Database of questions for the Medical-Dental Final Examination (LDEK)

Part 2

Periodontology

Modified 18.12.2023

| 1. | Drug-induced gingival hyperplasia occurs usually 3 months post starting of |
|----|---|
| | pharmacotherapy with following drugs: |
| 1) | phenytoin; |
| 2) | paracetamol; |
| 3) | amlozek; |
| 4) | cyclosporine A; |
| 5) | accupro. |
| Ćc | orrect answer is: |
| A. | 3,5. B. 1,2,3. C. 1,3,4. D. 4,5. E. 1,2,5. |
| | |
| 2. | Biologic gingival width is the part of gingiva located above the alveolar process |
| | and consisting in: |
| A. | desmosomal and epithelial attachment. |
| В. | connective tissue and epithelial attachment. |
| C. | epithelial attachment and dento-gingival fibers. |
| D. | epithelial attachment and root cementum. |
| E. | fibers of alveolar crest and periapical fibers. |
| | |
| 3. | Choose traits of periodontium in the old age: |
| 1) | horizontal atrophy of alveolar process margin; |
| 2) | intrabony (vertical) bone defects; |
| , | decreased number of bone trabeculae; |

4. During the procedure of guided bone regeneration, the following flap is prepared:

B. 1,2,4,6. **C.** 1,2,4,5. **D.** 1,3,4,5. **E.** 3,5,6.

A. half-moon shaped.

5) hypercementosis;6) hyperpigmentation.

Correct answer is:

B. with double papillas.

C. from muco-epithelial mucosa.

4) narrowing or complete atrophy of periosteal space;

D. split.

A. 2,3,4.

E. full thickness.

| A. B. C. D. | Gingiva recession consist mucogingival junction. cementum. cemento-enamel junction. attached gingiva. gingival sulcus. | · | splacem | ent of th | e gingival margin below the: |
|--|--|---|--------------|-----------|------------------------------|
| 1) 2) 3) 4) Co | Intraoral radiograms includental images; pantomographic X-rays; bite-wing X rays; occlusal X-rays. rrect answer is: 1,3,4. B. 1,2,3. | | 4. D. | . 3,4. | E. only 1. |
| A. B. C. D. | Allogenic bone is: patient's own bone harves from tissue bank and deriv bone derived from animals artificial, produced synthes built with hydroxyapatites. | ving from or s or coral. tically. | | | de of the oral cavity. |
| 1) 2) 3) 4) 5) 6) Co | Choose Gracey curette set 1/2; 3 /4; 5/6; 7/8; 9/10; 11/12. rrect answer is: 1,2,3,4. B. 1,4,5,6. | | | • | |
| A. B. C. D. | Manual scalers are used for removal of subgingival caleremoval of supragingival content of supragingival of the supra and polishing the root surface. | culus. calculus. I subgingiva | ıl calculı | us. | |
| A. B. C. D. | During working with mech handpiece and root surfact 15 degrees. 25 degrees. 45 degrees. 55 degrees. 75 degrees. | | | ngle betv | veen the working part of |

| 11. Choose act 1) necrotizing 2) abscesses; 3) lesions in th 4) endo-perio 5) drug-induce Correct answer | ulcerative pene ne course of lesions; and gingival hy | eriodontitis; Chédiak–Hig | ashi syndrom | ne; | | | |
|--|---|--|------------------|------------------------|----------------|--|--|
| A. 1,2,3. | | C. 3,4,5. | D. 1,2,4. | E. 2,3,5. | | | |
| Hamp: A. the probe positive through. B. horizontal function and-through. C. probe introduced and-through. D. distance be | A. the probe penetrates the interradicular area up to 3 mm but not through-and- | | | | | | |
| Choose unr age; peripathoge diabetes; sex; race; genetic poly Correct answer 1,2,3,4. | ens; /morphism. r is: | | | E. 3 | ,4,5,6. | | |
| 14. Approximal Plaque Index according to Lange is determined: in maxillary right quadrant – in interdental spaces from palatal side; in maxillary right quadrant – in interdental spaces from vestibular side; in mandibular right quadrant - in interdental spaces from lingual side; in all quadrants both in maxilla and mandible – from the palatal/lingual and vestibular side. Correct answer is: A. 1,3. B. 1,4. C. 2,3. D. 2,4. E. only 5. | | | | | | | |
| 15. Choose cau 1) wrong brusl 2) prosthetic tr 3) chronic ging 4) occlusal inju 5) chewing gu Correct answer A. 1,2,3. | uses of reces hing habits; reatment with giva inflamma ury; m. | ssion develop n crown and l ation; | ment which o | overlap anator | mical factors: | | |
| A. 1,2,0. | D. 2,3,4. | U. 1,2, | o. D. 1, | J, T . E. 3 | ,,,,,,,, | | |

| 1) 2) 3) 4) 5) Co | photodynamic cryotherapy; steroid drugs excision in ar preparations rrect answer is | s; nesthesia; containing vit is: | | D. 1,2,4. | E. 1,3,5. |
|---|---|--|---|---------------------------|--|
| A. B. C. D. | Choose locat lower lip. upper lip. palate. tongue. retromolar tria | tion of limited angle. | melanosis: | | |
| 1) 2) 3) 4) 5) 6) Co | carcinoma: it resembles of it resembles of it rarely unde it often under it is most ofte it is most ofte rrect answer is | cauliflower; cabbage; ergoes maligna rgoes maligna en located on en located on is: | ancy; incy; lower lip; | | also known as papillary E. 1,4,6. |
| 19. A. B. C. D. E. 20. A. B. C. D. E. 21. A. B. C. | What does Carlos and CDAIDS and CDAIDS and CDAIDS and CDAIDS and CDAIDS and CDAIDS all of the about 10 and | 3 according to 24 count <200 at 200 a | o CDC classificate). Teen 200 to 499. The CD4 count <20 The CD4 count between 200 The CD4 count >20 The CD4 count on the CD4 count of the CD4 | ion mean? 0. ween 200 to | 499. |

| C. D. | mumps. measles. Zahorsky's herpangina. all of the above-mentioned are true. |
|----------------------------------|--|
| A. B. C. D. | Choose diseases bordering on the precancerous diseases and cancers of high malignancy rate: leukoplakia, Bowen's disease. erythroplakia, Bowen's disease. erythroplakia, leukoplakia. erythroplakia, dark brown hyperkeratosis. Bowen's disease, limited melanosis. |
| A. B. C. D. | Choose virus responsible for 3-day fever (sudden erythema): HHV1. HHV3. HHV5. HHV6. EBV. |
| 1) 2) 3) 4) Co | In ulceration differentiation one must always consider, among others, infiltration of the substrate, which: does not occur in non-specific ulcerations; occurs in cancerous ulcerations; does not occur in tuberculous ulcerations; occurs in syphilitic ulcerations. orrect answer is: 1,2. B. 2,3. C. 1,4. D. only 3. E. all of the above-mentioned. |
| A. B. C. D. | Choose diseases caused by paramyxoviruses: prubella, mumps. mumps, measles. rubella, measles. rubella. all of the above-mentioned. |
| 1) 2) 3) 4) 5) Co | Diagnosing systemic lupus erythematosus consists in: characteristic cutaneous and organ symptoms; leucopenia <4000/mm³; lymphopenia<100/mm³; thrombocytopenia <100 000/mm³; proteinuria >0.5 g protein/day. errect answer is: 1,2 B. 1,3,4 C. 1,4,5 D. 2,3,5 E. all of the above-mentioned |

22. Togaviruses are responsible for:

A. rubella.

| A. B. C. D. | belong to the Socransky bacterial complexes, indicated with which color? dark violet. orange. yellow. dark green. A and C are true. |
|-----------------------------------|---|
| A. B. C. D. | Choose <u>false</u> statement regarding drug-induced gingival hyperplasia: pathologic changes are located more often in anterior parts of dentition. pathologic changes occur more often in younger age groups, they develop during first 3 months after drug is introduced. one of its clinical problems is presence of gingival pockets (pseudo). pathology increase is not related to the amount of dental plaque. pathology increase may be related to individual genetic susceptibility. |
| A. B. C. D. | FotoSan device can be used in photodynamic therapy of periodontal diseases and uses light of 660 to 990 nm wavelength, which corresponds to the color: red. yellow. orange. green. blue. |
| 31. A. B. C. D. | 2.3.4. |
| 32. A. B. C. D. E. | 2.3.4. |
| A. B. C. D. | Histopathological image of a tissue biopsy obtained from lichen planus reveals: hyperkeratosis. parakeratosis. the vacuolar degeneration of keratinocytes. epithelial icicles forming "saw teeth". all of the above-mentioned. |

- **34.** Indicate differences between clinical state of gingiva based on healthy periodontium and the one based on reduced periodontium:
- A. no gingival bleeding during clinical examination.
- B. no gingival discoloration.
- C. no edema of gingival papillas.
- **D.** no clinical loss of connective tissue attachment.
- **E.** all of the above-mentioned answers are false.
- 35. Primary Sjögren's syndrome includes:
- 1) dry mouth;
- 2) rheumatoid arthritis;
- 3) multi muscle inflammation;
- 4) dry eyes;
- 5) scleroderma.

A. only 1. **B.** 1,4. **C.**1,2,4. **D.** 2,3,4. **E.** all of the above-mentioned.

- 36. Choose the most common of causes sensation of dryness in the oral cavity:
- 1) stress;
- 2) diuretics;
- 3) Parkinson disease;
- 4) diabetes;
- 5) head and neck radiotherapy.

Correct answer is:

A. only 1. **B.** 2,4. **C.**1,2,3. **D.** 1,2,3,5. **E.** all of the above-mentioned.

- **37.** Choose factors that are taken into consideration in the etiopathogenesis of chronic recurrent aphthae:
- 1) stress and fatigue;
- 2) folic acid deficiency;
- 3) autoimmunologic processes;
- 4) iron deficiencies;
- 5) lymphocytes dysfunction.

Correct answer is:

A. all of the above-mentioned. **B.** 1,3,5. **C.**1,3,4,5. **D.** 1,3,4,5. **E.** 3,5.

- **38.** Choose virus that is causing infection for which linear gingival erythema is characteristic:
- A. HIV.
- B. Epstein-Barr.
- C. varicella zoster.
- D. cytomegalovirus.
- **E.** HHV8.

- **39.** Indicate drugs that can cause granulopenia or agranulocytosis:
- 1) painkillers;
- 2) antihistamine;
- 3) antidiabetic;
- 4) antithrombotic;
- 5) diuretic;
- 6) phenothiazines;
- 7) anti-depressant.

A. 1,3,7. **B.** 1,2,3,7. **C.**1,2,3,4,5,6. **D.** 1,2,3,5,7. **E.** 3 all of the above-mentioned.

- **40.** Choose precancerous diseases:
- 1) leukoplakia;
- 2) labial diseases;
- 3) acanthosis nigricans;
- 4) ulcerations;
- 5) xeroderma or xeroderma pigmentosum.

Correct answer is:

- **A.** 1,2,3. **B.** 1,2,3,4. **C.**1,3,5. **D.** 1,2,4. **E.** 3 all of the above-mentioned.
- **41.** A 43-year-old patient, generally healthy, reported due to bleeding and gum recession. The patient smokes average 5 cigarettes a day for the last 20 years. Clinical examination revealed full dentition, loss of connective tissue attachment of around 6-7 mm in most examine teeth, gingival pockets depth or up to 8mm, pathologic movement of teeth grade I. Radiologic examination allowed for estimation of 1,2 % bone loss. Patient can be diagnosed with:
- A. periodontitis stadium II grade B.
- **B.** periodontitis stadium II grade C.
- C. periodontitis stadium III grade B.
- D. periodontitis stadium III grade C.
- E. periodontitis stadium IV grade C.
- **42.** Glycaemic control in patients with diabetes may significantly influence the rate of periodontitis progression. Which glycated hemoglobin value (HbA1c) is related to high progression rate of periodontitis (grade C)?
- **A.** <3%.
- **B.** <4%.
- **C.** <5%.
- **D.** ≥6%.
- **E.** ≥7%.

- **43.** Recession classification according to Cairo distinguishes several types of recession, in which RT1 means:
- **A.** recession without CAL loss in interdental spaces, CEJ is interproximal undetectable.
- **B.** recession with CAL loss in interdental space ≤ than Cal from buccal side.
- C. recession with CAL loss in interdental space > than Cal from buccal side.
- **D.** recession with simultaneous CAL loss both in vestibular and lingual/palatal direction without CAL loss in interdental space.
- E. all of the above-mentioned answers are false.
- **44.** Inflammatory mediators which inhibit osteoclasts' function include:
- 1) IL-1;
- 2) IL-6;
- 3) IL-10;
- 4) TGF-β 1;
- 5) TNF;
- 6) RANKL;
- 7) PGE2;
- 8) OPG.

A.1,2,3,4,5. **B.** 1,2,5,6,7. **C.** 3,4,8. **D.** 3,5,7,8. **E.** 4,5,6,7,8.

- **45.** It is a malignant vascular carcinoma of mesenchymal origin. It develops in patients with immunosuppression. The most common oral cavity location is palate and gums. Above-mentioned description concerns:
- **A.** lymphoma.
- B. eosinophilic granuloma.
- C. tumors derived from Langerhans cells.
- **D.** Abrikosov's tumor.
- E. Kaposi sarcoma.
- **46.** Indicate optimal scheme of antibiotic therapy in periodontitis treatment:
- A. amoxicillin 500 mg every 8 hours for 7 days.
- **B.** ciprofloxacin 500 mg every 12 hours for 8 days.
- **C.** metronidazole 250 mg every 12 hours.
- D. 2 g of amoxicillin, 30 min before the procedure and 2 days after.
- E. amoxicillin 500 mg every 8hours and metronidazole 500 mg every 8 hours for 7 days.
- **47.** Typical cancers occurring in patients with AIDS **do not** include:
- A. spinocellular oral cavity carcinoma.
- B. melanoma.
- **C.** non-Hodgkin lymphoma.
- **D.** Kaposi sarcoma.
- E. squamous cell carcinoma of reproductive organs' area.

- **48.** Indicate what, according to van der Waal classification, stage IV leukoplakia (L3P1) means:
- A. size of lesion up to 3 cm, single lesion.
- **B.** size of lesion up to 2-4 cm, single lesion.
- C. size of lesion above 4 cm, dysplasia in histopathologic image.
- **D.** size of lesion above 4 cm, hyperkeratosis of I stage in in histopathologic image.
- E. multiple lesions of unspecified size, unspecified dysplasia.
- 49. Risk of malignant transformation of oral cavity leukoplakia is higher:
- A. in older lesion.
- **B.** in case of presence of HPV6 and HPV8.
- C. with thickness of corneal layer.
- D. in Caucasian race.
- **E.** in mouth angles than on the tongue.
- 50. Clinical lesions concern mostly the tongue. Histopathologic image resembles psoriasis with thinning of corneal and granular layer with simultaneous thickness of acanthous layer of epithelium without inflammation. Above mentioned description concerns:
- A. plaque-like lichen planus
- B. geographic tongue
- C. homogenous leucoplakia
- D. atrophic candidiasis
- E. systemic lupus erythematosus
- **51.** White, painless hyperkeratotic lesions on palate with visible inflamed salivary glands orifices concern:
- A. nicotinic inflammation.
- B. herpes virus infection.
- **C.** prosthetic inflammation.
- D. pemphigoid.
- E. spotted leucoplakia.
- **52.** A 50-year-old patient, generally healthy, nonsmoker, reported for treatment. Clinical examination revealed presence of 32 teeth with small amount of supra and subgingival calculus, loss of connective tissue attachment on proximal surfaces of teeth, not exceeding 4mm in all teeth. Also, gingival pockets of depth or up to 5mm in molars and premolars. Radiologic examination allowed for estimation of 20 % bone loss of root length. Above-mentioned symptoms indicate:
- A. periodontitis stage I, grade A, localised.
- **B.** periodontitis stage I, grade B, systemic.
- C. periodontitis stage II, grade A, systemic.
- **D.** periodontitis stage II, grade B, systemic.
- **E.** periodontitis stage II, grade B, localised.

| A. B. C. D. E. 54 | 3. According to Cairo, recession accompanied with loss of attachment in interdental spaces, which value is lower than loss of attachment on buccal side: RT1. RT2. RT3. RT4. RT5. 4. Better prognosis for leucoplakia is related to following factors: homogenous leukoplakia; | | | | | | | |
|--|---|----------------------------------|-------------------------------|--------------------------|------------------|--------|--------------------|-------------|
| 3) 4) 5) 6) Co | non-homogenerative type; located on the treet answer is 1,3,5. B. 2,4 | e; ccal i tono : | mucosa; gue. | | D. 2,3,6. | | E. 1,4,5,6. | |
| A. B. C. D. | .Which oral cave cheeks. hard palate. soft palate. dorsum of the gums. | · | | ed with s | special m | ucosa | a? | |
| A. B. C. D. | Excised tissue of: lesions with in viral aetiology. bullous diseas fungal aetiology precancerous | crea .es. Jy. | sed hyperke | | escence e | examir | nation is used in | diagnostics |
| 1) 2) 3) 4) 5) 6) Co | Choose chara female sex; older age; upper lip locat oedema, epith cracks, erosion possible dysplarrect answer is 1,3,5. B. 2,4 | ion; eliur ns asia : | n exfoliation in histopath | ı, indurat ıologic ex | ion kaminatio | n. | 2,4,5,6. | |
| | | | | | | | | |

| 58. Arrange correctly layers forming epithelial attachment starting from enamel towards connective tissue: 1) external basal lamella; 2) internal basal lamella; 3) acanthous layer of epithelium; 4) suprabasal layer of epithelium; 5) basal layer of epithelium. Correct answer is: A.1,4,5,2. B. 1,3,4,5,2. C. 2,4,5,1. D. 3,4,5. E. 2,3,4,5,1. |
|--|
| 59. Indicate one of characteristic anatomic structural differences of tissues around implant compared to tissues around a tooth: A. no connective tissue attachment. B. greater vascularity of soft tissues. C. no bony dehiscence. D. no vessel plexus in subepithelial tissue. E. no attached gingiva. |
| 60. Choose richest vascular network supplying periodontium: A. gingival. B. subepithelial. C. bony. D. periodontal. E. periosteal. |
| 61. Indicate factors, which are responsible for bone damage in the course of periodontitis: 1) IL-1; 2) IL-6; 3) IL-10; 4) IL-17; 5) RANKL. Correct answer is: A.1,2,3. B. 2,3,4. C. 2,4,5. D. 1,3,4,5. E. 1,2,4,5. |
| 62. Theory of key pathogen in periodontitis development assumes the possibility of microbiome changes in pocket under the influence of peripathogen with special properties. Such properties have: A. A. actinomycetemcomitans. B. P. gingivalis. C. F. nucleatum. D. T. denticola. E. T. forsythia. |

- 63. In periimplantitis, apart from typical peripathogens, occurrence of specific exogenous pathogen is found:
 A. K. pneumoniae.
 B. S. aureus.
 C. E. faecalis.
 D. P. aeruginosa.
 E. H. influaenzae.
- **64.** Periodontitis risk factors **do not** include:
- A. earlier occurrence of periodontitis.
- **B.** no control of bacterial biofilm.
- C. diabetes.
- **D.** tobacco dependence syndrome.
- E. lack of sufficient zone of keratinized gingiva.
- 65. Which clinical parameters meet the definition of healthy gums?
- A. CAL=0 mm, PD<3 mm.
- **B.** CAL=0 mm, PD>3 mm.
- **C.** CAL=0 mm, PD<3 mm, BOP>10%.
- **D.** CAL<3 mm, PD<3 mm.
- **E.** BOP<10%.
- 66. Choose true statements regarding Stillman's cleft:
- A. linear gingival crack on vestibular surface forming due to trauma.
- **B.** medial tongue fissure.
- C. gingival recession separated by thickened gingival fold on vestibular surface.
- D. it is also called gingival fissure.
- E. developmental disorder observed alongside palatine raphe.
- **67.** In radiologic examination of periodontium distance between bony margin and CEJ in healthy periodontium amounts to maximum of:
- **A.** 1 mm.
- **B.** 2 mm.
- **C.** 3 mm.
- **D.** 4 mm.
- **E.** 5 mm.
- **68.** Enlargement of surrounding lymph nodes, not movable against substrate, painless and without characteristic clinical features, are distinctive features for ulcerations:
- A. syphilitic.
- **B.** cancerous.
- **C.** tuberculous.
- **D.** specific.
- E. non-specific.

- **69.** Xeroderma and xeroderma pigmentosum is inherited condition with developing of spotted discoloration and atrophic skin lesions. Its incidence is related to increased cancer occurrence of:
- A. lower lip.
- **B.** oral cavity floor.
- C. tongue.
- **D.** salivary glands.
- E. maxillary sinus.
- 70. The most common cause of late implant loss is:
- **A.** improper preparation of bony lodge.
- **B.** impaired healing after implantation.
- C. no primary stabilization.
- **D.** too early implant loading.
- E. bacterial infection and excessive implant loading.
- **71.**25-year-old patient reported to dental office due to mandibular incisors' mobility. Patient is generally healthy, is not taking any medications, negates smoking. Clinical examination revealed: III stage mobility of mandibular incisors, small amount of dental plaque in interdental surfaces. API=10%, max. PD-8 mm, max. CAL- 4mm. OPG revealed horizontal bone loss reaching up to1/3rd. Indicate the stage of periodontitis:
- **A.** A.
- **B.** B.
- **C.** C.
- **D.** D.
- **E.** aggressive periodontitis is not determined by periodontitis stadium and its progress rate.
- **72.** Choose true statement regarding management of patient with periodontal abscess:
- **A.** abscess cavity can be rinsed with perhydrol.
- **B.** the lesion should be differentiated with acute periapical inflammation, paradental abscess, Langerhans cell histiocytosis.
- **C.** no indications for administering systemic antibiotics in case of systemic symptoms.
- **D.** lack of necessity for radiologic diagnostics, no symptoms visible on radiogram.
- **E.** due to acute state and acute pain, probing of the pockets should not be performed.
- **73.** Choose true_statements regarding squamous cell carcinoma:
- 1) it is most often located on maxillary gingiva in the incisor's area;
- 2) its feature is mobility of teeth adjacent to the tumor;
- 3) its feature is no bone infiltration;
- 4) its clinical image may resemble gingival reaction lesions.

A.1,2. **B.** 1,3. **C.** 1,4. **D.** 2,3. **E.** 2,4.

- 74. Choose **false** statement regarding leukoplakia:
- A. it is a term describing all white lesions present on oral mucosa, which cannot be identified as other disease.
- B. most oral cavity cancers develop on the basis of chronic, untreated leukoplakia.
- **C.** it is a precancerous state.
- D. homogenous leukoplakia has increasingly higher cancerous malformation potential than non-homogenous type.
- E. lesions are located mainly on buccal mucosa, gums, tongue and oral cavity floor.
- 75. Choose true statements regarding erythroplakia:
- 1) silky, bright red papulla or erosion, which cannot be identified as other disease either clinically or pathologically;
- 2) the reason for development is exogenous irritating trigger usually smoking, especially in connection with excessive alcohol drinking;
- 3) efflorescences of different shades of red are of oval shaped, good demarcated spots of different surface texture;
- 4) efflorescences are usually painful;
- 5) inside those spots, there may be found foci of unchanged mucosa.

A. 1,2,3.

B. 2,3,5. **C.** 2,4,5.

D. 3,4,5.

E. 2,3,4.

- **76.** Choose **false** statement regarding erythroplakia treatment:
- A. treatment of choice is cryogenic treatment with liquid nitrogen of temperature around 80 Kelvins.
- **B.** 5-fluorouracil is commonly used.
- C. biostimulation laser is used, especially in the initial lesion's state.
- D. surgical lesion excision.
- E. photodynamic therapy.
- 77. Oral cavity is ideal for many bacterial species to survive and reproduce. Choose false statement:
- A. table temperature of around 36°.
- B. environment humidity.
- C. frequent food intake.
- **D.** dense, easy to colonize surfaces.
- **E.** suitable pH of the oral cavity, around 8 to 9.
- **78.** According to Gwazdzinski classification, medium risk of malignancy have:
- A. oral cavity blooming papillomatosis, lichen planus, Bowen's disease.
- B. lichen planus, limited melanosis, leukoplakia.
- C. limited melanosis, xeroderma pigmentosum, dark hyperkeratosis.
- D. erythroplakia, labial diseases.
- E. ulceration, xeroderma, labial diseases.

| A. B. C. D. | Choose area, in which non-homogonous leukoplakia has the highest chance of malignancy: oral cavity floor. gum. hard palate. soft palate. retromolar area. |
|----------------------------------|---|
| 1) 2) 3) 4) 5) Co | Mucosa lesions in Kaposi sarcoma most often occur on: palate; retromolar area; oral cavity floor; tongue; buccal mucosa. rrect answer is: 1,2. B. 2,3,5. C. only 3. D. 1,4. E. 1,4,5. |
| A. B. C. D. | In case of erythroplasia, the best staining method is staining with: eosin. haematoxylin. toluidine blue. fuchsin. methyl violet. |
| A. B. C. D. | Indicate the most common location of lymphoma in course of AIDS: tongue. oral cavity floor. retromandibular – palatal area. buccal mucosa. soft palate. |
| 83. | . How would you interpret clinical examination of periodontium, in which the depth |

of sulcus was 7 mm and loss of connective tissue attachment was 9 mm?

A. drug-induced gingival hyperplasia.B. periodontium recession of 2 mm.

C. loss of connective tissue attachment.

D. presence of systemic symptoms.**E.** coexistence of malocclusion.

C. such difference indicates periodontal abscess. **D.** hyperplasia component of gingiva is 4 mm.

E. benign form of chronic periodontitis in elderly patient .

84. Indicate criteria differentiating gingivitis from periodontitis:A. average value of API index according to Lange et alia.B. average value of GI index according to Loe and Silness.

85. Periotest is meant for testing: A. teeth mobility. **B.** depth of sockets and loss of connective tissue attachment. C. intensity of gingivitis. D. volume of gingival fluid. **E.** coexistence of early occlusal contacts. 86. Which of the below-mentioned Gracey curette is recommended for preparing molars? **A.** 5/6. **B.** 7/8. **C.** 9/10. **D.** 11/12. **E.** 13/14. **87.** What API values supports the thesis of oral cavity hygiene being quite good? **A.** <50%. **B.** >40%. **C.** <40%. **D.** 39-25 %. **E.** <25%. 88.5-ALA is used in: A. precancerous states treatment. B. periodontitis treatment. **C.** diagnostics of pregnancy tumor. D. treatment of necrotic gingivitis. E. Sjögren syndrome treatment. **89.** Acantholysis is characteristic for: A. pemphigus. B. pemphigoid. C. lichen planus. D. scleroderma. E. leukoplakia. **90.** Periodontal ligament is related structurally to cemetum:

A. cellular mixed fiber.

C. acellular stringless.

B. surgical technique.C. immune response.

D. clinical index.E. scaling method.

A. cytokine.

B. cellular with own fibers.

D. acellular with own fibers.E. cellular with foreign fibers.91. API is a short name for:

- **92.** Feature that classifies clinically said ulceration as potentially cancerous does not include:
- A. characteristic clinical image.
- B. substrate infiltration.
- **C.** enlargement of surrounding lymph nodes.
- **D.** non-displaceability of lymph nodes against substrate.
- **E.** painless enlarged lymph nodes.
- 93. Fordyce disease is located in the area of:
- A. palate.
- **B.** gums.
- C. lips.
- **D.** tongue.
- E. periodontium.
- 94. Erythroplakia differs from leukoplakia by:
- A. initial efflorescence.
- B. risk of malignancy.
- **C.** aetiologic factor.
- **D.** lesion location.
- **E.** true answers are B and C.
- 95. Hunter glossitis is a symptom of:
- A. Melkersson-Rosenthal syndrome.
- B. diabetes.
- C. oral cavity herpetic inflammation.
- **D.** vitamin B12 deficiency.
- E. Grinspan syndrome.
- **96.** Which of the below-mentioned bacteria belong to red complex (according to Scoransky)?
- A. C. rectus.
- B. T. denticola.
- C. P. micra.
- **D.** A. actinomycetemcomitans.
- E. E. corrodens.
- **97.** According to Gwiezdzinski's classification low risk of malignancy (1-5%) has:
- A. lichen planus.
- **B.** ulceration.
- **C.** Stevens-Johnson syndrome.
- D. leukoplakia.
- E. Bowen's disease.

- 98. Which of the below-mentioned diseases is not regarded as precancerous state:
 A. erosive cheilitis.
 B. glandular cheilitis.
 C. sun-induced cheilitis.
 D. granulomatous cheilitis.
 E. angular cheilitis.
- 99. Which of the below-mentioned disease is not caused by herpesviridae?
- A. herpetic oral cavity inflammation.
- B. Burkitt's lymphoma.
- C. hairy leucoplakia.
- D. herpes zoster.
- E. herpangina.
- **100.** Indicate biomaterials demonstrating osteogenesis:
- A. allogenic implants.
- B. autogenic implants.
- C. heterogenic implants.
- **D.** xenogeneic implants.
- E. alloplastic implants.
- 101. Which of the below-mentioned drugs cause drug induces gingival hyperplasia?
- A. beta blockers.
- B. calcium channel blockers.
- **C.** cephalosporines.
- D. imidazoles.
- E. carbapenems.
- **102.** Which of the below-mentioned yeast fungi is most often isolated in the course of oral cavity fungal infection:
- A. C. glbrata.
- B. C. albicans.
- C. C. tropicalis.
- D. C. crusei.
- E. C. paracrusei.
- **103.** According to Pindborg classification leukoplakia is divided into:
- A. idiopathic and reactional.
- **B.** homogenous and heterogenous.
- **C.** L1, L2 and L3.
- **D.** P0 and P1.
- **E.** primary and secondary.

| 104. Indicate brushing method in which toot crown: | hbrush's bristle is directed towards the |
|---|--|
| A. Charter's. | |
| B. Stillman's. | |
| C. Baas. | |
| D. Fones.E. modified Baas. | |
| E. Modified Bads. | |
| 105. Epithelium layering the floor of gingival | sulcus is epithelium: |
| A. inernal. | |
| B. external. | |
| C. wedge-shaped.D. connecting. | |
| E. single-layer. | |
| | |
| 106. Most common cause of leukoplakia (in | almost 80% of cases) is: |
| A. alcohol. | |
| B. mechanical trauma. | |

C. nicotine-dependency.

A. HPV10 and HPV12.
B. HPV12 and HPV16.
C. HPV14 and HPV16.
D. HPV12 and HPV18.
E. HPV16 and HPV18.

108. Ro/La antigens occur in:

E. chemical burns.

A. lichen planus.B. pemphigus.C. pemphigoid.

E. scleroderma.

A. no metastases.

C. no dysplasia.

B. multiple metastases.

D. unidentified dysplasia.

110. Wickham striae is:

E. carcinoma in situ.

A. histologic image.B. cytological image.C. radiologic image.D. anatomic structure.

E. clinical image.

D. Sjögren syndrome.

D. consuming spicy and hot foods.

107. Oncogenic strains of HPV virus include:

109. Px in leukoplakia classification means:

| A. B. C. D. | 1. Indicate drug administered in SDD: metronidazole. chlorhexidine. doxycycline. povidone-iodine. diclofenac. |
|----------------------|---|
| A. B. C. | 2. Choose false statement concerning precancerous state: it is a clinical term. it may not undergo malignant transformation. summing of factors influencing forming of lesion heightens the risk of its occurrence. genetic factors do not encourage precancerous state forming. it can last from few weeks to several years. |
| A. B. C. D. | 3. Indicate what acts as photosensitizer in photodynamic therapy: povidone-iodine. chlorhexidine. hydrogen peroxide. ozone. toluidine blue. |
| A. B. C. D. | 4. Mikulicz's aphthae include: erosion. ulceration. spot. vesicle. blister. |
| | horizontal direction: I. II. III. IV. |
| A. B. C. D. | 6. Ramsay-Hunt syndrome is a form of: measles. rubella. herpes zoster. herpangina. infectious mononucleosis. |