythema multiforme

**242. Keratotic lesion surrounded by cold web like lines /Wickham's Striae/ appears as lace-like network on the buccal mucosa; you diagnosis is\*\***

- A. Lichen Planus
- B. Keratosis follicularis
- C. White sponge nevus

**243. How would you treat Denture Stomatitis**

- A. Tetracycline
- B. Systemic penicillin
- C. Nystatin +

**244. What are the commonest congenitally missing teeth**

- A. 12, 22
- B. 35, 45
- C. 15, 25
- D. 33, 43

**245. What is the percentage of leukoplakia that turn into cancer\*\***

- A. 5%-6%
- B. 10%
- C. 25%

**246. An oral prodromal signs of Rubella are\*\***

- A. Fordyce's spots
- B. Koplik spots
- C. Geographic tongue

D. None of the above

**247. Which of the following conditions is not classified as a white lesion**

- A. Fordyce's granules
- B. Smoker's keratosis
- C. Leukoplakia
- D. Lichen planus

**248. Angular cheilitis in edentulous patient with complete denture is a result of**

- A. Deficiency of .. vitamin
- B. Low vertical dimension

**249. The absence of lamina dura in radiograph is a feature of all of these except for\*\***

- A. Paget's disease
- B. Hyperparathyroidism
- C. Fibrous dysplasia
- D. Osteogenesis imperfecta
- E. Hyperthyroidism

**250. Which is usually found when a systemic infection is present**

- A. Regional lymph node
- B. Fever
- C. Cellulitis

**251. How would you diagnose a periapical abscess**

- A. Pain on percussion
- B. Pain when eating hot food
- C. Pain when eating cold food
- D. The thickness of periodontal ligament on X-Ray

**252. Diabetic patient with moist skin, moist mouth and weak pulse; what would you do**

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

**253. How would you treat Epidermoid Carcinoma**

- A. Excision
- B. Excision and extraction of teeth

- C. Radiation
- D. Surgery and radiation

**254. In which direction you would extract a deciduous upper molar**

- A. Rotation
- B. Buccally
- C. Lingually

**255. Impression without elastomer in custom tray has been taken for crown preparation; it will be two days before impression gets to the laboratory for construction of the crown. Which impression material is preferred**

- A. Polyether
- B. Thiokol or meraptan rubber
- C. Condensation silicone
- D. Vinyl polysiloxane

**256. A large amalgam core is to be condensed around several pins in a vital molar tooth; what type of amalgam mix would you prefer**

- A. A large mix to ensure homogeneity
- B. A large with extra mercury to give easier manipulative qualities
- C. Several small mixes, sequentially triturated
- D. Several small mixes with varying mercury/alloy ratios
- E. A basic mix to which additional mercury is added as needed

**257. Micro-leakage at the attached enamel-composite resin interface is most likely to be due to**

- A. Hydrolysis of the filler phase of the composite
- B. Hydrolysis of the resin phase of the composite
- C. Bacterial acid formation dissolving the enamel
- D. Salivary pellicle growth at the interface
- E. Setting contraction of the composite resin

**258. The optimum cavosurface angle for occlusal amalgam surface is**

- A. 45-60°
- B. 70-85°
- C. 45-80°
- D. 95-110°
- E. 130-150°

**259. A major difference between light cured and chemical cured composite is that during setting or in function the light cures material tends to**

- A. Seal the margins better and completely
- B. Exhibit less wear on time
- C. Undergo greater colour change
- D. Shrink rapidly
- E. Posses greater fracture toughness

**260. If the sealant of bonding agent is not placed on part of enamel that has been etched by an acid solution; you would expect**

- A. Arrest of enamel carries by organic sulphides
- B. The enamel is to return to normal within 7 days
- C. Continued enamel declassification in the etched area
- D. Slight attrition of the opposing tooth

**261. When restoring weakened cusps with dental amalgam you should consider**

- A. 2mm reduction while forming a flattened surface
- B. 2mm reduction while following the original contour of the cusps
- C. 4mm reduction while forming a flattened surface
- D. 4mm reduction while following the original contour of the surface

**262. The bur should be tilted lingually when preparing the occlusal surface of class II cavity on a mandibular first premolar in order to**

- I. Remove unsupported enamel
- II. Prevents encroachment on the buccal pulp horn
- III. Prevents encroachment on the lingual pulp horn
- IV. Maintain dentinal support of the lingual cusp

- A. I and II
- B. I and III
- C. II and IV
- D. III and IV
- E. IV only

**263. In radiographs, an incipient carious lesion limited to the end of the proximal surface of posterior tooth appears as**

- A. Radiopaque area
- B. Triangle with apex towards the tooth surface
- C. Larger in radiographs than actual lesion
- D. All of the above

E. None of the above

**264. In regards to carbide burs; the more number of cutting blades and low speed will result in**

- A. Less efficient cutting and a smoother surface
- B. Less efficient cutting and a rougher surface
- C. More efficient cutting and a smoother surface
- D. More efficient cutting and a rougher surface

**265. For an onlay preparation during the restoration of a tooth, which one of the following is the MOST EFFECTIVE means for verifying adequate occlusal clearance**

- A. Wax bite chew in
- B. Proper depth cuts
- C. Visual inspection
- D. Articulating paper

**266. Choose statement that correctly defines the term AMALGAM**

- A. Amalgam is a metallic powder composed of silver, tin, copper and zinc
- B. Amalgam is an alloy of two more metals that have been dissolved in each other in the molten state.
- C. Amalgam is an alloy of two or more metals, one of them is mercury
- D. Amalgam is a metallic substance in powder or tablet form that is mixed with mercury
- E. Amalgam is an alloy of two or more metals, one of them is tin

**267. At which angle to the external surface of proximal cavity walls in a class II preparation for amalgam should be finished**

- A. An acute angle
- B. An obtuse angle
- C. A right angle
- D. An angle of 45°

**268. Teenager has swelling involving his upper lip, the corner of his nose and a region under his left eye. The swollen area is soft, fluctuant and pointed on the labial plate under his lips on the left side. His body temperature is 39°. What is the first thing you would do after taking history and temperature**

- A. Refer him to physician
- B. Anaesthetise all of the maxillary left anterior teeth to provide instant relief
- C. Give him an ice pack to be placed on the area to control the swelling
- D. Take radiograph and test vitality of his teeth
- E. Write prescription for antibiotics and delay treatment until swelling is

reduced

**269. The prognosis of tooth with apical resorption is**

- A. Poor
- B. Good if apex can be sealed
- C. Dependant upon periapical surgery
- D. Contingent upon systemic antibiotic therapy combined with treatment of the canal

**270. The term TUGBEN?? is related to : "When used in connection with a master Gutta Percha cone in endodontics"**

- A. Tensile strength of the gutta percha
- B. Consistency of gutta percha
- C. Size of the cone
- D. Fit of the cone in the apical 1 or 2 mm
- E. Length of the cone

**271. In root canal therapy it is generally accepted that the ideal root filling**

- A. Should extend to the level of the apex to minimize irritation
- B. Should extend slightly through the apex to ensure a complete seal
- C. Should extend to the dento cemental junction for healing
- D. The extension of the filling is not critical

**272. Mesio Buccal root of maxillary first molars MOST COMMONLY have**

- A. One canal with one foreman
- B. One or two canals with one foreman
- C. Two canals with one foreman
- D. Two canals with two foremen

**273. The most common cause of porosity in porcelain jacket crown is**

- A. Moisture contamination
- B. Excessive firing temperature
- C. Failure to anneal the platinum matrix
- D. Excessive condensation of the porcelain
- E. Inadequate condensation of the porcelain

**274. The main factor controlling a decision to increase the occlusal height of teeth for extensive oral reconstruction is whether**

- A. the inter occlusal distance will be physiologically acceptable after

treatment

- B. there will be sufficient tooth bulk in the abutment teeth for proper retention of the crowns
- C. at least two third of the original alveolar process will remain for adequate periodontal support
- D. the aesthetic appearance of the patient will improve sufficiently to warrant the planned reconstruction

**275. An advantage of metal-ceramic crowns, compared with full ceramic crowns for restoring anterior teeth is**

- A. Palatal reduction may be of minimal thickness
- B. Overall conservative for tooth structure
- C. Ability to watch the appearance of adjacent natural teeth
- D. Less laboratory time

**276. In cementing Maryland or Roche bridges, the effect is generally to**

- A. Lighten the colour of the teeth by the opacity of the cement
- B. Darken the colour of the abutment by the presence of metal on the lingual
- C. Have no detrimental colour effect
- D. Darken the abutment teeth by incisal metal coverage

**277. The minimal labial tooth reduction for satisfactory aesthetics with porcelain fused to metal crown is**

- A. 1mm
- B. The full thickness of enamel
- C. 1.5 mm
- D. 2.5mm
- E. One third of the dentine thickness

**278. The gingival portion of natural tooth differs in colour from the incisal portion because the**

- A. Lighting angle is different
- B. Gingival and incisal portions have different fluorescent qualities
- C. Gingival area has a dentine background
- D. Incident light is different

**279. In bridge work, which of the followings terms is NOT CORRECT**

- A. A retainer could be a crown to which a bridge is attached to
- B. A connector connects a pontic to a retainer or two retainers to each other
- C. The saddle is the area of the edentulous ridge over which the pontic

will lie and comes in contact with pontic

D. A pontic is an artificial tooth as part of a bridge

**280. A crown casting with a chamfer margin fits the die; but in the mouth the casting is open approximately 0.3mm. A satisfactory fit and accurate physiological close of the gingival area of the crown can BEST be achieved by**

- A. Hand burnishing
- B. Mechanical burnishing
- C. Using finishing burs and points to remove the enamel margins on the tooth
- D. Making a new impression and remaking the crown
- E. Relieving the inside of the occlusal surface of the casting to allow for further seating

**281. When describing a removable partial denture, the minor connector refers to\*\***

- A. Rigid components anterior to the premolar teeth
- B. Flexible components, in contrast to rigid major connectors
- C. Smaller connectors which connect denture components to the major connector
- D. The components of the denture base which provides reciprocation

**282. The means by which one part of a partial denture framework opposes the action of the retainer in fact is\*\***

- A. Tripoding
- B. Reciprocation
- C. Stress breaking
- D. Indirect retention

**283. In removable partial denture, the principle of an indirect retainer is that**

- A. Stabilise against lateral movement
- B. Prevent settling of major connectors
- C. Restrict tissue movement at the distal extension base of the partial denture
- D. Minimise movement of the base away from the supporting tissue

**284. Distortion or change in shape of a cast partial denture clasp during its clinical use probably indicates that the**

- A. Ductility was too low
- B. Hardness was too great
- C. Ultimate tensile strength was too low
- D. Tension temperature was too high

E. Elastic limit was exceeded

**285. Which of the following is true regarding preparation of custom tray for elastomeric impression**

- A. Adhesive is preferred over perforation
- B. Perforation provides adequate retention
- C. Adhesive is applied immediately before procedure
- D. Perforations are not made in the area over the prepared tooth

**286. When a removable partial denture is terminally seated ; the retentive clasps tips should**

- A. Apply retentive force into the body of the teeth
- B. Exert no force
- C. Be invisible
- D. Resist torque through the long axis of the teeth

**287. Why do you construct a lower removable partial denture with lingual bar**

- A. It is used when the space between raised floor, mouth and gingival margin is minimal
- B. Plaque accumulation is less than lingual plate
- C. Should be make thicker when short

**288. The Fovea Palatinae are**

- A. Foramina covering the lesser palatine nerves and vessels
- B. Morphologically related to the formation of the premaxilla
- C. Located on either sides of the midline close to the junction of the hard and soft palate
- D. Closely related to the rugae of the palate

**289. Which of following restoration material its strength is not effected by pins**

- A. Amalgam
- B. Composite resin

**290. Which one of following statement about Overdenture is not correct**

- A. Greater occlusal loads can be applied by the patient
- B. Retention and stability are generally better than with conventional complete denture
- C. Alveolar bone resorption is reduced
- D. The retained roots are covered by the denture thus protecting them from caries and periodontal diseases

**291. Which of the following is a major disadvantage to immediate complete denture therapy**

- A. Trauma to extraction site
- B. Increased the potential of infection
- C. Impossibility for anterior try in
- D. Excessive resorption of residual ridge

**292. Brown skin pigmentation does not occur in**

- A. Hyperparathyroidism
- B. Von Willebrand's syndrome

**293. Which statement BEST describe plaque**

- A. It is a soft film composed mainly of food debris and can not be rinsed off teeth
- B. It is a soft film composed mainly of food debris and can be rinsed off teeth
- C. It is a soft film composed mainly of non calcified bacteria and can not be rinsed off the teeth
- D. It is a soft film composed mainly of dextran and can not be rinsed off the teeth
- E. It is a soft film composed mainly of dextran and can be rinsed off teeth.

**294. The gingivae of child is diagnosed on the basis of all of these except of**

- A. Contour of gingival papilla
- B. Sulcus depth
- C. Contour of Nasmyth membrane
- D. Tight filling of gingival collar

**295. Which one of the following statement is correct**

- A. The remnants of Ameloblast contribute to the primary enamel cuticle
- B. the last secretion of the odontoblast is cementum X
- C. The last secretion of the ameloblast is the acquired of enamel cuticle
- D. The remnants of odontoblast form the primary enamel cuticle

**296. In regards to the glass of quartz particles of filling restorative resin; the microfill resins tend to have**

- A. A higher coefficient of thermal expansion and a higher crushing strength
- B. A higher coefficient of thermal expansion and a lower crushing strength

- C. A lower coefficient of thermal expansion and a higher crushing strength
- D. A lower coefficient of thermal expansion and a lower crushing strength

**297. Mercury is dangerous when it turns into vapour form because of**

- A. It is accumulative and cause liver poison
- B. It is accumulative and cause kidney poison
- C. It induces neoplasia in the liver
- D. It is accumulative and cause brain poison
- E. It induces neoplasia in the brain

**298. The elastic limit may be defined as the \*\***

- A. The maximum stress under tension that can be induced without failure
- B. The maximum elongation under tension that can be measured before failure
- C. The minimum stress required to induce permanent deformation of a structure
- D. Minimum stress in structure
- E. Maximum strain that can be measured.

**299. Rank the following impressions materials according to their flexibility**

- A. Alginate> Polysulphide> Silicone> Zinc Oxide Eugenol
- B. Silicone> Alginate> Polysulphide> Zinc Oxide Eugenol
- C. Alginate> Polysulphide> Zinc Oxide Eugenol>Silicone
- D. Alginate> Silicone> Polysulfide> Zinc Oxide Eugenol
- E. Alginate> Zinc Oxide Eugenol> Silicone> Polysulphide

**300. Denture resin are usually available as powder and liquid that are mixed to form a plastic dough; the powder is referred to as\*\***

- A. Initiator
- B. Polymer
- C. Inhibitor
- D. Monomer
- E. Dimer

**301. Which one of the following is the major disadvantage of stone dies used for crown fabrication**

- A. They lack accurate reproduction of surface details
- B. Their overall dimensions are slightly smaller than the original impression
- C. The strength of the stone

D. The hazard of aspiration of toxic materials during trimming of the dies.

**302. Glass Ionomer Cement sets because of\*\***

- A. Acid-Base reaction
- B. Addition polymerisation reaction
- C. Growth of glass crystals
- D. Slip plane locking
- E. Solvent evaporation

**303. The articular surface of the normal temporomandibular joint are lined with**

- A. A specially adapted, highly fibrous tissue
- B. Hyaline cartilage
- C. Chondroitin-6-phosphate
- D. Highly vesiculated tissues

**304. When all other removable partial denture consideration remains unchanged; clasps constructed of which material can be engage the deepest under cut**

- A. Chrome cobalt casts
- B. Nickel chrome casts
- C. Wrought stainless steel
- D. Wrought gold

**305. Which one of the following types of pain is most likely to be associated with cranio mandibular disorders**

- A. Exacerbated pain by hot or cold food
- B. Keeps patient awake at night
- C. Associated with muscle tenderness
- D. Associated with trigger spots related to the trigeminal nerve

**306. The incisal guidance on the articulator is the\*\***

- A. Mechanical equivalent of horizontal and vertical overlap of upper and lower incisors
- B. Mechanical equivalent at the compensating curve
- C. Same as condylar guidance
- D. Estimated by the equation: Incisal guidance = 1/8 of condylar guidance

**307. When immature permanent molars that have been treated with Ledermix pulp capping, the most probable pathology is**

- A. Chronic inflammation of the pulp

B. Necrosis of the pulp

**308. Child with rampant caries taking medicine with high quantity of sugar; the best way to help preventing caries is**

- A. Change sugar to sorbitol sweetener
- B. Report the patient is having expectorant
- C. Give him the syrup during sleep time
- D. Give him inverted sugar

**309. How many ppm " Part Per Million" of fluoride are present in water supply in case of temperate climate\*\***

- A. 1 ppm
- B. 2 ppm
- C. 8 ppm
- D. 1.2 ppm

**310. The difference between deciduous and permanent teeth are**

- A. Deciduous teeth have a higher pulp horns and larger pulp chambers
- B. Deciduous teeth have flatter contact areas
- C. Deciduous teeth have thinner enamel surface
- D. All of the above

**311. The most resistant filling materials to fill class IV cavities are**

- A. Resins with silicone dioxide (SiO<sub>2</sub>)
- B. Resins with glass or quartz
- C. Silico-phosphate
- D. Silicates

**312. With dentin bonding agent, you apply**

- A. First acid etching to dentine and then bonding agent
- B. Bonding agent directly to dentine
- C. Chelating agent (EDTA) and bonding agent

**313. What is the best way to apply aspiration before injection**

- A. Short, sharp pressure backwards
- B. Pressure for 2 to 3 seconds
- C. Long pressure
- D. Turning the needle 90° between two aspirations

**314. The method you will use to fill root canal of maxillary lateral incisor is**

- A. One major Gutta Percha cone

- B. Laterally condensed
- C. Laterally above condensed

**315. What controls the occlusion\*\***

- A. Teeth
- B. Receptors in periodontal membrane
- C. Proprioceptors
- D. Neuromuscular receptors
- E. TMJ
- F. All of the above

**316. How would you extract 35**

- A. Rotation
- B. Lingually
- C. Labially

**317. Why the method of extracting lower 8's by directing the extraction lingually is used\*\***

- A. Because of the roots direction
- B. Thinner bone
- C. Lingual deviation

**318. What the maximum dose of 2% lignocaine without vasoconstrictors\*\***

- A. 5 ml
- B. 10 ml
- C. 50 ml
- D. 100 ml

**319. Where do Maryland bridges lose retention often**

- A. Resin-metal
- B. Resin enamel
- C. Resin layer

**320. What is the function of gypsum-binder in the investment\*\***

- A. Setting and hydroscopic
- B. Strength and rigidity

**321. Where is the retentive position on tooth according to the survey line**

- A. Below the height of contour
- B. Next to gingival margins

**322. In regards to distal free end saddle; what is TRUE**

- A. Will require relining more often than a denture supported with teeth

**323. What are the most common errors when constructing partial denture**

- A. Improper survey
- B. Bad positioning of the occlusal rests
- C. Incorrect design

**324. Which periodontal pockets are evident on periapical x rays**

- A. Buccal pockets
- B. Lingual pockets
- C. Mesial pockets
- D. Distal pockets
- E. Sinuous

**325. What factor do you consider the most important when storing the occlusal part of a tooth**

- A. Occlusal anatomy
- B. Function

**326. All dental plaque\*\***

- A. Produce acid
- B. Produce caries
- C. Produce chelation
- D. Not necessarily produce acid

**327. Treatment of gangrenous tooth**

- A. Pulp capping
- B. Root canal therapy
- C. Pulpotomy

**328. Which material is not compatible with composite resin**

- A. Zinc Oxide and eugenol ZOE
- B.  $\text{Ca}(\text{OH})_2$
- C. Carboxylate
- D. Zinc phosphate cement

**329. Tooth under occlusal trauma shows**

- A. Bone resorption

- B. Necrosis of the pulp
- C. Hypercementosis
- D. Triangulation
- E. All of the above

**330. Which drug is specific for Trigeminal Neuralgia**

- A. Diazepam
- B. Carbamazepine (Tegretol)
- C. Ergotamine
- D. Phenytoin

**331. Which Nerve is anesthetised in anterior border of ramus and 1 cm above occlusal plane of lower posterior teeth**

- A. Lingual nerve
- B. Long buccal nerve

**332. In an X ray; the mesio buccal root of upper first molars is elongated which is the result of**

- A. Mesio angular horizontal
- B. Too big vertical angulation
- C. Too small vertical angulation
- D. High angulation

**333. Which of the following is false in regards to Cleft-Palate**

- A. May be submucous
- B. More common in males than females
- C. Predispose to speech defects, orthodontics problem and hearing loss
- D. Patients are more likely to have cardiovascular defect than the general population.

**334. Which of the following statement is correct for a periodontal disease\*\***

- A. The finger pressure is enough for mobility diagnosis
- B. A communicable disease
- C. X ray after intra alveolar surgery is sufficient for diagnosis healing
- D. Systemic diseases have no effects on it
- E. ZoE paste will accelerate healing

**335. The major cause of jacket crown breakage is**

- A. Inclusion of platinum foil
- B. Use of weak cementum
- C. Voids of porcelain

D. Porcelain is thinner than 1mm

**336. Pontic replaces upper first molars in a bridge should be**

- A. Slightly compress soft tissues
- B. Be clear of soft tissues
- C. Just in contact with soft tissues

**337. Labially displaced anterior tooth is restored with a gold core porcelain jacket crown so that it is in line with the arch; the crown will appear**

- A. Short
- B. Long
- C. Narrow
- D. Wide

**338. Which is NOT characteristics of canal filing materials "obturation material"**

- A. Tacky adhesive to walls
- B. Radio opaque
- C. Not irritating
- D. Quick in setting

**339. The best location of pin in class II inlay is**

- A. Where is the biggest thickness
- B. Mesial and distal angle
- C. Contact area

**340. Class V composite resin restorations can be polished**

- A. 24 hours after application
- B. Immediately after application
- C. 3 to 4 days
- D. 3 to 4 weeks
- E. Not at all

**341. Caries which is close to the pulp chamber; on x rays you find dent in dent; the right treatment is**

- A. Zinc oxide eugenol cement and amalgam
- B. Pulpectomy
- C. Pulpotomy
- D. Calcium hydroxide on pulp and amalgam

**342. Dental plaque produces**

- A. Chelation
- B. Dental caries
- C. Acids

**343. The main advantage of amalgam with high content of Cu is**

- A. Better marginal sealing
- B. Less corrosion
- C. Better tensile strength
- D. Higher and immediate compressive strength

**344. The major disadvantage of self-threaded pin is**

- A. Friction locked
- B. Too expensive
- C. Not all sizes available
- D. May cause tooth cracking

**345. In which class of cavities do composite restorations show most durability**

- A. I
- B. II
- C. IV
- D. III
- E. V

**346. How much space do you need to cap a weakened cusp with amalgam**

- A. 1mm
- B. 1.5mm
- C. 2mm
- D. 2.5mm

**347. Upper premolar with MO cavity; what is important about the application of the matrix band: "the question has shown too as ....What is complicated by"**

- A. The mesial concavity of the root surface
- B. Small lingual pulp
- C. High buccal pulp horn
- D. High lingual pulp horn
- E. Concavity of distal root surface

**348. Etching techniques are used always to**

- A. minimise the leakage of restorations
- B. for aesthetic considerations

**349. Sjogren syndrome is characterised by**

- A. Dryness of the mouth
- B. Dryness of the eyes
- C. Rheumatoid arthritis
- D. All of the above

**350. Long use of Tetracycline is characterised by\*\***

- A. Agranulocytosis
- B. Candida Albicans

**351. The most common characteristic symptom of malignant tumours occurring in lower jaw is**

- A. Pain
- B. Bleeding
- C. Paraesthesia

**352. Why Class IV gold can not be used in cavity as a filling material**

- A. Can not be polished "burnished"
- B. The corrosive properties

**353. The type of gold that used for dental bridges is**

- A. Hard 18%
- B. Type IV 75%

**354. In regards to Partial dentures, how do you establish reliable vertical dimension**

- A. Wax if the remaining teeth occlude

**355. In regards to indirect compare to direct wax technique\*\***

- A. Low temperature solidifying point
- B. Hard in room temperature
- C. Higher flow in room temperature

**356. If amalgam gets contaminated with moisture, the most uncommon result is\*\***

- A. Blister formation
- B. Post operative pain
- C. Secondary caries
- D. Lower compressive strength

**357. The effects of tooth removal in healthy individuals can show as**

- A. Loss of contacts
- B. Slight tilting
- C. Pocket formation
- D. TMJ problem
- E. All of the above

**358. Which is not a malignant lesion**

- A. Leukoplakia
- B. Erythema migrans /Geographic tongue/

**359. Anaesthesia 1 mm above last lower molars will anesthetize**

- A. Lingual Nerve
- B. Long buccal nerve

**360. Posterior superior alveolar nerve supplies\*\***

- A. 8, 7 and 6 except the mesio buccal root of 6
- B. 8, 7 and 6

**361. Patient complains of itching and vesicles on the upper labium (Vermillion region) every year, your diagnosis would be**

- A. Herpes simplex
- B. Recurrent ulceration aphthae
- C. Impetigo

**362. What is the typical feature of Lichen planus\*\***

- A. Smooth rete pegs
- B. Band of lymphocytes inflammation and hyper parakeratosis
- C. Immunofluorescence of liquefied layer

**363. Denture stomatitis is treated with**

- A. Amphotencin
- B. Tetracycline lozenges
- C. Mycostatin

**364. Paget's disease shows in the early stages in jaws**

- A. Cotton wool
- B. Ground glass
- C. Orange peel
- D. Beaten copped

**365. The most serious complications which may occur from abscess of max canine is**

- A. Cellulitis
- B. Cavernous sinus thrombosis
- C. Lacrimal duct stenosis
- D. Damage to infra orbital nerves

**366. Granulomas, cysts and chronic periapical abscesses may mostly be differentiated by**

- A. Radiographs
- B. Electric pulp test
- C. Biopsy
- D. Thermal

**367. The most prominent feature of acute apical periodontitis is**

- A. Tenderness of tooth to pressure
- B. Extra oral swelling
- C. Intermittent pain

**368. Marsupialisation is a technique used in the treatment of**

- A. Pericoronitis
- B. Cysts
- C. Abscesses

**369. Diagnosis of oral candidiasis (candidosis) is BEST confirmed by**

- A. Microscopic examination of smears
- B. Biopsy
- C. Blood count
- D. Serological exam

**370. Which antibiotic administered in childhood may result in tooth discolouration**

- A. Penicillin
- B. Tetracycline
- C. Streptomycin

**371. Ameloblastoma occurs MOST frequently**

- A. Near the angle of the mandible
- B. In the maxilla
- C. At the mandibular symphysis

**372. A patient with long standing rheumatoid arthritis and a history of steroid therapy, until a week ago, he presents for multiple extractions. The dentist should consult the patient's physician because**

- A. Patient is more susceptible to infection
- B. Patient may have a suppressed adrenal cortex
- C. Patient will need haematological evaluation

**373. A patient whose hands felt warm and moist is MOST likely to be suffering from\*\***

- A. Anxiety
- B. Congestive cardiac failure
- C. Thyrotoxicosis

**374. An adult patient with a history of bacterial endocarditis requires prophylactic administration of antibiotic prior to removal of teeth. indicate the pre-operative regimen\*\***

- A. Amoxicillin 2 gram an hour before operation orally
- B. Penicillin 250 mg orally six hours before operation
- C. Tetracycline 250-500 mg orally 2 hours before treatment

**375. A 12 year old girl complains of sore mouth, she has painful cervical lymphadenitis and a temperature of 39°C, oral examination shows numerous yellow grey lesions. What is the MOST LIKELY diagnosis**

- A. Measles
- B. Erythema multiform
- C. Herpetic gingivostomatitis
- D. Stevens-Johnson syndrome

**376. The causative micro organism for Herpetic gingivostomatitis is**

- A. Herpes simplex bacteria
- B. Herpes simplex virus
- C. Herpes zoster virus
- D. Borrelia vincentii

**377. To reduce the side effects risk of local anaesthetic injections; you should follow all of the following EXCEPT**

- A. Aspirate before injection
- B. Use the smallest effective volume
- C. Use the weakest efficient percentage strength
- D. Inject rapidly

**378. The most potent viricidal properties: "another format of the same answer: Indicate which of the following has viricidal properties"**

- A. Sodium hypochlorite
- B. Chlorhexidine
- C. Glutaraldehyde
- D. Alcohol 70%
- E. Quaternary ammonium

**379. Antibiotics should be used routinely to prevent infection arising from oral surgery in patients suffering from all the following EXCEPT**

- A. Agranulocytosis
- B. Sever uncontrolled diabetes
- C. Aplastic anaemia
- D. Mumps
- E. Leukaemia

**380. At what rate is closed chest cardiac compression should be in an adult\*\***

- A. 12 times a minute
- B. 24 times a minute
- C. 50 times a minute
- D. 80 times a minute

**381. Nitrous Oxide (N<sub>2</sub>O) is not used alone as a general anaesthetic agent because of\*\***

- A. Difficulties in maintaining an adequate O<sub>2</sub> concentration
- B. Adverse affects on liver
- C. Poor analgesics affects

**382. How can a periodontal pocket be recognised\*\***

- A. X-Ray
- B. Periodontal probe / Calibrated probe/
- C. Periodontal marker
- D. Bitewing radiograph

- E. Sharp explorer
- F. Study cast

**383. The final material you use for endodontically treated deciduous molars is\*\***

- A. Amalgam
- B. GIC
- C. Composite resin
- D. Wrought base metal crown

**384. Which type of cells does an abscess contain**

- A. Mast cells
- B. Polymorphonuclear leukocytes
- C. Eosinophils
- D. Epithelial cells

**385. The presence of sulphur granules is diagnostic of\*\***

- A. Actinomycosis
- B. Candidosis
- C. Viral infection
- D. Keratocyte

**386. Immediate aim of dry socket treatment is to\*\***

- A. Avoid Osteomyelitis
- B. Control pain

**387. Which is the LEAST likely to cause Xerostomia**

- A. Sjogren's syndrome
- B. Emotional reaction
- C. Antidepressants drugs
- D. Submandibular sialolith

**388. Intact vesicles are MOST likely to be seen in\*\***

- A. Herpes simplex infection
- B. Oral lichenoid reaction
- C. Aphthous ulceration
- D. Pemphigus vulgaris
- E. Cicatricial pemphigoid

**389. Painful salivary gland are MOST likely to be indicate to\*\***

- A. Mucocele
- B. Mumps

C. Sjogren's syndrome

**390. A patient with an acetone odour would be suspected suffering from**

- A. Heart disease
- B. Liver damage
- C. Diabetes

**391. Chronic inflammatory periodontal disease originates in**

- A. The marginal gingiva
- B. The crystal alveolar bone
- C. Cervical cementum

**392. Which is the most important local factor in the aetiology of periodontal disease**

- A. Occlusal trauma
- B. Calculus
- C. Brushing habits
- D. Coarse food

**393. Which of the following does state BEST the morphology of periodontal ligament fibres**

- A. Elastic
- B. Striated
- C. Non striated
- D. Levity
- E. Wavy

**394. Which of the following is LEAST to cause toxicity from local anaesthetic injection**

- A. Injecting in supine position
- B. Injecting in vascular area
- C. Injecting without a vasoconstrictor
- D. Intravenous injections

**395. If a child's teeth do not form; this would MOSTLY affects the growth of\*\***

- A. Alveolar bone
- B. Whole face
- C. Mandible
- D. Maxilla

**396. MOST common consequence arising from premature extraction of deciduous molar is**

- A. Loss of arch length
- B. Loss of speech sound
- C. Loss of facial contour

**397. After the age of 6 years, the greatest increase in the size of the mandible occurs**

- A. At the symphysis
- B. Between canines
- C. Distal to the first molar

**398. Which is present in Angel's Class II division 2 malocclusion**

- A. Open bite
- B. Retrusion of maxillary central incisors
- C. Reduced Overjet
- D. Increased overbite

**399. When injecting without vasoconstrictor, the maximum safe dose of 2% lignocaine solution for 70Kg adult is**

- A. 2.2ml
- B. 22ml

**400. Several application has been suggested to increase the effectiveness of prophylactic application of topical fluoride which include all EXCEPT**

- A. Increase Fluoride ions in solution "increase concentration"
- B. Increase PH of fluoride
- C. Increase exposure time to topical fluoride
- D. Pre-treat enamel with 0.5% phosphoric acid
- E. Use NH<sub>4</sub>F instead of NaF

**401. Which of the following ahs the highest sucrose content**

- A. Ice cream
- B. Canned juice
- C. Cough syrups
- D. Breakfast cereal
- E. Sweet potato

**402. The amount of fluoride required to reduce caries according to age and level of fluoride in drinking water. Which of the following figures is incorrect\*\***

- A. 1 year old child requires no fluoride when the fluoride in drinking water is 0.3PPM
- B. 3 years old child requires no fluoride when the fluoride in drinking water is 0.7PPM
- C. 6 years old child requires 1mg of fluoride when drinking water containing 0.5mg

**403. The major etiological factor responsible for Class II division 2 malocclusion in Angel's classification is\*\***

- A. Thumb sucking
- B. Growth discrepancy
- C. Tongue thrust habit
- D. Tooth to jaw size discrepancy
- E. Skeletal cause (discrepancy)

**404. Ankylotic primary second molar in the mandible is not always a good space maintainer because of**

- A. Mesial inclination of the 1<sup>st</sup> permanent molar
- B. It does not keep up with the rest of occlusion

**405. Preschool child has an intruded upper incisor; what would your treatment be\*\***

- A. X-ray
- B. Put it back in place and splint
- C. Control bleeding and check after a month
- D. Make the patient comfortable without disturbing the tooth.

**406. An upper deciduous molar has a caries exposure and on X ray the corresponding 2<sup>nd</sup> permanent premolar is absent. What treatment would you do to the deciduous tooth**

- A. Pulpotomy
- B. Endodontic treatment
- C. Pulp capping

**407. Where is the MOST probable place of bone resorption after a deciduous molar has a pulpal gangrene**

- A. Interradicular septum
- B. The periapical area

**408. How many pulp horns are presented in a typical mandibular deciduous second molar**

- A. 2
- B. 3

- C. 4
- D. 5

**409. All of the following are keratinised EXCEPT of**

- A. Crevicular epithelium
- B. Palatal epithelium
- C. Alveolar mucosa
- D. Free gingiva
- E. Attached gingiva

**410. The MOST cause of gingiva; irritation is**

- A. Calculus
- B. Plaque
- C. Caries
- D. Restorative material

**411. How can you improve the adhesion of a fissure sealant**

- A. Acid etching technique

**412. The advantage of using dental floss over rubber point interdentially**

- A. Remove plaque and debris in interproximal surfaces
- B. Polish
- C. Massage of the interdental papillae
- D. Aid and recognise subgingivally

**413. After prophylactic treatment, you decide to change the flora to a non-acidogenic by changing the diet. How long does it take to achieve this change**

- A. Few weeks
- B. Several months or longer

**414. Which one of the following is a non-calorie sweetener**

- A. Mannitol
- B. Saccharin
- C. Xylitol

**415. 6 year old child who had a history of primary herpes simplex has got a recurrent infection. What is the likely cause**

- A. Herpes labialis

**416. A newly placed restoration interferes with occlusion. What will be the periodontal response**

A. Thickening of the periodontal membrane

**417. In class II restoration, all of the following considered to occur as probable causes of periodontal problems except**

- A. Flat ridge
- B. Faulty or not proper contour
- C. Not properly polished restoration
- D. Cervical wall is too deeply apical
- E. Overextension of lining in cavity

**418. Angular type of bone resorption can be seen more often in\*\***

- A. Occlusal traumatism
- B. Food particles retention
- C. Periodontosis
- D. All of the above

**419. What is the most important function of periodontal ligament**

- A. Keep teeth in the socket
- B. Protect alveolar bone
- C. Provide nutrition

**420. The periodontal ligament in a teeth without use appear to be**

- A. Narrow
- B. Wide

**421. Which radiographic method would you use in assessing periodontal conditions and lesions**

- A. Bitewing
- B. Periapical
- C. Occlusal
- D. Panoramic

**422. What does CPITN stand for**

A. Community Periodontal Index of Treatment needs

**423. Vertical incision of mucoperiosteal flap should be**

- A. Always extending to the alveolar mucoperiosteal
- B. Bisect the middle of gingival papillae
- C. Must be at the right angle of the tooth

**424. Apical migration of the epithelial attachment followed by atrophy of marginal gingiva at the same level results in**

- A. False periodontal pocket
- B. Periodontal pocket recession
- C. Gingival cleft
- D. True pocket

**425. Calculus attaches to teeth surface by\*\***

- A. Acquired pellicle
- B. Interlocking to the crystals of the tooth
- C. Penetrated into enamel and dentine
- D. Mechanical interlocking
- E. All of the above

**426. The width of normal periodontal ligament space is**

- A. 0.25 to 0.5mm
- B. 1mm

**427. The incision angle in Gingivectomy is**

- A. 45° to the tooth in an apical direction

**428. The MOST common place for initiation of gingivitis is**

- A. Interdental papillae
- B. The free gingival ridge
- C. The attached gingiva
- D. The marginal gingiva

**429. Which is the MOST local factor in the aetiology of periodontal disease**

- A. Occlusal trauma
- B. Calculus
- C. Brushing habits
- D. Coarse food

**430. Incisive foramen when are superimposed over apex of root on radiograph may be mistaken to be**

- A. Cyst
- B. Cementoma
- C. Odontoma

**431. Which of the following factors can affect the shape and size of the pulp canal**

- A. Chemical irritation and caries
- B. Trauma and function
- C. Attrition, wear and aging of the patient
- D. All of the above

**432. Following a periodontal surgery; periodontal dressing will**

- A. Help in tissue adoption
- B. Decrease the patient's discomfort
- C. Enhance the rate of healing
- D. Control bleeding and maintain blood clot

**433. What is the MOST important role of saliva in preventing dental caries**

- A. Buffering action

**434. A patient comes with a lactobacillus of more than 100000. what is your advice**

- A. Reduce sugar in diet

**435. The MOST cariogenic sugar is**

- A. Sucrose

**436. How to detect the furcation involvement**

- A. Radiolucent area radiographically
- B. Probe in mesial distal and mid facial areas of suspected tooth

**437. What is TRUE about topical fluoride\*\***

- A. It cooperates into plaque and resists acid demineralisation
- B. Fluoride prophylaxis paste has been clinically proven to be more effective preventing caries

**438. Which of the following is correct about Nitrous Oxide N2O**

- A. N2O has high analgesic property and low anastatic at its minimum anaesthetic dose. "Low MAC; Max Anaesthetic Concentration"
- B. Absolutely contraindicated in pregnancy
- C. Has low blood diffusibility and result in hypoxia
- D. It is good aesthetic and low MAC

**439. Which is CORRECT about the Lingual Nerve**

- A. Lingual nerve is anterior and medial to inferior alveolar nerve

**440. Which local anaesthetic agent is preferred for a confirmed hypersensitive patient**

- A. 3% prilocaine with felypressin  
B. Mepivacaine 3% without vasoconstrictor \*\*

**441. The MOST common side effects of local anaesthetic is a result of**

- A. Intravascular injection  
B. Hypersensitivity

**442. Which is TRUE about disinfectant solution\*\***

- A. It destroys all pathogenic micro organism including high resistant  
B. It reduces the number of micro organism to a non infective level  
C. It kills all pathogens but not spores.

**443. What to do with instruments after surgically treating a patient with confirmed diagnosis of hepatitis B\*\***

- A. Soak them in hypochlorite solution "Milton"  
B. Sterilize, scrub and sterilize  
C. Handle them with two pairs of household rubber gloves  
D. Scrub them with iodine surgical solution

**444. What is the mode of action of autoclaving "Moist sterilisation"**

- A. Moist heat sterilization  
B. Protein denaturation

**445. All of the following are requirements of an adequate mucosal periosteal flap except\*\***

- A. Base is wider than the free margin  
B. Mucous membrane is carefully separated from periosteum  
C. Base containing blood supply

**446. The first thing to do after surgical removal of impacted 3<sup>rd</sup> molar in the mandible is\*\***

- A. Cold application from the outside

**447. A primary molar with relatively un-resorbed roots encompassing the permanent tooth bud. What extraction technique would you use to avoid the inadvertent removal of a developing bicuspid**

A. Section the tooth vertically and remove each root separately

**448. A young female patient presents with throbbing pain in the left lower posterior jaw with trismus and associated lymphadenopathy. What would be your diagnosis**

A. Tumour  
B. Pericoronitis

**449. Patient presents to you with a history of local pain in the lower right posterior region. Insisting that you extract his lower teeth. The teeth in question are vital without any pathology. Your diagnosis is**

A. Odontalgia  
B. Referred pain  
C. Trigeminal neuralgia

**450. Which of the following are not supplied by the mandibular division of trigeminal\*\***

A. Anterior part of digastric  
B. Masseter muscle  
C. Buccinator

**451. 30 years old male complains of painless swelling in the buccal mucosa. It has been present for about six months. He admits "playing with it". He is concerned because this might represent cancer. The base is narrow; the most likely diagnosis is**

A. Irritation fibroma

**452. A patient is complaining of an open sore on the buccal mucosa. The lesion is painless, ulcerated, has indurated margins, 1.5 cm in diameter, covered by greyish-white exudate, enlarged lymph nodes and tender, negative tuberculin test and positive serology. The diagnosis is\*\***

A. Chancre /Primary lesion of syphilis/

**453. An old male presents complaining of having numerous white lesions in the oral cavity within past few days. Prior to this the family physician prescribed chlorite tetracycline for an upper**

**respiratory infection, the patient is taking this antibiotic for the past two weeks; lesions are relatively non-painful, slightly elevated, adhere plaques on the lip mucosa, buccal mucosa and the tongue. MOST LIKELY to be**

- A. Moniliasis /Which is candidiasis/

**454. Characteristic of Squamous Cell Carcinoma\*\***

- A. White skinned people
- B. Alcoholic and smokers
- C. It reacts far simply to radiotherapy

**455. How can differentiate between a benign epithelial tumour from a carcinomatous one**

- A. Soft papillomatous mass, not indurated or not fixed /Move freely/ and pedunculated.

**456. What is the characteristic feature of gingivitis in AIDS patient\*\***

- A. Red band on the free gingiva associated with platelet.
- B. Correlating with other pathogenesis lesions of AIDS and does not resolve to periodontal conventional treatment.
- C. Sever pain

**457. The characteristic feature of basal cell carcinoma is**

- A. Blood metastasis
- B. Does not erode bone
- C. Intensive involvement / inveterately characteristic/
- D. Radio resistant

**458. What is the significance of erosive lichen planus\*\***

- A. High malignant potential
- B. Some malignant potential

**459. Where does the bone resorption show in a necrosis pulp of deciduous molar**

- A. At the root apex
- B. At the bifurcation
- C. On the buccal side of the tooth
- D. On the lingual side of the tooth

**460. To extract upper deciduous molar, the movement should be**

- A. Buccal first to move tooth
- B. Palatal first to move tooth
- C. Distal first to move tooth
- D. Rotation movement
- E. Fraction of the tooth

**461. 8 years old child, on examination you find 75 with carious exposure. On X-ray you find 35 missing. Your treatment is**

- A. Extraction of 75 allowing 36 to move mesially
- B. Pulpotomy on 75 and wait indefinitely
- C. Extraction of 75 and place a fixed space retainer to be replaced with fixed bridge.
- D. Extraction of 65 and 75

**462. Which of the following is true**

- A. Antibiotics are useful in the treatment of periodontitis
- B. Trauma from occlusion causes thickening of the marginal gingivae
- C. Periodontitis is the primary cause of teeth lost after the age of 35.
- D. All periodontal pockets can be identified by x-ray
- E. Periodontitis is the most common disease in the oral cavity

**463. Longest lasting resin restorations are**

- A. Class I
- B. Class II
- C. Class III
- D. Class IV

**464. Pin Restoration with which material has the best retention**

- A. Amalgam
- B. Gold inlay
- C. Composite
- D. Glass Ionomer

**465. Acute apical abscess-emergency treatment**

- A. Open and drain for two days
- B. Antibiotic and analgesic
- C. Clean and Ledermix

**466. TMJ dysfunction common symptom is**

- A. Clicking

- B. Locking
- C. Pain in the muscles of mastication

**467. Gagging reflex is caused by**

- A. Trigeminal nerve
- B. Glossopharyngeal
- C. Facial nerve
- D. Recurrent laryngeal

**468. Which impression material should NOT be kept in water within on hour: "in another paper was: 30 mins before pouring"**

- A. Polyether
- B. Condensation silicone
- C. Polyvinyl silicone

**469. High copper amalgam lasts longer than low copper amalgam because of\*\***

- A. Increased compressive strength
- B. Increased corrosion resistance
- C. High creep
- D. Increased tensile strength
- E. Decreased setting expansion

**470. Porosity in acrylic dentures is caused by**

- A. Contraction porosity in thickest point of the denture
- B. Insufficient pressure during flasking causes it

**471. The shortest facial height is when**

- A. Teeth are overlapped
- B. There is maximum cuspal interdigitation

**472. What is TRUE about vertical dimension**

- A. Does not change for the whole life
- B. Decreases when head is tilted back
- C. Increases when a lower denture is placed in mouth

**473. The sterilisation of Gutta Percha is achieved by**

- A. Heat
- B. Chemical sterilisation
- C. Flame
- D. Boiling
- E. Autoclave

**474. Why would you cast gold in hot mould\*\***

- A. To compensate for the expansion of investment.

**475. If temporary cementation is required, which cement will you use**

- A. ZOE
- B. Zinc Polycarboxylate
- C. GIC

**476. In the construction of an RPD, guiding planes are created by**

- A. Perpendicular to the occlusal plane
- B. Parallel side towards the path of placement.

**477. When should pour polyether impression materials**

- A. Within 24 hours after taking impression
- B. Within 30 minutes after taking impression
- C. Should be stored dry and then poured
- D. Should be stored in humid place

**478. Which of the following is a frequent cause of opaqueness in a porcelain jacket crown**

- A. Porcelain layer is too thin over the opaque layer.
- B. Porcelain layer is too thick

**479. Which cement is less soluble in the oral cavity**

- A. Polycarboxylate
- B. Zinc phosphate
- C. Silicate phosphate
- D. GIC

**480. A patient with reasonable oral hygiene has a small proximal caries on the premolar. The patient requests an aesthetic filling. Your preparation will be**

- A. Same as amalgam with cavo-surface bevels
- B. Proximal caries removal with occlusal & gingival bevels

**481. A gingivally extended chrome cobalt cast clasp**

- A. Can extend 0.5 under the surveyor line
- B. Can extend 0.25 under the surveyor line
- C. Will resist deforming forces better compared to cast gold

**482. The first molars are extracted in both arches**

- A. The bone resorption will be the same for both arches
- B. Resorption is more on the palatal side of maxillary molars
- C. Resorption is more on lingual side of mandibular molars
- D. The ridge height resorbs more in maxilla than mandible

**483. The use of nickel chromium in base plate should be judiciously considered because**

- A. A significant number of females are allergic to nickel
- B. A significant number of female are allergic to chromium
- C. A significant number of males are allergic to nickel

**484. A seven year old boy fell of his bicycle 2 weeks ago and broke his maxillary central incisor. The pulp horn is visible as a pin point. The tooth is vital. Your treatment will be**

- A. Pulpectomy
- B. Place calcium hydroxide and fill with composite resin
- C. Calcium hydroxide pulpotomy

**485. During mouth preparation for RPD on tooth adjacent to edentulous area. There is dentine exposure**

- A. Restoration is required
- B. Proceed with rest seat preparation and fabrication if involved area is not more than 2mm

**486. After making an impression to reline an RPD the dentist notes that the indirect retainers are not resting on the tooth. To avoid this what process should have undertaken initially**

- A. Ask patient to bite firmly while impression is setting
- B. Hold the metal base frame against the abutment tooth while setting
- C. Fabricate new denture
- D. Add impression material and close the gap

**487. Which is the only dental tissue that lose its formative cells as it matures**

- A. Enamel
- B. Dentine
- C. Pulp
- D. Cementum

**488. The muscle responsible for maintaining the bolus of food while chewing is**

- A. Buccinator
- B. Orbicularis oris

**489. Which muscle contracts during the tongue protrudes**

- A. Mylohyoid
- B. Genioglossus
- C. Digastric

**490. Which of the following is the most significant factor regarding filler in composite for increased strength**

- A. Particle size 1-3 micron
- B. Sub micron sized particles
- C. High concentration of the filler particles

**491. A patient has a small incisal fracture of the maxillary incisor. Which is the best material to resist fracture at the acid etched tooth composite interface**

- A. Micro-filled composite
- B. Hybrid composite
- C. GIC
- D. Silicate

**492. The principal factor involved in oral Para-function is related to**

- A. Periods of stress
- B. Occlusal pre-maturities during mandibular closure

**493. During manual palpation, the mucosa is thin in**

- I. Midline of the palate
- II. Mylohyoid region
- III. Over torus palatinus

- A. I, II and III
- B. None of the above
- C. I and II
- D. II and III

**494. The path of condyle during mandibular movements depends on**

- A. Articular eminence, meniscus/capsule of TMJ and muscle attachments

**495. While doing RCT you gave dressing with a paper point wetted with...??...solution. The patient arrives the next day with severe**

**pain. There is no swelling but the tooth is tender to percussion. You will\*\***

- A. Replace with similar dressing and prescribe antibiotic
- B. Replace with corticosteroid past
- C. Retrieve paper point surgically
- D. Remove the dressing and leave for several days before replacing it.
- E. Provide incision and drainage

**496. The area of the posterior palatal seal includes which of the following**

- A. [left][right]
- B. Hamular notch

**497. The best method of cleaning and toilet cavity**

- A. Alcohol
- B. Citric acid
- C. Water
- D. Organic acid

**498. Herpetic infection is an iatrogenic infection spreads by the infected**

- A. Serum
- B. Vesicle
- C. Vesicle fluid and saliva

**499. Periapical abscess is differentiated from periodontal abscess by**

- A. Pulpal radiology
- B. History and vitality test
- C. X-ray and history

**500. You may suspect poor reaction to bleeding if there is a history of**

- A. Cirrhosis of liver
- B. Hypertension

**501. Maxillary central incisor located palatally causes**

- A. Prolong stay of primary central incisor
- B. Supernumerary teeth

**502. Toxicity of anaesthetic is assessed by**

- A. Dose which is given
- B. Percentage of solution
- C. Vasoconstrictions amount

**503. Children born with cleft palate, microdontia and glossoptosis have**

- A. Christian disease
- B. Trenches-Collins Syndrome
- C. Pierre-Robin Syndrome

**504. Which of the following penicillin are readily destroyed by stomach acid**

- A. Methicillin
- B. Cloxacillin
- C. Phenoxy methyl
- D. Penicillin G

**505. What is not correct about Long Buccal Nerve\*\***

- A. Passes through two heads of pterygoids muscles
- B. Supplies mucosa over lower and upper molars
- C. Supplies the buccinator muscle
- D. Supplies skin over buccinator

**506. N<sub>2</sub>O excretes through**

- A. Urine
- B. Lungs

**507. Radiopaque lesions are seen in**

- A. Multiple myeloma
- B. Paget's disease
- C. Hyperparathyroidism
- D. Chronic renal failure

**508. The causative organism in localised juvenile periodontitis is Actinomyces actinomycete comitans which is\*\***

- A. Gram positive facultative aerobic
- B. Gram positive facultative anaerobic non-motile rod
- C. Gram negative facultative anaerobic non-motile

**509. Which of the following is NOT significant factor in determining virulence of a.a.??\*\* //I think a.a. stands for**

**Anaerobic Bacteria/**

- A. It effects chemotaxis
- B. Produces leukous toxins
- C. Destroys collagen
- D. It is immuno-suppressive

**510. Density of film is decreased by increasing the**

- A. MA
- B. Exposure time
- C. Developing time
- D. Rinsing time

**511. The best space maintainer is**

- A. Lingual holding arch
- B. Pulpectomised primary tooth
- C. Band and loop maintainer

**512. 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

**513. While giving CPR which of the following is considered**

- A. It achieves 30% of cardiac output with 60 compressions per minute
- B. It achieves normal blood oxygen levels with 12 respirations per minute
- C. You have to check compression point by thumping before starting compression
- D. Cardiac output has to be monitored regularly by checking radial pulse.

**514. A patient has developed a sever chest pain and difficulties in breathing while in the dental chair. Your initial response is**

- A. Administer glycerine trinitrate and monitor patient in upright position
- B. Patient has an acute episode of angina as demonstrated by curve in ECG
- C. No treatment is required until confirmed as MI by ECG
- D. Patient has myocardial infarction as confirmed by ECG

**515. On inspection of lateral boarder of the tongue at the base, which structure would you expect to find**

- A. Filiform papillae
- B. Fungiform papillae
- C. Taste buds
- D. Lymph nodes
- E. Circumvallate papillae

**516. Delayed eruptions of at least part of the dentition is a recognised feature in\*\***

- A. Dentino-Genesis imperfecta
- B. Anhidrotic ectodermal dysplasia
- C. Rickets

**517. Which of the following is a radiographic feature of dentino-genesis imperfecta**

- A. Small pulp chambers and root canals, normal enamel
- B. Enamel is missing but dentine formation is normal
- C. Enamel and dentine show disturbances
- D. Pulp is normal but dentine is abnormal

**518. A 10 year old boy presents with non-vital, non-mobile tooth. Treatment is**

- A. Pulpectomy with calcium hydroxide
- B. Pulpectomy with Zinc oxide eugenol
- C. Pulpotomy with formocresol
- D. No treatment is required if tooth is asymptomatic

**519. A patient suffers a blow to his maxillary central incisor without resulting in fracture. The pulp**

- A. Immediate necrosis
- B. Becomes non-vital but only if treatment is delayed too long
- C. Becomes non vital irrespective of treatment
- D. No changes is seen later if fracture does not occur

**520. In the case f malignant melanoma occurring intra orally, which of the following is true**

- A. Uncommon on the palate when occurs intra orally
- B. Should not be biopsied, as this will increase metastasis
- C. The 5 years survival rate is 20%
- D. The incidence of oral melanoma is the same as those on the skin
- E. Commonly occurs intra orally

**521. Patient on anti-coagulant therapy requires an extraction to be performed. Which of the following is NOT true\*\***

- A. Post operative bleeding can be reduced somehow by using tranexemic acid
- B. Prothrombin values of at least 2.5 is required to perform extraction
- C. It takes at least 8 hours for heparin to take effects
- D. Heparin should be administered sub-cutaneous

**522. Community water fluoridation MOST effectively achieves is\*\***

- A. 90-95% reduction of caries
- B. 45-55% reduction of caries
- C. Reduces pit and fissures caries more than smooth surfaces
- D. Reduces smooth surfaces more than pit and fissures

**523. Patient presents with caries in many teeth. you will advise that**

- A. Fluoride toothpaste does not effectively prevent caries and topical fluoride is required.

**524. What is the primary consideration in providing nutrition/dietary counseling to a patient**

- A. Secure details of patient's eating habits
- B. Have the patient to fill in a diet survey
- C. Eliminate sugar from diet

**525. Which of the following is true in regards to periapical cementoma**

- A. Teeth are vital.
- B. Teeth are not vital

**526. Which of the following is not a side effects of lignocaine**

- A. Angioneurotic oedema
- B. Nervousness

**527. A physician refers a nine year old boy to you to confirm diagnosis. The boy has a fever of 40°C and coughing. When you focus your light into his eyes he turns away. Intra-orally there are white spots surrounded by red margins. The disease and lesions are**

- A. Measles and Koplik's spots
- B. AHGS vesicles

**528. In periodontal scalers and cures; the blade is formed by which two surfaces**

- A. Two lateral surfaces
- B. Lateral surface and face
- C. Lateral surface, face and shank
- D. Lateral surface, face, back and shank

**529. Which of the following is NOT TRUE in regards to lateral periodontal cyst\*\***

- A. It is more common in anterior region
- B. It occurs more in maxilla than mandible
- C. Probable origin is from dentigerous cyst which develops laterally
- D. Encountered in the cuspid-premolar region of the mandible, derived from the remnants of the dental lamina

**530. Middles aged woman gives a history of intermittent unilateral pain in the sub mandibular region, most probable cause is**

- A. Calculus in the salivary duct resulting in sialolithiasis.
- B. Ranula
- C. Cyst
- D. Mucocele

**531. What is TRUE in regards to branchial cyst**

- A. Situated on the anterior boarder of sternocleidomastoid muscle

**532. Damage/injury to which nerve causes dilation of pupils**

- A. Oculomotor
- B. Ansa cervicalis
- C. Abducens

**533. After an inferior alveolar nerve block; the patient develops paralysis of eyelid, upper lip and lower lip on that side. This means that the L.A was deposited in**

- A. The parotid gland

**534. Aspirin reduces pain by which of the following mechanism**

- A. It is anti inflammatory by the release of histamine
- B. It blocks the cyclo-oxygenase pathway.

**535. Patient with haemophilia presents which of the following findings\*\***

- A. Increased prothrombin time
- B. Increased bleeding time
- C. Increased clotting time

**536. The pulpal floor of the Class II cavity for a mandibular first premolar should be\*\***

- A. Parallel to occlusal plane
- B. Perpendicular to long axis
- C. Tilted lingually

**537. Marginal leakage at the proximal gingival cavosurface of a recently restored class II can be caused by**

- I. Insufficient condensation
- II. First proximal increment was too large
- III. Neglecting to wedge the matrix
- IV. Hand manipulation instead of mechanical
- V. Debris contamination

- A. I, II, III
- B. II, III, IV
- C. I, II, V
- D. None of the above
- E. All of the above

**538. What are the dangers of using air as a cooler during cavity cutting**

- A. Hypersensitivity
- B. Odontoblast is drawn into the tubule

**539. In RCT the ideal root filling**

- A. Ends at the apex
- B. Extends beyond apex to achieve a good seal
- C. Ends at the dentino-cemental junction

**540. Where is the narrowest part of the pulp**

- A. At the radiographic apex
- B. At the dentino-enamel junction
- C. At the orifices

**541. Which of the following is MOST useful in differentiating between apical abscess and periodontal**

- A. Percussion
- B. Vitality tests
- C. Cold tests
- D. Heat tests

**542. What is the ideal length for a post in post-core in an endodontically treated tooth**

- A. 2/3 of the tooth length
- B. 1/2 of the tooth length
- C. 1.5 times that of the crown
- D. Same as the anticipated crown

**543. Which is correct in regards to shade selection of crowns**

- A. It should be selected before starting preparation
- B. Chroma is the lightness/darkness of colours
- C. Value is the colour itself
- D. Hue is the concentration of colours

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

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

**545. Strain is defined as \*\***

- A. An external force
- B. An internal force to oppose external load
- C. Deformity opposed the applied load

**546. Size of pulp chamber within the tooth is influenced by**

- A. Age
- B. Parafunctional
- C. History of the tooth /abrasion, erosion, caries/
- D. All of the above

**547. Self polymerising acrylic resins differs from heat cured resins because they exhibit**

- A. Higher molecules weight
- B. Higher content of residual monomers

**548. The advantage of firing porcelain in vacuum\*\***

- A. Reduces size of air-bubbles incorporated thus decreasing porosity
- B. Removes water before firing, increasing the hardness of porcelain
- C. Significantly lowers firing temperature

**549. The contraction (Gaseous) porosity in inlays is related to\*\***

- A. Overheating of the alloy
- B. Molten gases
- C. Diameter of the sprue
- D. Overheating of investment

**550. Where would you expect to find the Mylohyoid on relation to periphery of complete denture**

- A. Mandibular buccal in the midline
- B. Mandibular lingual in the midline
- C. Mandibular disto buccal area

**551. Class V lesion may originate**

- A. In lingual pits
- B. In buccal fissures
- C. Poor oral hygiene

**552. Retention for occlusal amalgam cavity in premolars is BEST provided by**

- A. Slightly undercutting of walls with inversed cone bur
- B. Mesial and distal undercuts
- C. Buccal and lingual undercuts

**553. What is true in regards to lateral mandibular incisor**

- A. 20% have 2 canals with one foramen
- B. 20% have 2 canals with two foramina
- C. 40% have two canals with 10% ending in two foramina
- D. 40% have two canals with only one ending in two foramina

**554. Splinting the adjacent teeth in fixed bridge is primarily done to**

- A. Distribute the occlusal load
- B. Achieve better retention

**555. Porcelain must not be contaminated by handling between which two stages**

- A. Pre-soldering and heat treatment
- B. Heat treatment and opaque /bake/ stages
- C. Opaque and bisque stages
- D. Bisque and glazing stages
- E. First opaque bake and second opaque bake

**556. What is the relationship of the retentive portion of the partial dentures retainers to the survey line of abutment**

- A. Gingival /Below/
- B. Occlusal /Above/
- C. No relation

**557. Which of the following liquids is not suitable for prolonged immersion of cobalt chrome partial dentures**

- A. Alkaline peroxidase
- B. Hypochlorite solutions
- C. Soap solutions
- D. Water

**558. Dentures hyperplasia is generally attributed to**

- A. Poor oral hygiene
- B. Denture movement

**559. In complete dentures, cheek biting is most likely a result of**

- A. Reduced Overjet of posterior
- B. Increased vertical dimension
- C. Teeth have large cusp inclines

**560. Resting face height in edentulous patients**

- A. Decreases when head is tilted back
- B. Increases when lower denture is inserted
- C. Does not change over time

**561. Ala-Tragal line is\*\***

- A. The line running from the tragus of the nose to ala of the ear
- B. A guide used to orient the occlusal plane
- C. Parallel to Frankfurt horizontal plane
- D. A guide to the occluding face height in complete denture.

**562. Decision to employ cusped or without cusps teeth is influenced by\*\***

- A. Reverse Overjet
- B. TMJ problems
- C. Cranio mandibular skeletal relationship

**563. The first forming microbial elements of plaque are**

- A. Aerobic gram positive G+
- B. Aerobic gram negative G-
- C. Anaerobic gram negative G-
- D. Spirochetes
- E. Anaerobic gram positive G+

**564. Extracellular polysaccharides in plaque are formed by**

- A. Bacteria from sucrose
- B. Precipitated from carbohydrate
- C. Precipitated from glycoproteins

**565. What is important requisite for fillers in dental composite restorative resins in load bearing area**

- A. Sub micro sized particles
- B. High coefficient of thermal expansion
- C. High in content (High filler)

**566. Sensitivity to hot and cold foods soon after cavity preparation and placement of GIC and composite resin in an upper incisor tooth is due to**

- A. Mechanical trauma due to cavity preparation
- B. Chemical
- C. Heat from GIC settings

**567. After completing pulp extirpation, debridement and placing a dressing; apical periodontitis is because**

- A. Over instrumentation extending into periapical area
- B. Irritation from chemicals used
- C. Entrapped bacteria
- D. One or any combination of the above

**568. It is desirable to major connectors of upper partial dentures to\*\***

- A. At least 5 mm away from the gingival margin
- B. Cover the anterior palate

**569. Which of the following statements is true**

- A. Last secretion of odontoblast forms cementum
- B. Last secretion of odontoblast forms acquired enamel cuticle
- C. Remnants of ameloblasts form primary enamel cuticle
- D. Remnants of odontoblasts form primary enamel cuticle

**570. When you tries to seat a crown on tooth you find a discrepancy of 0.3mm at the margin; you will**

- A. Reduce inner surface of crown
- B. Remake a new crown
- C. Smooth the enamel at the margin
- D. Hand burnish crown margins

**571. In regards to Chlorhexidine mouth wash\*\***

- A. Is anionic
- B. Used in 0.02% concentration
- C. Used in 0.12 concentration
- D. Penetrates the gingival crevice/pocket

**572. Glycerine trinitrate given to an angina patient acts by**

- A. Gives relief of pain by decreasing venous return
- B. Decreases blood pressure and causes headache

**573. Which of the following is NOT complication of radiation to head and neck area\*\***

- A. Xerostomia
- B. Mucositis
- C. Increased caries
- D. Heightened taste sensation
- E. Increased risk of osteomyelitis

**574. A female patient is diagnosed with Addison's disease which of the following does not confirm this**

- A. Weakness, lassitude
- B. Anorexia, nauseas, fatigue
- C. Hypotension
- D. Bony expansion
- E. Amenorrhea

**575. Which of the following conditions is not associated with periodontal destruction in primary teeth**

- A. Down's syndrome
- B. Steven Johnson's syndrome
- C. Hypophosphatasia
- D. Papillon-Lefebvre syndrome
- E. Cyclic neutropenia

**576. In patient with exposed root surfaces**

- A. Ask to use low abrasive dentifrices
- B. It is because of dental hypersensitivity

**577. Which of the following is the best index to evaluate gingival health**

- A. Gingival index by Loe and Silness
- B. Periodontal index
- C. Periodontal disease index
- D. OHI-S

**578. In surveying; calibration of examiners data is important because**

- A. It reduces the errors in gathered data.

**579. Patient is resistant to caries but has 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

**580. Cariogenicity of Streptococcus mutans is because of the production of**

- A. Glucans
- B. Levans
- C. Fructans
- D. Sucrose

**581. A child consumes a toxic dose of fluoride. You will\*\***

- A. Induce vomiting
- B. Gives a lot of fluids
- C. Gives a lot of fluids and sodium bicarbonates
- D. Ask patient not to eat for 45 minutes
- E. Gives milk, calcium tablets or magnesium tablets

**582. Collimation is done to**

- A. Reduces the size of the beam, so it is easy to visualise the central X ray.
- B. Avoids unnecessary exposure to radiation of surrounding tissues of the patient

**583. In X rays filtration is used to\*\***

- A. Remove low energy X rays
- B. Reduce exposure time
- C. Reduce size of the beam

**584. In calculus formatio, the epitaxial concept is one of the theories. Which of the following is true**

- A. Mineralisation occurs when calcium and phosphate content is high
- B. The presence of matrix would start initiate formation of nucleus
- C. The amorphous materials would convert to calcium phosphate and hydroxy phosphate

**585. Gemination is\*\***

- A. Division of single tooth, twinning
- B. Fusion of two or more crowns of teeth
- C. Fusion of two or more roots

**586. In primary teeth, failure of  $\text{Ca(OH)}_2$  pulpotomy is MOST likely to produce\*\***

- A. External resorption
- B. Internal resorption
- C. Necrosis of the pulp
- D. Ankylosis

**587. A raised dot on X ray film is present to**

- A. Orient exposure side
- B. Differentiate between left and right side
- C. Dip during developing

**588. What does the fixer solution in developing X-rays do**

- A. Removes unexposed silver halide crystals
- B. Removes exposed silver halide
- C. Fixes the developed film

**589. When the developing solution is correctly mixed and x ray film is being developed for normal time; but the solution is too warm, the outcome film will be**

- A. Too light
- B. Too dark
- C. Fogged

**590. Kaposi's sarcoma**

- A. Seen on buccal mucosa in HIV as purple lesion
- B. Seen on palate of most HIV patient
- C. Should be biopsy

**591. What is characteristic feature seen in pyloric stenosis\*\***

- A. Erosion of maxillary central incisors
- B. Vomiting of undigested food
- C. Loss of appetite
- D. Weakness

**592. At birth, the oral cavity usually contains**

- A. S. mutans only
- B. No micro organism
- C. S. mutans and S. salivavis
- D. Lactobacilli and S. mutans

**593. The papillae that are few in numbers, associated with MOST taste buds, associated with Von Ebner's glands are\*\***

- A. Fungiform
- B. Circumvallate
- C. Foliate
- D. Filiform

**594. In class II preparation it is difficult to place the gingival seat when preparation is extended too gingivally because the**

- A. Enamel rods are directed occlusally
- B. Marked cervical constriction

**595. In maxillo fracture, if intra cranial pressure increases\*\***

- A. It is normal
- B. Typically associated with tachycardia
- C. Associated with blood pressure
- D. Usually subsides spontaneously
- E. Typically associated with constricted and un-reactive pupil

**596. Moist heat sterilization is achieved by**

- A. Denaturation of protein

**597. In regards to Benzodiazepines**

- A. Increases R.E.M. sleep
- B. Has a hangover effects because of active metabolism
- C. Includes carbamazepine
- D. Can be used safely on children as it achieves reliable effects

**598. Which is NOT CORRECT in regards to lingual nerve**

- A. It is posterior and medial to the inferior alveolar nerve
- B. It passes close to the mandibular 3<sup>rd</sup> molar
- C. It may be anaesthetised by the mandibular nerve block
- D. It provides supply to the lingual gingiva
- E. Supplies anterior 2/3 of the tongue

**599. The maxillary and mandibular teeth get their blood supply from\*\***

- A. Separate branches of S. Palatina artery
- B. Separate branches of maxillary artery
- C. Branches of maxillary and mandibular arteries

**600. Haemophilia is characterised with\*\***

- A. Daughters affected from their carriers fathers
- B. Presents on "y" chromosome
- C. Hemarthrosis is common finding
- D. Deficiency of factor VII
- E. Neutrophil defect

**601. In minor oral surgery which is TRUE in regards to antibiotic**

- A. Amoxil is satisfactory against most oral infection
- B. Metronidazole and Amoxil have the same penetrating power
- C. It is evident that it will reduce post operative swelling

**602. In regards to third molars surgery**

- A. Maximum swelling is seen after 24-48 hours
- B. Prophylactic antibiotic will reduce swelling
- C. Antibiotic cover is compulsory

**603. A 65 year old patient needs extraction of 44; he has taken insulin in the morning. What preoperative advice you should**

**give**

- A. Take more sugar
- B. Maintain normal diet
- C. Antibiotic 2 hours before
- D. Medication increases preoperatively

**604. Patient with prosthetic heart valve taking 7.5 mg warfarin. She has?????. Patient needs extraction. What is your management**

- A. 3g Amoxil, suture after surgical removal
- B. 3g Amoxil, suture when bleeding has stopped
- C. Gentamycin/vancomycin cover, stop warfarin, give heparin and suture later
- D. Ampicillin cover, stop warfarin, give heparin and suture later
- E. Gentamycin/vancomycin cover, stop warfarin and suture later

**605. Loss of the gingival attachment is measured between**

- A. CEJ to base of pocket
- B. Top of the gingiva to the base

**606. Absence of clearly defined crystal lamina dura is because**

- A. Pathognomonic of periodontal disease
- B. Indicative of attachment loss
- C. Associated with periodontal pocket
- D. Commonly related to radiograph angulation

**607. A patient 37 year old; with paroxysmal pain on the left eye that he thinks is related to his maxillary posterior teeth. The pain comes in recurrent bursts and aggravated by stress and alcohol. Oral exam is negative. The probable diagnosis is**

- A. Migraine
- B. Cluster headache
- C. Trigeminal neuralgia
- D. Temporal neuritis

**608. A mandibular permanent first molar had to be extracted, this will affect**

- A. Adjacent teeth
- B. Teeth in the same quadrant
- C. Both arches the same side
- D. Full mouth

**609. The places for new erupted mandibular molars are created by**

- A. Resorption of anterior ramus and apposition posteriorly
- B. Apposition of alveolar process
- C. Apposition of inferior boarder of mandible

**610. A patient comes with a firm, painless swelling of lower lobe of parotid which has grown progressively for the past year. He complains of paresthesia for the past 2 weeks. This is most likely to be**

- A. Pleomorphic adenoma
- B. Carcinoma of the parotid
- C. Lymphoma of parotid

**611. What is the histopathology of the pathogenesis of the plaque following 21 days of plaque accumulate**

- A. Primarily infiltrate of plasma cells
- B. Primarily infiltrate of lymphocytes
- C. Infiltrate of plasma cells and early bone involvement
- D. Infiltrate of neutrophils

**612. What is INCORRECT in HIV associated periodontitis\*\***

- A. Picture of ANUG superimposed with RPP
- B. Spontaneous bleeding interproximal
- C. Depression of T4/T8 lymphocytes
- D. Deep Perio-pockets usually seen in advanced periodontitis

**613. 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 contra indicated in immuno-compromised patient

**614. The MOST common cause of gingival enlargement is**

- A. Hereditary
- B. Drug induced
- C. Plaque induced
- D. Leukaemia

**615. A 13 year old has enlarged gingivae; gives a history of Dilantin sodium what is you treatment**

- A. Oral prophylaxis and gingivoplasty
- B. Oral prophylaxis, scaling, root planning
- C. Stop medication

**616. A patient has improperly formed DEJ, reduction in size of pulp chamber, chipping and attrition of enamel that would MOSTLY be**

- A. Fluorosis
- B. Amelogenesis imperfecta
- C. Dentinogenesis imperfecta

**617. Which is wrong in regards to (water jet spray) hydrotherapy**

- A. Does not harm gingivae
- B. Removes plaque
- C. Removes required pellicle

**618. Anhidrotic ectodermal dysplasia is characteristic by\*\***

- A. Hypodontia or anodontia

**619. During extraction of maxillary third molar, the tuberosity is fractured; however, it remains in place attached to the mucoperiosteum. Which of the following procedures should be employed\*\***

- A. Remove the tuberosity and suture
- B. Leave the tuberosity and stabilize if required
- C. Remove the tuberosity and fill the defect with Gelfoam then suture.
- D. If fractured tuberosity is greater than 2 cm, leave in place and suture

**620. An incision biopsy of an ulcerated and intruded clinically suspicious lesion in 50 years old female reveals chronic inflammation; you would\*\***

- A. Inform the patient and her physician of your findings and instruct the patient to return in six months
- B. Surgically excise the entire lesion since you know it is not malignant
- C. Dismiss the patient with instructions for warm saline rinses for re-examination
- D. Repeat the biopsy

**621. What is the MOST common consequence of an allergic response to medication**

- A. Skin rash "dermatitis" with swelling of lips and eyes

**622. How many times do you breathe in mouth to mouth resuscitation**

- A. 10-12 times a minute
- B. 4-6 times a minute

**623. What causes a reduction of pulmonary ventilation**

- A. Laryngeal muscle paralysis
- B. Airway obstruction

**624. What would you do if the systole is elevated\*\***

- A. Calm down the patient

**625. What would you do if the diastole is elevated**

- A. Investigate systemic cause

**626. Which are non-calcified areas in the child's cranium**

- A. Fontanelles

**627. Koplik's spots are associated with one of the following**

- A. Viral infection
- B. Diabetes
- C. Measles
- D. Rubella
- E. Candidosis

**628. What is Von Recklinghausen disease**

- A. Neurofibroma
- B. Necrosis of bone produced by ionizing radiation

**629. How do you treat the cause of airway obstruction**

- A. Extension of the neck
- B. Flexion of the neck

**630. How do you prepare a patient with rheumatic fever before extraction**

- A. 6,000,000 units of benzoyl penicillin
- B. 2g Amoxicillin pre-operatively

**631. Which is LEAST likely to cause bleeding after surgical operation**

- A. Antibiotic therapy
- B. Poor surgical techniques
- C. Aspirin
- D. Codeine

**632. Acute pyogenic bacteria infection may result in\*\***

- A. Leucopenia
- B. Neutropenia
- C. Leukocytosis
- D. Lymphocytosis
- E. Eosinophilia

**633. Prophylactic administration of antibiotic is indicated in patient before oral surgery with**

- A. Herpes simplex
- B. Whooping cough
- C. Bacterial endocarditis

**634. Oral mucosa and skin pigmentation occurs in patient with\*\***

- A. Diabetes mellitus
- B. Addison's disease
- C. Multiple myeloma
- D. Squamous cell carcinoma
- E. Bright's disease
- F. Cushing's disease

**635. Patient has fainted, the signs are, blanched face, weak pulse, moist skin, shallow respiration; your first management is**

- A. 1 ml adrenaline subcutaneously
- B. Mouth to mouth respiration
- C. Nitro glycerine sub lingually
- D. Recumbent position; supine

**636. Thrombocytopenic purpura would complicate surgery by**

- A. Oedema
- B. Haemorrhage
- C. Acute infection

**637. Patient who has WBC count of just over 100000 is most likely suffering from\*\***

- A. Leucopenia
- B. Leukaemia
- C. Polycythemia

**638. Which of the following is TRUE**

- A. Antibiotics are useful in the treatment of ANUG
- B. Trauma of occlusal factors causes cleft or fibrous thickening of marginal gingivae
- C. All Perio pockets can be detected by x rays
- D. Periodontitis is the most common problem in teenage
- E. Perio disease is a primary cause of loss of teeth after 35 years of age.

**639. In regards to the conditions where you have to prescribe antibiotic prior to dental treatment**

- A. Rheumatic fever
- B. Sub-acute bacterial endocarditis
- C. By pass
- D. Valve replacement
- E. Uncontrolled diabetes
- F. All of the above

**640. Herpangina is caused by**

- A. Coxsackie virus

**641. The main vitamin to synthesis prothrombin is**

- A. Vitamin K

**642. The immediate concern in the management of facial trauma should be**

- A. Securing a blood units to replace any loss
- B. Fixation of fractures
- C. Checking the breath and insure a free airways
- D. Neurological consultation

**643. What is NOT A SIGN of neurological trauma**

- A. Excitement
- B. Shock
- C. Improper eye sight
- D. Leaning
- E. Sever headache
- F. Vomiting
- G. Euphonia
- H. Fixed dilated pupils

**644. A young patient presented with rheumatic fever and suspected allergy to penicillin. The antibiotic of choice is**

- A. Chloromycetin
- B. Sulphonamide
- C. Buffered penicillin
- D. Erythromycin
- E. Achromycin

**645. Patient under treatment with corticosteroids may develop**

- A. Adrenal suppression

**646. Disorder of steroid will result in**

- A. Adrenal suppression
- B. Delayed healing
- C. Osteoporosis
- D. All of the above

**647. Esophagitis, herpes simplex, colitis during 5 weeks. You will find the same signs of**

- A. Multiple myeloma
- B. Erythema multiforme
- C. AIDS

**648. What does not show in Cleidocranial dysplasia\*\***

- A. Defective formation of clavicles
- B. Delayed closure of fontanelles
- C. Retention of maxilla
- D. Delayed eruption of permanent teeth
- E. None of the above

**649. In regards to Plummer-Vincent syndrome or "Paterson and Kelly syndrome"**

- A. Iron deficiency is a feature
- B. Atrophic oral and gastric mucosa
- C. Dysphagia and angular cheilitis
- D. Predisposing oral cancer
- E. All of the above

**650. Steam under pressure sterilisation is the best method to kill microorganisms. How does it work**

- A. Coagulation of plasma protein
- B. Dehydration of DNA

**651. Patient with morphine coma; what is the medication of choice to reverse its act**

- A. Bradykinin
- B. Epinephrine
- C. Amphetamine
- D. Naloxone

**652. Why are streptococci resistant to penicillin\*\***

- A. They produce penicillinase.

**653. When comparing the mesio distal length of second deciduous molar with the length of 2<sup>nd</sup> premolar; we will find the deciduous tooth is**

- A. Longer
- B. Shorter
- C. Near the same size

**654. How do you diagnose trigeminal neuralgia MOST accurately**

- A. History

**655. How do you treat a child with severe Von Willebrand's disease\*\***

- A. Like a normal child
- B. Like a diabetic child
- C. Like a haemophilic child

**656. The zygomatic process serves as**

- A. Origin of masseter muscle
- B. Origin of temporalis
- C. Protects parotid gland
- D. Insertion of lateral pterygoid

**657. Treatment of patient with herpes simplex\*\***

- A. Symptomatic treatment and acyclovir
- B. Idoxuridine

**658. Painless bluish lump filled with fluid on the lips; MOST likely is**

- A. Smoker's keratosis
- B. Squamous cell carcinoma
- C. Mucocele
- D. Fibroma
- E. Fibro-epithelial polyp

**659. The diagnosis of pemphigus vulgaris is confirmed by\*\***

- A. Tzanck cells
- B. Test dose of corticosteroid
- C. Test of anti body
- D. Histological immunofluorescence
- E. Serological test for auto antibody

**660. Paget's disease under microscope shows**

- A. Mosaic pattern

**661. Ameloblastoma on x-rays shows as**

- A. Soap bubbles

**662. Ankyloglossia is caused by**

- A. Edentulous ridge
- B. Short lingual frenum
- C. Short labial frenum

**663. What is NOT CHARACTERISTIC finding in carcinoma of the mouth**

- A. Elevation
- B. Fixation
- C. Invasion
- D. Verrucoid appearance
- E. Pain

**664. Blow to the mandible resulted in deviation to the left on opening; x-rays show unilateral fracture, where would you expect the fracture\*\***

- A. Neck of the left condyle
- B. Neck of the right condyle
- C. Body of the left condyle
- D. Body or the right condyle

**665. Marble bone disorder is\*\***

- A. Osteoporosis
- B. Osteopetrosis

**666. In regards to dentinogenesis imperfecta on x-rays, What is TRUE**

- A. Short and blunted roots
- B. The pulp canal is obliterated

- C. Big pulp chamber, thin dentine and normal enamel
- D. Type III, characteristic shell teeth
- E. All of the above

**667. Exfoliative cytology will not help in the diagnosis of**

- A. Herpes simplex infection

**668. Treatment of Anaphylactic shock**

- A. Adrenalin 1mp IV

**669. The treatment of angioneurotic oedema**

- A. Anti histamine 10mg IV
- B. Chlorphenamine maleate as Piriton by Allen
- C. Hydrochloride 25 mg IM
- D. Corticosteroid drugs or with adrenaline.

**670. Most congenitally missing teeth are**

- A. Mandibular 3<sup>rd</sup> molars
- B. Mandibular 2<sup>nd</sup> premolars
- C. Maxillary lateral incisor

**671. Which of the following is secondary to immune deficiency**

- A. Pseudo membrane deficiency
- B. Herpes simplex
- C. Squamous cell carcinoma
- D. Elevated Epstein bar viruses incidence

**672. Odontogenic cyst develop from the following structures except**

- A. Reduced enamel epithelium of tooth crown
- B. Dental lamina dura
- C. Epithelium trapped after sutures
- D. Hertwig's root sheath

**673. The definition of Leeway space is**

- A. It is the difference in mandibular width between C, D, E and 3, 4, 5

**674. If the focal spot to film distance is increased from 20cm to 40cm, the intensity of radiation is reduced by**

- A. 1/2
- B. 1/4

- C. 1/3
- D. 1/5

**675. Which vitamin is not produced and stored in organisms**

- A. Vitamin C

**676. The initial priority in treatment of horizontal fracture is**

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

**677. Healthy dental pulp responds to injury by**

- A. The formation of reparative dentine at the pulpal surface corresponding to area of irritation

**678. In full dentures; porosity in the most thickest area is due to\*\***

- A. Gaseous porosity
- B. Shrinkage porosity

**679. The most common cause of fracture at the isthmus of class II dental amalgam restoration is**

- A. Delayed expansion
- B. Inadequate depth at the isthmus area
- C. Inadequate width at the isthmus area
- D. Moisture contamination of the amalgam during placement

**680. The definition of incompetent lips is**

- A. Lips can not close in rest position

**681. Which drug may cause respiratory depression**

- A. Barbiturate

**682. What is Hutchinsonian triad**

- A. Combination of Hutchinson's teeth, interstitial keratitis and nerve deafness in children with congenital syphilis.

**683. For a 5 years old child who lives in a NON WATER FLUORIDATED are. What is the recommended intake of fluoride**

- A. 0.25mg
- B. 0.10mg
- C. 0.50mg
- D. 1.00mg

**684. Nitrous Oxide is contraindicated in**

- A. Heart disease
- B. Asthma
- C. Mental retardant
- D. Sickle cell anaemia

**685. Green stain on tooth surface is due to\*\***

- A. Chromogenic bacteria

**686. Spread of infection 12, 22 is MOST LIKELY to be**

- A. Labial
- B. Palatal

**687. Sinus tract is indication of**

- A. Chronic lesion

**688. The MOST common tumour of the parotid is**

- A. Pleomorphic oedema

**689. What does "DOUBLE BLIND" mean**

- A. A kind of clinical study in which neither the participants nor the person administering treatment know which treatment any particular subject is receiving. Usually the comparison is between an experimental drug and a placebo or standard comparison treatment. This method is believed to achieve the most accuracy because neither the doctor nor the patient can affect the observed results with their psychological bias.

**690. After 4 to 7 days, what type of cells you would find predominately in gingivitis**

- A. Leukocytes
- B. Plasma cells

**691. What the age of patient who has all incisors, some premolars and some canine erupted; note that no 2<sup>nd</sup> molars showing**

- A. 8 years

- B. 11 years
- C. 13 years
- D. 14 years

**692. Patient with Class II div I malocclusion has ANB of**

- A. +2
- B. -2
- C. +8
- D. -8

**693. In hairy tongue you will find**

- A. Elongated filiform papillae

**694. Which muscle has insertion in the pterygoid raphe\*\***

- A. Superior constrictor of the pharynx
- B. Middle constrictor of the pharynx
- C. Inferior constrictor of the pharynx

**695. Which micro-organisms in periapical lesion you would find microscopically**

- A. Aerobes
- B. Aerobes to mainly anaerobes

**696. What is ESR? "erythrocyte sedimentation rate"**

- A. A test that measures the rate at which red blood cells settle through a column of liquid. A non-specific index of inflammation

**697. The first thing to do when syncope occurs in apprehensive patient**

- A. Head should be lowered

**698. Which of the following is staphylococcal infection**

- A. Scarlet fever
- B. Pericarditis
- C. Pancreatitis
- D. Carbuncle

**699. What is TRUE about Chrome-Cobalt partial denture**

- A. No immersion of dentures in hypochlorite

**700. Patient with eruption cyst; your treatment would be**

A. Observation, mostly it bursts spontaneously

**701. The expected age of patient with rapid progressive periodontitis**

A. Between 15 and 25 years of age

**702. Which of the following has proven to be the MOST important in community preventive program**

- A. Dental awareness of the community
- B. Institution of oral hygiene measures
- C. Water fluoridation

**703. The water fluoridation is 0.5ppm; what is the recommended supplemental fluoride concentrations for 3 year old child**

- A. 0.25mg
- B. 0.50mg
- C. 1.00mg
- D. 0mg

**704. Rhomboid glossitis is**

A. Candidal infection

**705. The image of x ray is too pale the MAIN cause is**

A. Old expired film

**706. The beam that goes from cathode to anode is consisted of**

A. Electrons

**707. In the mouth of new born baby; what sort of bacteria you expect to find**

A. None

**708. The transmission of RNA into DNA called**

A. Transcription

**709. How often a bitewing should be taken for children**

- A. Every visit routinely
- B. Every year after parent's permission

**710. To obtain the MOST accurate X rays of teeth; the tooth film distance should be (Close/far) as anatomical restriction will permit. What is TRUE in this regard**

A. The paralleling technique favours the bisecting technique.

**711. The pregnancy enlargement of gingivae is a result of**

A. Hormonal disturbance

**712. Why do you give atropine in general\*\***

A. To reduce the salivary secretion

**713. Pathogenic means**

A. Pathological conditions of the disease

**714. Periodontitis is usually severe in patient with**

A. Defective neutrophils

**715. Halothane anaesthetic by**

A. Hepatotoxic reaction

**716. Sedation in children can be achieved by**

A. Diazepam

**717. Which lymph node is involved in carcinoma of the lip: "or the first metastasis of carcinoma of lips"**

- A. Submental node
- B. Submandibular node

**718. Which of the following could cause the overall cellular damage to be greater**

- A. The specified dose delivered all at once
- B. The same fatal dose given in divided smaller doses over a period of time

**719. Which of the following conditions would be considered for antibiotic prophylaxes**

- A. Malignancy recently removed
- B. Congenital valve heart disease

C. Functional heart murmur

**720. All of the following should be considered for systemic antibiotic except**

- A. Extraction of tooth with acute dento alveolar abscess
- B. Necrotic ulcerative gingivitis (NUG) unless it is acute.
- C. Extraction of 38 or 48 with acute pericoronitis
- D. Full mouth extraction for a patient with perio disease

**721. The tissue response to oral hygiene after periodontal treatment is BEST assessed by**

- A. Decrease in the tendency to bleed on probing

**722. In regards to Metronidazole\*\***

- A. It is effective for the treatment of AUG/NUG

**723. The mode of act of drug may be defined as**

- A. How it produces its action

**724. Class III cavity is**

- A. Proximal cavity slightly gingival to the contact area

**725. Terminal Hinge Axis can be obtained by**

- A. Face bow
- B. Kinematic face bow
- C. Articulator

**726. Incisal colour differs from gingival colour in that the gingival part**

- A. Is thicker than the incisal part
- B. Has dentine background

**727. Alveolar bone resorption is not seen in**

- A. Steven-Johnson syndrome (Erythema multiforme)

**728. The silver bromide crystals in x rays films after being expressed to radiation forms**

- A. Latent image

**729. The best radiograph for maxillary sinus is**

- A. PA skull x ray
- B. Occipitontal radiograph
- C. Town's view

**730. Fluoride in water community of 4ppm will result in**

- A. No mottling
- B. Mottling in almost all permanent teeth except some molars
- C. Mottling in permanent premolars only

**731. Hydrotherapy "Water Jet" is used to**

- A. Remove pellicle from tooth surface
- B. Remove dental plaque
- C. Causes no harm to gingiva

**732. Which of the following is not considered in the estimation of gingival index**

- A. Nasmyth's membrane

**733. When examining intra orally between the side of the tongue and the lateral border of the mandible, you expect to**

- A. Palpate the lymph nodes
- B. Palpate the borders of the tongue

**734. Black hairy tongue is MOSTLY seen in**

- A. HIV patient

**735. What is TRUE about water fluoridation**

- A. Will have no effects after the eruption of permanent teeth

**736. When there is a fracture on condyle, the muscle responsible for elevation of condyle is**

- A. Lateral pterygoid muscle
- B. Medial pterygoid muscle
- C. Masseter muscle

**737. Dentinogenesis imperfecta develops in**

- A. Initial stage
- B. Proliferation stage
- C. Histodifferentiation stage

D. Morphology stage

**738. Compared to dental plaster all die stones**

- A. Require less gauging water
- B. Require more gauging water
- C. Require the same quantity of gauging water
- D. Are beta-hemihydrate
- E. None of the above

**739. The MOST effective manner to produce a hard surface on a cast is by**

- A. Employ as much water as possible on mixing
- B. Employ as little water as possible on mixing
- C. Adding 2% of borax to the mix
- D. Adding calcium tetraborate
- E. None of the above

**740. When dry cast is immersed in water saturated with calcium sulphate\*\***

- A. There is contraction
- B. There is negligible expansion
- C. There is definite expansion
- D. There is no change
- E. None of the above

**741. Fusion temperature of impression compound should occur**

- A. Below mouth temperature
- B. Above mouth temperature
- C. As of the skin temperature
- D. At the room temperature
- E. None of the above

**742. The flow of the following percentage is allowable for impression compound (type I) at the oral temp of 37°**

- A. 6%
- B. 10%
- C. 2%
- D. 20%
- E. None of the above

**743. The disadvantage of heating the impression compound in a water bath is**

- A. It may become brittle

- B. It may become grainy
- C. Lower moles with constituents are leached out
- D. The plasticity of the compound may be altered
- E. All of the above

**744. Generally there is ???? zinc oxide eugenol impression pastes between flow are**

- A. Working time
- B. Accelerator
- C. Setting time
- D. Composition
- E. None of the above

**745. Dental impression material are hydrocolloids of**

- A. The emulsoid type
- B. The suspension type
- C. The sol type
- D. The get type
- E. None of the above

**746. Elastomers are\*\***

- A. Hydrophilic
- B. Hydrophobic
- C. Water-loving impression material
- D. Potassium alginates
- E. None of the above

**747. The polysulfide rubber impression material are**

- A. Not sensitive to temperature when curing
- B. Quite sensitive to temperature when curing
- C. Less sensitive to temperature than silicone rubber
- D. The same sensitivity to temperature as silicone rubber
- E. None of the above

**748. The elastic properties of rubber impression material**

- A. Improves with time
- B. Deteriorates with time
- C. Deteriorates when exposed to temperature
- D. Improves when exposed to temperature
- E. None of the above

**749. The effect of temperature rise above 100°C on heat cured denture base acrylic resins is**

- A. Produces porosity on the external portion of the resin.
- B. Produces porosity on the internal portion of the resin.
- C. Produces porosity on the surface of the resin.
- D. Prevents porosity on the interior of the resin

**750. The principle cause of failure of amalgam restoration is**

- A. Improperly prepared amalgam
- B. Improper cavity preparation
- C. Perio involvement
- D. Particles of amalgam
- E. None of the above

**751. Reduced occlusal area means**

- A. More fracture potential for amalgam
- B. Less fracture potential for amalgam
- C. Pulpal involvement
- D. Perio involvement
- E. None of the above

**752. The less mercury remaining in condensed amalgam**

- A. The stronger the restoration which contains fewer matrixes alloys and fewer voids
- B. The weaker the restoration is
- C. The more matrixes alloys
- D. The more voids
- E. None of the above

**753. High copper amalgams are superior if**

- A. Copper is available for a secondary reaction
- B. Copper is not available for a secondary reaction
- C. Copper is burnished
- D. Copper is fractured
- E. None of the above

**754. Concerning condensation of restorative gold**

- A. It may vary widely vary widely and has no influence on the final restoration
- B. The degassing procedure is not important
- C. It is the Achilles heel of direct gold restoration
- D. Clinical tech are more important than the physical properties of restorative gold
- E. All of the above

**755. In regards to the enamel surface**

- A. It is a perfect substance for bonding
- B. It does not conform to the bonding requirements
- C. It is the most inorganic, rough part
- D. It is free from contamination and roughness
- E. None of the above

**756. Acid conditioning of enamel and eroded dentine**

- A. Provides an none traumatic, conservative clinical approach to the bonding of restorative material
- B. Is traumatic approach to bonding materials
- C. Is not safe and simple method of bonding
- D. Bonding fails to produce a highly significant retention and good marginal integrity and clinical durability
- E. None of the above

**757. The effectiveness of the acid etch is dependent on which of the following factors**

- A. Material must be used to clean the surface of the tooth prior to etching
- B. The effectiveness of the itchant
- C. The chemical and physical nature of the tooth
- D. The area and surface of the enamel to be itched

**758. Creep in amalgam is the greatest in**

- A. Low copper lathe cut alloy

**759. The surface of enamel rods prisms in permanent teeth is**

- A. Perpendicular to the outer surface of the tooth
- B. Parallel to the outer surface of the tooth
- C. Parallel to enamel contour
- D. Parallel to enamel-dentine contour

**760. All of the following are properties of fluoride except**

- A. Crosses the placental barrier
- B. It deposits rapidly in bone
- C. It is excreted rapidly by kidneys
- D. It is bacteriostatic
- E. It produces extrinsic tooth stain

**761. A patient indicates that he takes methyldopa (Aldomet) he is being probably treated for**

- A. Hypertension

- B. Angina pectoris
- C. Myocardial infection

**762. A patient with history of angina suffers an attack while in the dental chair. Prompt relief can be anticipated in MOST instances from**

- A. Oral administration of short acting barbiturates
- B. Intra muscular administration of morphine sulphate
- C. Subcutaneous administration of epinephrine
- D. Sublingual administration of glyceryl bi-nitrate
- E. Putting the patient in upright position

**763. Proximal caries on x rays appear**

- A. Smaller than clinically seen
- B. Larger than clinically seen
- C. The same

**764. The lamina dura is absent in which condition**

- A. Von Recklinghausen
- B. Paget's
- C. Periapical granuloma

**765. You notice radiolucent area close to the apex of central incisor, on a second x ray the radiolucent area moves; it is likely to be**

- A. Cyst
- B. Abscess
- C. Granuloma
- D. Incisive foramen

**766. Treatment of Osteoradionecrosis is**

- A. Antibiotic coverage
- B. Conservative treatment including antibiotic coverage and resection of jaw segment.
- C. Conservative treatment with sequestrectomy

**767. Widening of perio membrane can be seen in**

- A. Osteosarcoma
- B. Scleroderma

**768. Lamina dura is actually**

- A. Cortical bone

- B. Spongy bone
- C. Immature bone
- D. Cribriform plate perforated by nutrient canally

**769. Bitewing x rays are taken to assist in the detection of caries\*\***

- A. Occlusally
- B. Lingually
- C. Buccally
- D. Gingivally
- E. Interproximally

**770. A periapical x ray of 11 and 12 region shows the vimen, floor of the nasal fossa and the median palatine suture. The other feature that can be seen is**

- A. Maxillary sinus
- B. Incisive foramen
- C. Zygomatic process
- D. Wall of maxillary sinus

**771. At the end of four years, the x rays reveal calcification of**

- A. All deciduous and first permanent molars
- B. All permanent except of 3<sup>rd</sup> molars
- C. All deciduous
- D. All permanent

**772. The diagnosis of ortho cases is by**

- A. Measurement of cranium size
- B. Recording profile
- C. The relation of dentition and the jaw to the cranium
- D. Determination of overbite size
- E. Determination of jaw size

**773. Full mouth x ray survey at birth reveals**

- A. Ten teeth are present
- B. Twenty teeth are present
- C. Twenty four teeth are present
- D. Twelve teeth are present

**774. When adhesive is used with polysulphide impression material**

- A. Should be thin and dry

**775. When a probe penetrates between tooth and amalgam**

- A. not always an indication of caries

**776. Reversible hydrocolloids impression material in comparison to alginate are**

- A. Better for undercuts areas

**777. You can increase the retention of Maryland bridge by**

- A. Incorporate mesh work in wax pattern
- B. Perforation techniques in the metal cast

**778. Maryland bridges are made of**

- A. Nickel chrome

**779. Initiation of curing process in self cure acrylic resin is achieved by\*\***

- A. Benzyl peroxide

**780. The objective of pulp capping is to**

- A. Preserve vitality of coronal pulp
- B. Preserve vitality of entire pulp
- C. Preserve vitality of radicular pulp
- D. Regenerate a degenerated and necrotic pulp
- E. None of the above

**781. The objective of pulpotomy is to**

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- E. None of the above

**782. What contra indicate pulp capping**

- A. Accidental exposure on vital young molars
- B. When inflammation of radicular pulp is already present
- C. When roots are greatly curved and tortuous
- D. When anterior tooth is vital and immature with wide open apices
- E. None of the above

**783. Two successive negative cultures are**

- A. Absolutely necessary for successful endodontic treatment
- B. Not always necessary for successful endodontic treatment
- C. Not questioned today as a dogmatic requirement in endodontics
- D. Unquestioningly it adhered for successful endodontic treatment
- E. None of the above

**784. What indicates for a periapical surgery**

- A. Where performing an endodontic treatment on existing root canal filling may lead to fracture of the root
- B. When root canal treatment is faulty
- C. When there is danger of involving other structures
- D. When the bony defect is so extensive that the edges of the incisors will collapse
- E. None of the above

**785. In regards to external resorption\*\***

- A. Continues after successful endo treatment
- B. Stops in most cases following successful endodontic treatment
- C. Continues only in mandibular incisors after successful endo treatment
- D. Stops in maxillary lateral incisors after successful endodontic treatment
- E. None of the above

**786. The concomitant perio-periapical lesion as the cause of endodontic failure**

- A. Cannot be discovered prior to endo treatment
- B. May be discovered prior to endo treatment
- C. Is most commonly found in maxillary teeth
- D. Is most commonly found in mandibular teeth
- E. None of the above

**787. X rays are used in endodontic treatment to**

- A. Aid in the diagnosis of periapical hard tissue lesion
- B. Determine the number, location, shape, size and direction of roots and root canals
- C. Confirm the length of root canals
- D. Evaluate the adequacy of the complete root canal filling
- E. All of the above

**788. To achieve optimum cavity preparation which of the following factors of internal anatomy must be considered**

- A. Outline form

- B. The age and shape of pulp chamber; in addition to the direction of individual root canals.
- C. Internal external relationship
- D. Intra-coronal preparation
- E. None of the above

**789. Irrigation in root canal treatment, should be undertaken at frequent intervals during instrumentation to\*\***

- A. Removes cementum falling from the canal
- B. Remove noxious material since it may be forced to the apical foramen resulting in periapical infection
- C. Destroy all micro organism in the canal
- D. Stop instruments from going beyond the apical foramen
- E. None of the above

**790. The length of the tooth is established by**

- A. Good undistorted pre-operative x ray
- B. Adequate coronal access to all canals
- C. Adjustable endo millimetre ruler
- D. Definite repeatable plane of reference to anatomical landmark on tooth
- E. All of the above

**791. Which of the following Gold casting alloys are available**

- A. Medium alloy "Type II"
- B. Hard alloy "Type III"
- C. Extra Hard alloy "Type IV"
- D. All of the above

**792. Which of the following varieties should be made in the proximal occlusal cavity preparation in deciduous teeth compared to permanent ones**

- A. The occlusal isthmus should be proportionally wider
- B. The occlusal lingual walls need not to be extended to self cleansing areas
- C. It is not necessary to include fissures in the occlusal outline
- D. The lingual angle should be sharper
- E. The axio pulpal line angle should not be bevelled

**793. 10 years old boy loses permanent mandibular molar; what is affected**

- A. Teeth adjacent to extracted teeth
- B. Teeth on both arches on same side
- C. The remaining teeth in the mouth
- D. Teeth directly opposite to the extracted tooth

E. Teeth on the same quadrant

**794. MOST common consequence arising from premature extraction of deciduous molars is**

- A. Loss of arch length
- B. Loss of speech sound
- C. Loss of facial contour
- D. Loss of vertical height
- E. Loss of free way space

**795. During teeth eruption, the reduced enamel epithelium merges with the oral epithelium and consequently....????**

- A. Down growth of oral epithelium which replaces the reduced enamel epithelium
- B. Proliferation of inner enamel epithelium
- C. Proliferation of outer enamel epithelium
- D. Down growth of oral epithelium which undermines the reduced enamel epithelium
- E. Gradual transformation of the reduced enamel epithelium

**796. Essential for the diagnosis and treatment plan of orthodontics is**

- A. Classifications
- B. X rays
- C. Plaster models

**797. As a general practitioner; you decide at an initial appointment that you can not handle a child due to lack of co-operation. Which of the following approaches would seem to be your alternative**

- A. Refer child to pedodontist
- B. Send child home until he/she has to co-operate
- C. Schedule child for General Anaesthetic session

**798. The most common reason to refer a child to a pedodontist is problem with**

- A. Rampant caries
- B. Behaviour management
- C. Endodontic treatments in primary teeth
- D. Space maintainers

**799. A very quick and wide separation of teeth causes**

- A. Gingival inflammation

- B. Vasodilation
- C. Wider spaces
- D. Necrosis of bone

**800. A patient who has lost several teeth in an otherwise healthy mouth, can get**

- A. TMJ dysfunction
- B. Changes in the vertical dimension
- C. Change in the interocclusal dimension

**801. The final deposition of ameloblast occurs\*\***

- A. Primary enamel cuticle
- B. Secondary enamel cuticle
- C. Acquired enamel cuticle
- D. Cementum

**802. Oral epithelium fused with reduced epithelium to form**

- A. Junctional enamel epithelium

**803. The increase of mandible about year 5 and 6 is mainly at**

- A. Depth
- B. Width
- C. Length

**804. 8 years child has a badly broken deciduous molar what is the best material to restore it**

- A. Amalgam
- B. Gold
- C. Composite
- D. GIC

**805. When tooth is twisted along its long axis; it is called**

- A. Mesio version
- B. Disto version
- C. Lingo version
- D. Torsion

**806. A full x rays is recommended in children by age of\*\***

- A. 2 years- first visit
- B. 2 years for uncooperative kids
- C. 3-5 years

**807. The percentage of malocclusion after early loss of deciduous teeth is**

A. 60%

**808. A tooth is expected to erupt when root development is**

A.  $\frac{3}{4}$  of its full development

**809. Crowding of anterior permanent teeth is directly affected by**

A. Premature loss of deciduous molars

**810. Hawley appliances are used\*\***

A. To close midline diastema

B. Maintain the normal relationship of the adjacent teeth until the canine erupts

**811. Helical spring is used to**

A. Ectopically erupting permanent molars

**812. The function of varnish**

A. To reduce initial marginal leakage "Short-term leakage"

B. To prevent long term leakage

**813. Turner's tooth is\*\***

A. Due to infection of primary tooth

**814. The outcome of rapid wax burn out is**

A. Cracking of the investment

B. Back pressure porosity

**815. The MAIN purpose of burnishing is**

A. To help eliminating excess mercury

B. To condense margins

C. Polishing of filling

**816. What happen to etched composite after settings**

A. Expand

B. Contract

C. Contract and expand

D. Expand and contract

**817. Which of the following muscles elevates the lower lip**

- A. Orbicularis oris

**818. The MOST common cause for midline fracture is**

- A. Impact
- B. Fatigue

**819. The function of face bow is**

- A. Orient maxilla to TMJ

**820. Hypoplasia as seen in x rays\*\***

- A. Thick enamel surface
- B. Thin enamel surface
- C. Sometimes large pulp chamber
- D. Can not be detected on X rays

**821. Function of matrix band**

- A. Substitute for the missing wall so adequate condensation forces can be applied
- B. Permit re-establishment of proper contact lines
- C. Restrict extrusion of amalgam and prevent formation of an "overhang"
- D. Provide adequate physiological contour for the proximal surface
- E. Provide an acceptable surface texture to the proximal surface
- F. All of the above

**822. Which composite is used in load bearing areas\*\***

- A. Hybrid composite

**823. The palatal canal of maxillary molars is found Under**

- A. Disto lingual cusp
- B. Mesio lingual cusp

**824. Obturator in cleft palate plate is maintained by**

- A. Cohesion
- B. Atmospheric pressure
- C. Retention in the defect
- D. Patient support it with the tongue

**825. In a fixed moveable bridge where should the moveable connectors "non rigid" be placed**

- A. Distal to anterior retainers
- B. Mesial to posterior retainers

**826. What do expect after successful pulpectomy in the periapical area**

- A. Apical foramen is closed by cementum calcified tissues

**827. Frenum is consisted of what kind of tissues**

- A. A fold of mucous membrane

**828. What is the minimal labial reduction for porcelain metal crowns**

- A. 1mm
- B. 1.5mm
- C. 0.5mm

**829. What is the function of flux**

- A. To protect alloy from oxidation, and distribute metallic oxides as they are formed

**830. What is TRUE**

- A. Boiling point of acrylic > boiling point of water
- B. Boiling point of acrylic is similar to that of water
- C. Boiling point of acrylic < boiling point of water

**831. Porcelain bonded to metal is strongest**

- A. In compression
- B. In tension

**832. What is the MOST adverse reaction to lignocaine**

- A. Drug interaction with patient's medicines
- B. Injecting into vein
- C. Hypersensitivity
- D. Toxicity

**833. A 29 year old lady presents with mandibular second molar associated with radiolucency of 1 cm diameter and paraesthesia of mental nerve. There is no other symptoms**

- A. Extraction and curettage
- B. Root canal treatment and antibiotics
- C. Blood test, extraction and biopsy

D. Extract and pack with white head's varnish

**834. Periodontitis is a disease that has**

- A. A slow progression
- B. Rapid progression
- C. Cyclic or burst progression "active and inactive phases"
- D. Intermittent progress

**835. In regards to apically displaced flap; which is TRUE**

- A. Does not preserve attached gingivae
- B. Does not lengthen crown of tooth
- C. Is a pocket elimination procedure
- D. A & C

**836. Which is NOT TRUE about occlusal trauma**

- A. Cemental tears
- B. Bone loss
- C. Mobility
- D. True pocket formation
- E. Bleeding in periodontal ligament

**837. Which is the MOST significant clinical feature of periodontal disease\*\***

- A. Bleeding
- B. True pocket formation and apical migration of attached gingiva

**838. Hypodontia can be seen in**

- A. Cleidocranial dysplasia "dysostosis"
- B. Down's syndrome
- C. Papillon le fever syndrome
- D. Rickets

**839. Hyperdontia can be seen in**

- A. Down's syndrome
- B. Cleidocranial dysplasia "dysostosis"

**840. Which of the following does not carry a risk of infection from hepatitis B patient**

- A. HBs Ag antigens
- B. HBs Ag
- C. HBe Ag

**841. Which is the MOST conservative treatment for periodontal disease**

- A. Oral hygiene, sub-gingival debridement, regular review and maintenance
- B. Surgery, sub-gingival debridement, regular review and maintenance
- C. Oral hygiene, sub-gingival debridement

**842. Filter is used in x ray machine to**

- A. Reduce exposure time
- B. Removes low energy x rays

**843. A patient 8 years old has 3 of first premolars erupted with swelling on the ridge of the un-erupted premolar. X ray shows a fully developed crown and  $\frac{3}{4}$  roots development with no other pathology. What is your management**

- A. Remove the dentigerous cyst
- B. Soft tissues resection to allow eruption
- C. Soft tissues resection accompanied with orthodontic appliance to help with eruption

**844. Loss of the first deciduous molar in 10 years old child required**

- A. Band and loop to maintain space
- B. Evaluate the case radiographically and then decide whether space maintainer is needed or not
- C. No treatment

**845. Palatal root displaced into the antrum while extracting; what is your decision to retrieve it**

- A. Through the alveolar
- B. Surgical opening of canine fossa
- C. Nasal antrostomy

**846. Which one of the following is expansile lesion of jaw bone\*\***

- A. Odontogenic keratocyte
- B. Central haemangioma
- C. Radicular cyst
- D. Osteomyelitis

**847. The MOST frequent retained deciduous teeth in permanent dentition are**

- A. Upper lateral incisors
- B. Upper central incisors
- C. Lower central incisors
- D. Second lower molars
- E. Second upper molars

**848. The MOST frequently synthesized substance by *Streptococcus mutans* is**

- A. Liven
- B. Fructose
- C. Glucan
- D. Glycogen

**849. Benzodiazepine and diazepam in 5-10mg oral dose used for oral sedation in dentistry DOES NOT give**

- A. A good analgesic effect if given 1 hour prior to dental sessions
- B. Would be reversed by flumazepil because it is a Benzodiazepam
- C. Post operative headache
- D. There is a profound amnesic action and no side affects

**850. Formcresol fixation is used in deciduous dentition in**

- A. Necrotic pulp
- B. Carious exposure
- C. Mechanical exposure
- D. Periapical disease

**851. After you have successfully treated an Angle's Class II division I malocclusion. The ideal Class I incisor relationship has been produced and 14, 24 were extracted. The arches are now well aligned. What molar occlusion will there be at the end of treatment when all spaces are closed**

- A. Full unit Class II
- B. ½ unit class II
- C. Class I
- D. ½ unit Class III
- E. Full unit Class III

**852. The tensile nodes are located at**

- A. The mandible angle
- B. The jugular-digastric interaction
- C. Mylohyoideus intersection
- D. Internal carotid level

**853. Herpangina is the MOST reliable diagnosis is by\*\***

- A. Immunofluorescence
- B. Microscopy
- C. Serology

**854. Metallic Plato backing the intra oral films are for\*\***

- A. Reduces the flexibility of films
- B. Reduces patient exposure to x rays
- C. Increases the bending capacity of films

**855. The fixing time for dental x ray should be**

- A. 5 minutes at 20°C
- B. At least 10 minutes
- C. Until it clears up
- D. 2 minutes at 40°C

**856. The developing time for dental x ray should be**

- A. 5 minutes at 20°C
- B. At least 10 minutes
- C. Until it clears up
- D. 2 minutes at 40°C

**857. What is the range of the visible light cure beam**

- A. 100-120 nm
- B. 200-300 nm
- C. 400-430 nm
- D. 470 nm or 450-500 nm

**858. When is LEAST required gingival groove**

- A. When restoring with GIC for abrasion
- B. When restoring with GIC for root caries
- C. When restoring with GIC base and composite lamination
- D. When restoring with amalgam

**859. Corrosion and discolouration of amalgam restorations is usually caused by**

- A. Sulphur oxides
- B. Oxygen
- C. Chlorides
- D. Over trituration

**860. When you find ditching in an amalgam filing you would**

- A. Replace the defective filing
- B. Repair defect with unfilled resins

**861. What is the reason that pulp calcified after trauma**

- A. The intensity of the blow was too low to cause pulp death

**862. Which is TRUE in regards to the preparation of occlusal rests**

- A. Use an inverted cone bur
- B. Use a flat fissure bur
- C. Parallel to occlusal plane
- D. At right angle to the long axis of tooth
- E. None of the above

**863. Patient presents with fever of 39°C, pain, swelling of upper lip and nose. Radiograph shows an enlargement of periodontal ligament space of 11 which has a large restoration without a base. What would your treatment be**

- A. Recision and antibiotic
- B. Antibiotic, analgesic followed by root canal treatment after remission of acute phase.
- C. Complete debridement of root canal, analgesic and antibiotic
- D. Remove restoration, apply a sedative dressing with corticosteroids

**864. Cervical finish line of full veneer crown preparation should be placed**

- A. Just supragingival whenever is possible
- B. According to the depth of gingival crevice
- C. Subgingival to reduce ability of recurrent caries
- D. At the junction of tooth and amalgam core

**865. Why do we etch enamel for composite restorations**

- A. To increase surface area
- B. To decrease surface area
- C. Does not really change the surface area
- D. Increase the chemical bonding capability
- E. Decrease the chemical bonding capability

**866. All of the following are requirements of mucoperiosteal flap except of**

- A. Base is wider than free margin
- B. Mucous membrane carefully separated from periosteum

- C. Base has an adequate blood supply
- D. Flap wider than bony defect that will be present at conclusion of operation
- E. Mucoperiosteum is carefully separated from bone

**867. Which of the following will NOT be used in determination of vertical dimension**

- A. Aesthetic
- B. Phonetics
- C. Gothic arch tracing
- D. Swallowing

**868. Zinc oxide impression material**

- A. May cause irritation to mucosa
- B. Is a thermoplastic material

**869. The adhering of tissues on the surgical electrode usually means**

- A. Current intensity is too high
- B. Current intensity is too low
- C. Dispersion plate not applied to patient
- D. None of the above

**870. How do remove the smear layer in root canal treatment**

- A. Use of 0.5% hypochlorite sodium
- B. Hedstrom file
- C. EDTA

**871. Why do you over pack amalgam**

- A. To ensure excess mercury reaches the surface

**872. A lateral incisor labial to the arch needs to be restored in normal alignment with PFM retraction. How will the tooth appear**

- A. Too wide
- B. Too short
- C. Too narrow
- D. Too long

**873. Which of the following is more prone to crack**

- A. Buccal of lower molars
- B. Lingual of lower molars

- C. Lingual of upper molars
- D. Buccal of upper molars

**874. Flexibility of the retentive clasp arm depends on**

- A. Length
- B. Cross section
- C. Material
- D. Degree of taper
- E. All of the above

**875. In vital pulp therapy; what is the optimum depth for a pin hole in a tooth**

- A. 4-5mm
- B. Approximately 2mm
- C. Less than 2mm
- D. 1-1.5mm

**876. Proximal cavosurface walls in Class II preparation for the reception of an amalgam. Should be finished at which angle to external surface**

- A. Acute angle
- B. Right angle
- C. Obtuse angle
- D. 45 angle

**877. Why are three tripod marked on a cast being surveyed**

- A. To orient cast to articulator
- B. To orient cast to surveyor
- C. To provide guide planes

**878. An irregular shaped void on surface of a gold cast would indicate that**

- A. A fragment of investment had been carried into the mould
- B. Air carried into mould
- C. Burning out of wax was inadequate
- D. The powder/water ratio for the investment was too high

**879. The MAJOR disadvantage of Gutta Percha is**

- A. Soluble in chloroform
- B. Too weak for narrow canals

**880. What effect do fissure sealants have on caries progression**

- A. Reduces new caries and hamper the progress of freshly established caries
- B. Reduces new caries and hamper the progress of existing caries

**881. In regards to connectors on dentures; which of the following is correct**

- A. Major connector should be rigid as possible
- B. Minor connector should engage undercuts

**882. What control tooth or teeth should be used when testing a suspected pulpally involved tooth**

- A. Adjacent tooth and contralateral teeth
- B. Contralateral and opposing teeth
- C. Opposing and adjacent teeth
- D. Test only suspected tooth/teeth
- E. All of the above

**883. What is CORRECT in regards to periodontal surface area in mandibular teeth**

- A. First molar > first premolar > second premolar
- B. Canine > first premolar > second premolar
- C. Canine > lateral incisor > central incisor

**884. Cast crown fits on die but not on tooth; discrepancy is about 0.3mm what would you do**

- A. Relieve cast from the inside
- B. Take a new impression and make new crown
- C. Burnish margins
- D. Use thick mix of cement

**885. In regards to marginal leakage in amalgam**

- A. The wider the gap the better the chance of secondary caries
- B. Seal the margin with fissure sealant would prevent further breakdown
- C. Secondary caries may develop

**886. Pit and fissure caries start at**

- A. bottom of the fissure
- B. walls of the fissure

**887. What interferes with maxillary denture in posterior vestibular fold**

- A. Coronoid process
- B. Condyle
- C. Masseter muscle

**888. In regards to shade; Chroma is**

- A. Brightness
- B. Saturation of hue
- C. Value

**889. Acrylic self-cure special trays; how long should have been made prior taking impression**

- A. 12 hrs
- B. Immediately after fabricating it
- C. After been left in water for an hour
- D. Wait for an hour before pouring

**890. The MAIN CAUSE of gingivitis in partial dentures patients is**

- A. Placement of dentures
- B. Plaque accumulation

**891. Movable component of the non-rigid connector in a fixed bridge is placed. Which of the following is TRUE**

- A. Should be placed on the longer retainer
- B. Mesial drift causes unseating of the distally placed connector

**892. When lateral incisor is lost; patient has Class II Division II type with deep bite. Which of the following is contra indicated**

- A. Fixed bridge with canine and central incisor as abutment
- B. Non-rigid connector with central incisor as abutment

**893. Which is the neutral zone**

- A. The zone where displacing forces are neutral
- B. The zone where buccal and lingual forces are balanced

**894. What is the Bilaminar Zone**

- A. Formed of, or having, two laminae, or thin plates. Which is the distal attachment of superior hard lateral plate

**895. Which of the following DOES NOT cause depression of the mandible**

- A. Contraction of lateral pterygoid
- B. Contraction of temporalis
- C. Contraction of the suprahyoid muscles
- D. Contraction of the infrahyoid muscles
- E. Relaxation of all muscles so that the only forces on the mandible are the forces against the gravity

**896. Which of the following is the MOST appropriate related to hardness**

- A. Tungsten carbide>Porcelain>Human enamel>acrylic
- B. Porcelain>Enamel>Tungsten carbide>amalgam>acrylic
- C. Porcelain>Enamel>Tungsten Carbide>Amalgam>Acrylic

**897. How much would you reduce a cusp to be replaced with amalgam onlay**

- A. 2 mm to achieve a good retention form
- B. 2mm to achieve a good resistance form
- C. 1mm

**898. How long it would take to notice significant reduction in radiolucency after finishing a root filing for a tooth with a periapical lesion**

- A. 6 months
- B. 1 month
- C. 3 months

**899. The major cause of mentalis muscle hyperactivity is**

- A. Class II Division I
- B. Tongue thrust

**900. When treating a tooth with a non-vital pulp with a fistula presented; fistula should be treated by**

- A. Surgical incision
- B. Antibiotic coverage
- C. The usual root canal procedures for non-vital teeth and no special procedures for fistula

**901. To increase the setting time of phosphate cements you would**

- A. Use a cold glass slab

**902. 27 years old female; shows sudden oedematous rash and collapses after an injection of barbiturates. Your management is**

A. I.M. 0.5ml of 1:1000 adrenaline with oxygen administration

**903. Which of the following procedures will not achieve sterilization**

- A. Hot air at 160°C "320°F" for 90mins
- B. Boiling water at 100°C "210°F" for 2 hours
- C. Autoclave at 121°C "250°F" under 15psi for 20 mins
- D. Dry heat at 177°C "350°F" for 60mins
- E. All of the above will achieve sterilisation

**904. 50 years old man presented after a full mouth extraction complaining that he "bled all night". Which of the following pre existing conditions could be responsible for the post operative bleeding**

- A. Blood pressure reading of 180/110
- B. Gastric ulcer
- C. Elevated prothrombin time
- D. A & D are correct
- E. None of the above

**905. Long bone growth by**

- A. Mitosis in osteoblast
- B. Mitosis of osteoblast
- C. Appositional growth in cartilage epiphysis
- D. Interstitial growth in cartilage epiphysis

**906. What is TRUE in regards to oral lesions of reticular lichen planus**

- A. Never accompanied with skin lesions
- B. Always accompanied with skin lesions
- C. Lesions may present anywhere
- D. Lesions may present on legs
- E. Lesions may present on arms

**907. Bone graft method that has shown the greatest osteogenetic potential is**

- A. Lymphocytic bone graft
- B. Freeze-dried bone graft
- C. Heltozygo?? Marrow graft
- D. Cortical bone graft

E. Cancellous bone graft

**908. A patient states that for ALMOST a year now, she has had a rubbery, firm, painless nodule within the substance of parotid gland. This MOST likely is**

- A. Mucocele
- B. Lymph node
- C. Benign mixed tumour
- D. Squamous cell carcinoma
- E. Sialolith with encapsulations

**909. The best method to radiate a specific area of the head is**

- A. Use lead collimator

**910. The best reading on radiograph to diagnose ankylosis in deciduous molar is**

- A. Density of lamina dura

**911. Which is NOT CHARACTERISTIC of dentinogenesis imperfecta**

- A. Dentinal tubules are more than usual

**912. Child with less than normal number of teeth, mandibular lateral incisor is larger than usual; on x rays it shows with two roots and two roots canals; your diagnosis is\*\***

- A. Dilaceration
- B. Gemination
- C. Fusion
- D. Concrecence
- E. Taurodontism

**913. The MOST stable area to evaluate the craniofacial growth is**

- A. Nasal floor
- B. Cranial vault
- C. Occlusal plane
- D. Naso maxillary complex
- E. Anterior cranial base

**914. 7 years child with Class I malocclusion, slight version of maxillary Class I; adequate arch length. What is your management**

- A. Oral screen
- B. Head cap therapy

- C. Inclined plane on mandibular anterior teeth
- D. Hawley plate
- E. Expansion screw plate

**915. Tongue thrust with tongue to lip swallow is seen in**

- A. Incompetent lips

**916. Clinical indications of pathogenic chronic periodontitis**

- A. Mobility
- B. Dull pain on closing
- C. Presence of true pocket
- D. Apical migration of gingival epithelium
- E. Presence of subgingival calculus
- F. C, D & E

**917. To prevent exposure of a ?????? on a permanent root; the dentist BEST approach for elevating flap is to use**

- A. Double flap
- B. Stripping procedure
- C. Full thickness flap
- D. Apically positioned flap
- E. Split thickness flap

**918. What is TRUE in regards to primary occlusal trauma**

- A. Mobility caused by excessive forces on normal periodontal ligament

**919. In advance periodontitis with marked mobility; teeth should be splinted**

- A. To improve comfort and function

**920. Examination reveals area of gingival recession, exposed wide area of dental roots. Which is the procedure of choice to obtain coverage of the root surface**

- A. Free gingival autograft
- B. Sub-epithelial tissue graft
- C. Apically positioned graft
- D. Free gingival graft
- E. Modified wide flap

**921. What does contra indicate distal wedge in molars' area**

- A. Distal fluting
- B. Long attached gingiva

- C. Sharply ascending ramus that limits space distal to molars
- D. Supra bony pockets distal to molars

**922. Which of the following is not a property of Fluoride ion**

- A. Crosses placental barrier
- B. Deposits in bone
- C. Excretes rapidly by kidney
- D. Bacteria static
- E. Produces extrinsic tooth stain

**923. Two conditions of enamel facilitate post eruptive uptake of fluoride element**

- A. Hyper mineralisation and surface dentine
- B. Surface demineralisation and hypo mineralisation
- C. Dental fluorosis and enamel opacities

**924. In regards to topically applied fluoride**

- A. Effective in incorporated into dental plaque
- B. Inhibits acid demineralisation of enamel

**925. Flexibility of the retentive clasp arm Does not relate to**

- A. Length
- B. Cross section
- C. Material
- D. Degree of taper
- E. Under cut area

**926. Protrusive movement in wax**

- A. Can not be perforated

**927. LEAST use of blood count**

- A. Infectious mononuclears

**928. The FIRST advantage of using 100000 rpm and over rotors is**

- A. Less vibration on patient

**929. How long it would take to see the dentinal bridge after direct pulp capping by using Calcium hydroxide\*\***

- A. 6-8 weeks
- B. 4 weeks

- C. 6-8 months
- D. 4 months

**930. The OPTIMUM crown to root ratio for abutment tooth is\*\***

- A. 2:3
- B. 1:1

**931. What does contraindicate bridge works**

- A. Long edentulous span which will lead to damage of abutments

**932. Elasticity of impression material will lead to ideally**

- A. Prevents distortion when impression is removed out of the mouth

**933. Patient has been coming to your clinic for several times complaining about soreness under the denture; what would you do**

- A. Check occlusion of lower buccal cusps

**934. What is the difference between arcon and non arcon articulator**

- A. In arcon the condylar element is in the lower compartment

**935. Purplish lesions on the buccal mucosa that have been there since birth; the diagnosis is**

- A. Haemangioma

**936. Elevators are not used in**

- A. Dividing third lower molars roots

**937. What is contraindicated to the use of calcium hydroxide for pulp capping**

- A. Accidental exposure of pulp
- B. Carious exposure of pulp in otherwise asymptomatic tooth
- C. Carious exposure of pulp in tooth that has been painful for weeks

**938. How would you treat hyperaemia "hyperaemic tooth"\*\*\***

- A. Zinc Oxide and eugenol cement
- B. Calcium hydroxide
- C. Corticosteroid paste

**939. Patient comes to you complaining of pain in a tooth, the tooth is filled with composite long time ago; what would you do**

A. X ray, remove filling and restore with temporarily filling

**940. Use of inhalation general anaesthesia**

A. Halothane should not be less than 5%

B. Oxygen must not be less than 30%

**941. Bilateral symmetrical swelling of the mandible of a child is likely to be caused by**

A. Acromegaly

B. Paget's disease

C. Giant cell lesion

D. Primordial cysts

E. Dental cysts

**942. For fissure and sealant treatment to be a part of the primarily retentive care**

A. Place sealant on teeth which are at high risk of caries

B. Place sealant on newly erupted teeth

**943. Periodontal pocket is measured between**

A. CEJ to base of pocket

B. Top of the gingiva to the base

**944. When you apply a pressure of 0.25N to measure pocket depth**

A. 4 mm indicates periodontitis

**945. Which of the following elements is not found in normal periodontal membrane**

A. Fibroblast

B. Epithelial cells

C. Erythrocytes

D. Vest cells of malaise

E. Inflammatory plasma cells and lymphocytes

**946. Which of the following situations make periodontal disease more sever**

A. Enough proximal surface

B. Too wide bucco lingual embrasure

C. Missing proximal contacts

**947. The auxiliary occlusal rest on tooth for partial denture should be placed**

- A. Away from edentulous space
- B. Adjacent to edentulous space
- C. Near fulcrum line
- D. Away from fulcrum line

**948. A vital tooth has a crown cemented to a pin retained amalgam cored; where does failure occur**

- A. Between crown and cement
- B. Between core and cement
- C. In the crown and the root
- D. In the core and the margin preparation

**949. Which is NOT a result of toxic dosage of local anaesthetic**

- A. Angioneurotic oedema
- B. Hypotension
- C. Respiratory depression
- D. Hypertension

**950. Swallowing will aid in the diagnosis of**

- A. Branchial cyst
- B. Thyroglossal duct cyst
- C. Ranula
- D. Retention cyst
- E. Globulomaxillary cyst

**951. What is not true about tobacco smoking**

- A. Redox potential favours growth of anaerobic bacteria
- B. It is caries immuno-suppressive
- C. It is adrenergic
- D. Affects neutrophils and chemotactic factors

**952. On X ray you found the Gutta Percha cone extending 1mm beyond the apex without any symptoms; what would you do**

- A. Remove restoration material until you are able to withdraw the Gutta Percha cone
- B. Apicectomy
- C. Leave as is until any complications occur

**953. On X ray you found the cement of previous root canal treatment is extending 1mm beyond the apex without any symptoms; what would you do**

- A. Remove restoration material and retreat
- B. Apicectomy
- C. Leave as is until any complications occur

**954. What is the main purpose of using corticosteroids in pulpal obturation material**

- A. For their antibiotic action
- B. For their antiinflammatory action
- C. To relief pulp pressure

**955. What nerve supplies upper first molars**

- A. Posterior and mid superior alveolar nerve:

**956. The roughest surface on cut tooth structure**

- A. Cross cut fissures at ultra speed

**957. The main of damaged gingival tissues after placing rubber dam is**

- A. The distance between holes is big
- B. The distance between holes is small
- C. The punctured holes are too big in size
- D. Not using lubricant when placing rubber dams

**958. The advantage of using the lingual plate on lingual bar is**

- A. It acts as indirect retention

**959. Retention in precision attachment is achieved by**

- A. Frictional resistance

**960. How much under cut area a clasp arm should engage\*\***

- A. As much under the undercut as possible
- B. Anywhere beyond the survey line
- C. A predetermined amount of undercut

**961. What is characteristic of fibrotic gingivitis**

- A. Is phenytoin induced gingivitis and only seen on intra lateral papilla
- B. Can only be treated surgically

**962. Bone is characterised by\*\***

- A. Haversian canal around bony canals
- B. Irregularly arrayed tabullae??

**963. Why we do not use porcelain in long span bridge works**

- A. Because of the high casting shrinkage of porcelain

**964. You have patient with Class II division 2; which of the following is contraindicated**

- A. Cantilever bridge
- B. Maryland bridge

**965. How will cover buccal bicuspid for lower premolar when making a metallic porcelain crown**

- A. Cover the occlusal and buccal cuspid by porcelain
- B. Cover just buccal cuspid by porcelain

**966. What is the main cause of bilateral cheilosis**

- A. Short vertical dimension
- B. Vitamin B deficiency

**967. What sort of alloys do you use for bridges**

- A. Ductile
- B. Hard
- C. High sensitivity

**968. What sort of material do you use for the fabrication of Maryland bridges**

- A. Single phase materials
- B. Multi phase materials
- C. Extra hard
- D. The same as bonding martial

**969. When the neck of the condyle is fractured; what muscles determine the movement of the superior segment**

- A. Lateral pterygoid
- B. Medial pterygoid
- C. Temporalis
- D. Mylohyoid

**970. Patient with prosthetic heart valves, with INR value of 3.0; requires surgery, what is the your management**

- A. Give Amoxicillin or Vancomycin and suture carefully
- B. Stop warfarin, start heparin, carefully suture and give Amoxicillin or Vancomycin
- C. Stop warfarin, carefully suture and give Amoxicillin or Vancomycin

**971. Chronic oral antral fistula for some time after the extraction of maxillary first molar. What is your management**

- A. Surgical closure
- B. Anti-biotic and nasal decongestant
- C. Wash the antrum

**972. Pigmented naevus can undergo malignant**

- A. Always
- B. Never
- C. 10 to 15%

**973. The MOST common sites for squamous carcinoma in the oral cavity are\*\***

- A. Palate and gingivae
- B. Tongue and floor of the mouth
- C. Tongue and palate

**974. A patient has painful lesions on her buccal mucosa. Biopsy report shows acantholysis and supra basillare; your diagnosis is**

- A. Pemphigus vulgaris
- B. Bulla lichen planus
- C. Erythema multiform
- D. Systemic lupus erythematosus

**975. Oral mucosal pigmentation; what is TRUE**

- A. Commonly seen in ethnic groups
- B. Commonly an amalgam tattoo
- C. Commonly oral melanoma
- D. Commonly melanotic naevus

**976. What I TRUE in regards to osteogenesis imperfecta**

- A. Manifests with blue sclera
- B. May be associated with deafness
- C. Sex linked disorder of bones that develop in cartilage

**977. Increase which of the following will decrease density of radiograph**

- A. Milliampere
- B. Time
- C. KvP Kilovoltage
- D. Object-film distance
- E. Focal spot-object distance

**978. Which of the following will increase sharpness**

- A. Larger focal spot
- B. Smaller focal spot
- C. Increase object-film distance

**979. The MOST common staphylococcal infections is**

- A. A localised purulent infection of the skin
- B. Diffuse purulent infection of the skin
- C. Staphylococcal osteomyelitis
- D. Impetigo

**980. What is TRUE in regards to Basal Cell Carcinoma**

- A. Metastases is common
- B. Erodes bone
- C. More common in oriental races
- D. Cannot occur in oral mucosa according to definition

**981. In severe periodontitis; probe**

- A. Get stopped by calculus
- B. Goes beyond connective tissues of junctional epithelium
- C. Touches coronal end of junctional epithelium
- D. Touches the middle of junctional epithelium
- E. Touches sulcular epithelium

**982. Characteristic of mucogingival involvement**

- A. A pocket of more than 4 mm depth
- B. Only 1mm of attached gingiva remains
- C. Pocket extends to the mucogingival junction

**983. The role of Guided Tissue Regeneration G.T.R. is**

- A. Prevents apical migration of junctional epithelium
- B. Allow the growth of connective tissue in contact with surface
- C. Prevent apical migration of junctional epithelium

**984. The critical plaque PH is**

- A. 6
- B. 5.5
- C. 4
- D. 4.5

**985. When it is acceptable for patient to hold radiographic film packet in the patient's mouth**

- A. Patient is very young and can not understand direction
- B. Patient is physically handicapped and unable to hold the film
- C. Film should never be held by the dentist
- D. There is a lack of time and radiograph is essential

**986. Common cause of poor diagnosis in avulsion Replantation**

- A. External resorptive defects

**987. Posterior vital molar with core the best material to restore it is**

- A. Amalgam

**988. The function of incisor pin of an articulator**

- A. Horizontal and vertical overlap

**989. Which of the following is important consideration when deciding whether to design an upper partial denture without anterior flang**

- A. The amount of labial alveolar bone resorption

**990. Zinc Oxide and eugenol impression paste**

- A. Can not be used in areas with undercuts

**991. When restoring with composite resins, why do we do the cavo surface beveling**

- A. Aesthetic

**992. In regards to denture stomatitis**

- A. Due to over growth of some normal commensal of oral cavity

**993. The MOST unfavourable root fracture**

- A. Cervical third

**994. The GREATEST reliable finding to confirm a necrotic pulp is**

A. Area of radiolucency surrounding the apex of tooth

**995. When preparing Class II cavity, you notice a hard dark brown spot on the adjacent tooth just below the contact point; MOST LIKELY it is**

A. Demineralised enamel

**996. When opening the mouth; in TMJ area**

A. Initial rotation followed by translation of condyle

**997. In cavity preparation 1mm below DEJ what is seen**

- A. More dentinal tubules, some intertubular and peritubular
- B. Some dentinal tubules, more intertubular and less peritubular
- C. More peritubular, some intertubular and dentinal tubular
- D. Equal amount of dentinal tubules, intertubular and peritubular

**998. Pulp with multiple microabscesses will cause eventually**

A. Necrosis

**999. Endodontic therapy completed on tooth with periapical radiolucency. Marked reduction in size of radiolucency is expected in approximately**

A. One year

**1000. Well constructed complete denture**

- A. Needs little maintenance
- B. Less than a week for adjustment and total success
- C. Adverse effects and decrease taste sensations

**1001. To prevent cervical resorption defects following bleaching**

A. Remove Gutta Percha at least 2mm below CEJ or above the crest of alveolar bone and isolate

**1002. Which muscle acts on the disto lingual contour of lower denture**

- A. Mentalis
- B. Masseter
- C. Mylohyoid
- D. Buccinator

**1003. The MOST common curvature of palatal root of maxillary first molar is**

- A. Distal
- B. Mesial
- C. Buccal
- D. Palatal

**1004. The reason that endodontically treated teeth are weak is**

- A. Loss of blood supply
- B. Loss of coronal tissues

**1005. 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

**1006. On examination of composite restoration you find a dark attain**

- A. Replace the composite
- B. Repair with unfilled resin
- C. Apply topical fluoride at the margin

**1007. Occasional sensitivity in a shallow class I amalgam restoration after two days would be managed by**

- A. Replace old filling immediately
- B. Oxide Zinc and eugenol
- C. Using thicker mix of cements
- D. Tell patient the discomfort will disappear after 4 to 6 weeks
- E. Ledermix

**1008. Pulp capping in mature tooth may be followed by\*\***

- A. Pulpalgia
- B. Internal resorption
- C. Hypercalcification within root canals
- D. All of the above

**1009. The MOST common occurrence after direct pulp capping is**

- A. Signs of reversible pulpitis

**1010. When should not contaminate metallic framework during fabrication of porcelain fused to metal crown**

- A. Between bisque stage and glazing stage
- B. Between preheat and opaque stages
- C. Between opaque and bisque stages
- D. Between one opaque and two opaque stages

**1011. "Pop off" of a porcelain veneer from under the lying gold crown is due to\*\***

- A. Too thick application of pure gold surface conditioner
- B. Contamination at the porcelain metal interface
- C. Under firing the opaque layer
- D. All of the above

**1012. Attrition in elderly, why do teeth maintain contact**

- A. Building bone around the fundus of alveolar bone and deposition of cementum
- B. Increased interocclusal distance
- C. Formation of dentine

**1013. The MOST likely factor contributes to tooth eruption is\*\***

- A. The growing root
- B. Bone growth
- C. Vascular pressure
- D. The developing periodontal ligament

**1014. Initial condylar guidance of 25 degree was wrong is changed to 45 degree. What changes will you make to achieve balanced occlusion**

- A. Decrease incisal guidance
- B. Reduce cusps height
- C. Increase compensate curve

**1015. Good oral hygiene and fluoridation is LEAST useful in preventing caries of**

- A. Pit and fissure
- B. Smooth surface
- C. Inaccessible area

**1016. Patient complains of sensitivity; on examination you found a composite restoring a good cavity preparation without any secondary caries; what is your next step**

- A. Extirpate the pulp that is obviously inflamed
- B. Place ZOE dressing to sedate the pulp
- C. Ask patient to come back in six months
- D. Repeat restoration

**1017. What is the shape of occlusal rest**

- A. Spoon shape with rounded margin

**1018. Regeneration periodontal surgery**

- A. Regeneration of cementum
- B. Long junctional epithelium

**1019. What is NOT TRUE about gingivitis**

- A. Mobility

**1020. Why is the frequency of carbohydrates intake more important quantity**

- A. Low number of streptococcus mutans
- B. Hetero formation is better at low sugar concentration
- C. Homo formation is better at high sugar intake
- D. Restricted diffusion of acid through plaque

**1021. Gingivitis is not caused by**

- A. Diabetes
- B. Viral infection

**1022. The elimination half life of Diazepam is in the range of**

- A. 2-5 hours
- B. 5-12 hours
- C. 12-30 hours
- D. 30-48 hours
- E. 48-96 hours

**1023. Myxoedema occurs due to\*\***

- A. Hypersecretion of the thyroid
- B. Hypersecretion of the adrenal
- C. Hyposecretion of thyroid-hypothyroidism

D. Hyposecretion of the adrenal

**1024. Ulcers, necrosis and plasma cells at the basal membrane with atrophic thin areas, reduced rete pegs will be diagnosed as**

A. Desquamative gingivitis

**1025. Which of the following is seen in benign mucosal membrane pemphigoid\*\***

- A. Tzanck cells
- B. Intraepithelial vesicles
- C. Histopathology like aphthous ulcer
- D. Scarring of the conjunctiva

**1026. In syphilis**

- A. Primary lesion is not contagious
- B. Oral lesions are not seen in less than 1%
- C. Spirochetes disseminate in 24 hours

**1027. Which of the following is TRUE about syphilis**

- A. The spirochetes disseminate rapidly throughout the body within 24hour after contact
- B. Both the primary chancre and the secondary mucous patch stages of the disease are highly infectious
- C. Only the lesions of the primary and secondary stages are contagious
- D. All of the above

**1028. Which of the following is not true about warfarin**

- A. INR of 3 is enough to start any extraction
- B. Affects extrinsic system and increases prothrombin time
- C. Heparin can be given subcutaneously and acts rapidly
- D. It takes at least 12 hours for Vitamin K to reverse the effects of coumarin

**1029. Staphylococcus aureus can cause which of the following infection**

- A. Thyroiditis
- B. Pancreatitis
- C. Osteomyelitis
- D. Scarletina
- E. Pneumonia

**1030. A 10 year old child presents with crowding of the dentition and desires correction. What your next step would be**

- A. Perform mixed dentition analysis
- B. Extract the deciduous teeth
- C. Ask the patient to come after the deciduous teeth fall off and complete permanent dentition erupts
- D. Apply a fixed appliances
- E. Review in yearly intervals

**1031. In regards to paracetamol**

- A. Liver damage in mild overdose

**1032. In regards to periapical lesions, what is TRUE**

- A. Are predominantly anaerobic
- B. Must be treated by antibiotics
- C. Must always treated by surgery
- D. Change fro aerobic into anaerobic

**1033. Patient with weak pulse, moist skin and dyspnoea; what is the first thing to do**

- A. Maintain airway and place in supine position
- B. Give insulin injection
- C. Administer oxygen
- D. Inject adrenaline

**1034. Single retroclined upper incisor in 9 years old, space is sufficient. What is your management**

- A. Anterior inclined plane on mandibular teeth
- B. Bite plane
- C. Expansion screw
- D. Hawley appliance

**1035. The angle of blade for closed curettage is\*\***

- A. Less than 35 degree
- B. Less than 45 degree
- C. Less than 90 degree
- D. Less than 100 degree

**1036. In which of the following conditions vesicles/bullae are never seen prior to ulceration**

- A. HSV 1
- B. Aphthous ulcer

C. Pemphigus

**1037. Patient complains of finger-like growth on the lateral aspect of the tongue. The lesion is painless and of normal colour. The MOST PROBABLE diagnosis is**

- A. Folate papillae
- B. Filiform papillae
- C. Neurofibroma
- D. Papilloma

**1038. Thiamine is useful in**

- A. Collagen synthesis
- B. Clotting factor production
- C. Epithelial integrity
- D. Cellular energy production

**1039. Topical fluorides are MOST beneficial when**

- A. Directly applied on decalcified enamel
- B. Applied after eruption

**1040. Child presented to you with sore throat, fever and joint swelling; the MOST probable diagnosis is**

- A. Rheumatic fever
- B. Rheumatic arthritis
- C. Osteoarthritis

**1041. End product of amino acids metabolism is**

- A. Urea
- B. Uric acid
- C. Allantoin

**1042. Patient shows a lesion on the tongue adjacent to sharp tooth. You "rounded off" the sharp area and recall patient after one month to see the lesion turning smaller in size. What your next step would be**

- A. Keep observing
- B. Perform an excision biopsy
- C. Prescribe Kenalog and Orabase

**1043. On HIV patient which of the following IS NOT RECOGNISED**

- A. Squamous cell carcinoma
- B. HIV gingivitis

- C. Osteosarcoma
- D. External lymphoma
- E. Kaposi sarcoma

**1044. The MOST primary treatment of ANUG in HIV patient is**

- A. Prescribe antibiotics
- B. Debridement and antimicrobial rinses
- C. Gingivoplasty
- D. Flap surgery

**1045. A patient on dicoumarol treatment needs extraction. Which of the following is MOST valuable in evaluating surgical risks**

- A. Clotting time
- B. Bleeding time
- C. Prothrombin time
- D. Sedimentation rate
- E. Complete blood cell count

**1046. Infection with new bone formation is**

- A. Garr's osteomyelitis
- B. Condensing osteitis
- C. Torus

**1047. You want to place a post on an endodontically treated tooth which has a good silver point "Ag point"; there is no evidence of failure of the previous root filing. What would you do**

- A. Remove and replace the Ag point with Gutta Percha before the post preparation.

**1048. The placement of metal stops at a location remote to direct retainers to increase retention is termed**

- A. Indirect retainers

**1049. The hamular notch is important in full dentures construction because it aids in the setting position of the artificial teeth**

- A. First statement is true, but the reason given is false

**1050. When setting up teeth for complete dentures having bilateral balanced occlusion, separation of posterior teeth during protrusion is done by**

- A. Increasing the anterior posterior occlusal curve

B. Decreasing the angle orientation of the occlusal plane

**1051. When patient bites in protrusion you notice that posterior teeth do not meet, what would you do to solve this**

- A. Increase the compensatory curve
- B. Decrease the angle of the occlusal plane

**1052. The MOST common reason for full denture failure**

- A. Inadequate interocclusal clearance

**1053. A complaint of burning tongue in an elderly female would be a result of**

- A. A systemic allergy
- B. Allergy because of denture
- C. Psychogenic

**1054. In posterior crossbite situation which are the supporting cusps**

- A. Upper buccal and lower lingual cusps

**1055. The bilaminar zone in reference to TMJ refers to**

- A. The upper and lower joint spaces
- B. The distal attachments of the lateral pterygoid to the condyle

**1056. What is the MOST COMMON configuration of the mesial buccal canal of upper first molar\*\***

- A. Two canals and one foramina

**1057. What does "SYNERESIS" in prosthodontics mean**

- A. Loss of water and contraction

**1058. Why would you invest the wax pattern as soon as possible in an indirect inlay fabrication**

- A. Minimise distortion
- B. Avoid contraction
- C. Avoid expansion

**1059. Upon palpation which of the following areas would be found to have overlying mucosa**

- I. Midline of the palate

- II. Mylohyoid ridge
- III. Mental foramen
- IV. Incisive foramen
- V. Tori

- A. I and II
- B. I, II, III
- C. I, II, V
- D. None of the above
- E. All of the above.

**1060. Why do people with cleft palate/lip have speech difficulties**

- A. Difficulties in keeping the intraoral pressure.