



9. Oral Surgery and Local Anesthesia

1. *One of the following has no effect on the life span of handpiece:*
 - a. Low air in the compressor.
 - b. Trauma to the head of the handpiece
 - c. Pressure during operating handpiece
 - d. Non application of lubricant oil
2. *Main cause of serial extraction is to primary extraction of:*
 - a. C
 - b. D
 - c. 4
 - d. 5
3. *Upper molars developed in tuberosity, occlusal surface will be tilted*
 - a. Distal
 - b. Mesial
 - c. Buccal
 - d. Palatal
4. *What is the primary goal of gingivectomy?*
 - a. Pseudo pocket
 - b. Infra bony pocket
 - c. Pigmentation removal
 - d. Gingival growth
5. *Patient was injected inferior nerve block for lower incisor and still has pain. What is the extra technique?*
 - a. Long buccal
 - b. Midline infiltration
 - c. Lingual
 - d. Mental
6. *Best way to detect osseous defect:*
 - a. Clinical examination
 - b. Bone scan
 - c. x-ray
 - d. MRI
7. *A 4 year old patient visits your hospital after a bicycle accident, In clinical examination you found the primary tooth intruded in to the permanent follicle. What is the effect it will cause to permanent tooth?*
 - a. Dens in dente
 - b. Dens evanegenatus
 - c. Turner's hypoplasia
 - d. Ankylosis
8. *Implant is contraindicated in a patient with:*
 - a. Smokers
 - b. Diabetes patiente. HIV
 - d. Hepatitis
9. *In periapical root resection surgery, the biocompactible shape of root resection is:*
 - a. Perpendicular to the long axis of the root,
 - b. Acute angle to the long axis of the root
 - c. Parellel to the root
 - d. Obtuse angle to the root
10. *What is the forceps used to grasp epulis fissuratum during surgical procedure?*
 - a. Allis forceps
 - b. Addison forceps
 - c. Stills forceps
 - d. Curved hemostat
11. *Gentotoxicity tests come under:*
 - a. Primary tests.
 - b. Secondary tests.
 - c. Preclinical usage tests.
 - d. None of the above.

Section II: Topicwise Questions / Answers

12. *An adult 20 years male came to your hospital with soft tissue & dental trauma. He reveals severe pain in soft tissues with loss of epithelial layers and clinical examination shows anterior upper centrals are intruded. What is the diagnosis?*
- a. Abrasion with luxation.
b. Erosion with sub luxation.
c. Laceration with luxation.
d. Laceration with sub luxation.
13. *A patient complains from swelling in submandibular, swelling increases when patient is eating and swallowing only. What type of x-ray is used for diagnosis?*
- a. Occlusal x-ray.
b. Panoramic x-ray.
c. Sialography.
d. Intro oral periapical x-ray
14. *A child comes to your clinic after falling down from stairs. During the examination you have found the child have tooth which have no mobility but have luxation. Best treatment is:*
- a. Acrylic splint.
b. Flexible fixation.
c. Rigid fixation.
d. No need for treatment
15. *About apicoectomy what is the right statement?*
- a. Incisor with an adequate RCT and 9 mm lesion.
b. Lateral incisor with good condensing RCT but swelling and pain 14 days after the treatment,
c. The tooth is asymptomatic before the obturation.
d. First upper premolar with lesion on the bucal root
16. *A patient came to your clinic after falling down from his bike. Clinical examination shows patient's tooth has crown fracture under the gingival level, and we want to use the tooth. What is the treatment?*
- a. Amalgam post core under the gingival.
b. Extrusion orthodontic.
c. Restoration under the gingival.
d. Extraction of the tooth.
17. *A 14 years old patient comes to your clinic with avulsed incisor tooth. You replant the tooth in the socket and splint for:*
- a. 1 -2 weeks.
b. 2 - 3 weeks.
c. 3 - 4 weeks.
d. 4 -5 weeks.
18. *Which one of the following is correct when you are removing lower second molar of right side?*
- a. Occlusal plane perpendicular to floor
b. Buccolingual direction to dilate socket
c. Mesial then lingual to dilate socket
d. Tooth position should be above the elbow level.
19. *Osteogenesis during endodontic surgery is aimed to prevent:*
- a. Fibroblast growth.
b. Growth factor.
c. Formation of blood.
d. Formation of osteoblast
20. *Of the following in which condition local anesthesia is ineffective:*
- a. Edema.
b. Localized infection.
c. Hematoma.
d. Anemia.
21. *When you are doing full arch extraction of maxillary arch which of the following is the correct order?*
- a. 87654321.
b. 87542163.
c. 12345678.
d. 36124578
22. *Which of the following the tooth most commonly removed by surgical method?*
- a. Canine.
b. Lower third molar.
c. Upper third molar
d. Upper 2nd premolar
23. *After a motor bike accident patient has unilateral fracture of left condyle. Which of the following clinical feature patient will show while mouth opening?*
- a. Deviate to the left side.
b. Deviate to the right side.
c. No deviation
d. Patient cant open mouth

24. When you are doing CPR for a patient, the compression relaxation cycle of external cardiac compression should be repeated at what rate?
- Twice per second.
 - 60 times per minute.
 - 76 times per minute.
 - 100 times per minute.
25. Instrument used to handle the needle is:
- Curved hemostat.
 - Adson forceps.
 - Allies forceps.
 - Russian forceps
26. Which are the following appliances used for immobilization of fragments of broken parts of jaw bones in their original position until repair takes place?
- Splints.
 - Stents.
 - Obturators.
 - Speech aids.
27. The primary direction for spread of infection in the mandible is to sub mental lymph node:
- True
 - False
28. All of the following may be done to arrest intraoperative hemorrhage except:
- Ligation of cut arteries and veins
 - Pressure application with help of sterile gauge
 - Bone compression to arrest bleeding
 - Infiltration of area with lignocaine
29. The following medical conditions may precipitate a syncope:
- Hypoglycemia.
 - Mild hyperglycemia.
 - Anti hypertensive drugs with ganglionic blocking agent.
 - Antidepressant therapy.
 - All of the above.
30. A patient is taking warfarin. What test you would advise him before a surgical procedure?
- PTT,
 - PT & INR
 - CBC
 - RBS
31. The usual, first clinical sign of mild lidocaine toxicity is:
- Lethargy.
 - Nervousness
 - Convulsions
 - Tachycardia.
32. Carbide burs are better than diamond burs in cutting:
- Enamel
 - Dentin
 - Caries
 - Bone
33. Lumbar puncture for CSF done in:
- Between 2nd and 3rd lumbar vertebra
 - Between 3rd and 4th lumbar vertebra
 - Between 4th and 5th lumbar vertebra
 - Between 6th and 7th lumbar vertebra
34. LA of inferior alveolar block has to be injected in:
- Pterygomandibular space
 - Phenopharengel space
 - Submandibular space
 - Sublingual space
35. What is bone swagging?
- Pushing of bone into contact, with the root surface without fracturing the bone at its base.
 - Pushing of bone into contact, with the root surface with fracturing the bone at its base.
 - Removing of bone from the root surface during the periodontal surgery
 - It's the technique aused for saucerization of bone
36. Use of dental elevator is for all except:
- Wheel and axis.
 - Wedging.
 - Lever.
 - Wedging of socket wall

Section II: Topicwise Questions / Answers

37. Which of the following will cause anterior open bite?
a. Unilateral condylar fracture. b. Bilateral condylar fracture.
c. Lefort 2 fracture. d. Zygomatic fracture.
38. Nerve impulse stops when injecting local anesthesia:
a. True b. False
39. You have a patient who is on warfarin treatment and you want to do dental surgery for him. When you can do?
a. When PTT is 1 – 1.5 INR on the same day. b. When PTT is 2 – 2.5 INR on the same day.
c. When PT is 1 – 1.5 INR on the same day. d. When PT is 2 – 2.5 INR on the same day
40. Platelet transfusion is not indicated in:
a. Dilutional thrombocytopenia. b. Immunogenic thrombocytopenia.
c. Aplastic anemia. d. DIC.
41. Which of the following is the treatment of pericoronitis?
a. Mouthwash and irrigation. b. Extraction of the opposing tooth.
c. Surgical removal of the causative tooth. d. All the above.
42. The best time to treat the pregnant female is:
a. First trimester b. Second trimester. c. Third trimester. d. Fourth trimester
43. Modify the ridge stability by:
a. Preprosthetic surgery b. Oral muscular exercise
c. Implants d. None of the above
44. What should be the ideal distance between two implants?
a. 1 mm b. 2 mm c. 3 mm d. 4 mm
45. Which of the following factors that make impaction surgery of tooth more difficult?
a. Mesioangular position, large follicle, wide periodontal ligament and fused conical roots.
b. Mesioangular position, large follicle, wide periodontal ligament and curved roots.
c. Distoangular position, large follicle, wide periodontal ligament and fused conical roots
d. Distoangular position, thin follicle, narrow periodontal ligament and divergent curved roots.
e. Soft tissue impaction, separated from second molar and inferior alveolar nerve
46. Which scalpel blade below is universally used for oral surgical procedures?
a. Number 2 blade. b. Number 10 blade.
c. Number 12 blade. d. Number 15 blade.
47. Moon face appearance is not present in:
a. Le Fort I. b. Le Fort II. c. Le Fort III d. Zygomatic complex.
48. The most likely cause of syncope following injection of local anesthetic agent with vasoconstrictor is:
a. Cerebral hypoxia b. Bradycardia
c. Allergic reaction to local anesthetic agent d. Allergic reaction to vasoconstrictor
49. All of the following are features of Le Fort III fracture except:
a. Bilateral subconjunctival hemorrhage and circumorbital ecchymosis
b. Mobility at frontozygomatic suture
c. Mobility at frontonasal suture
d. Mobility at infraorbital margin

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50. *Skin grafts are frequently used in vestibuloplasty procedures to prevent relapse. They do so by:*
- Causing inhibiting effect on fibroblasts present in the connective tissue
 - Forming a barrier thus preventing reattachment of muscles to periosteum
 - Promoting osteogenesis to maintain the newly achieved sulcus depth
 - All of the above
51. *What is the voltage frequency range for electro surgery in dental?*
- 1.5 – 7.5 million cycle per seconds.
 - 7.5 – 10 million cycle per seconds.
 - 10 – 25 million cycle per seconds.
 - 30 million cycle per seconds.
52. *A 60 years old patient need to make complete denture. He comes to your clinic. During clinical examination you found the patient has thick labial frenum with wide base. What kind of surgery you need to do?*
- Vestibuloplasty.
 - Z-plasty
 - Subperiostum incision
 - Deepmucoperiosteum incision
53. *Local contraindication of extraction*
- Patient recently received radiotherapy
 - Tooth in the malignant tumor
 - Both a and b
 - None of the above
54. *Bone graft material from one site to another site in the same person is called:*
- Allograft
 - Autograft
 - Alloplast
 - Xenograft
55. *Paresthesia of lower lip after surgical removal of lower 8 is due to irritation of inferior alveolar artery :*
- True
 - False
56. *A child patient visits your clinic for oral surgical procedure. While history taking you came to know that the child had a previous history of minor trauma with excessive bleeding. When you do test the result is showing prolong CT & BT & increase capillary fragility and Tournique test is positive. What is the diagnosis?*
- Hemophelia B.
 - Thrombocytopenia.
 - Vit.K deficiency.
 - Heamophelia A
57. *After you inject L.A for 2nd max molar patient, face becomes colorless with external swelling. Its due to:*
- Facial artery
 - Plexus vein.
 - Posterior alveolar nerve
 - Maxillary artery
58. *Last sensation to disappear after LA administration:*
- Pain
 - Deep pressure.
 - Temperature
 - Touch
59. *Contraindications of implant are all except:*
- Many dental caries.
 - Malignancy
 - Radiation therapy
 - HIV patient
60. *Dental implants are successful with minimum failure in:*
- Premaxilla area in the upper arch
 - Posterior area of the maxillary arch
 - Mandible between the mental foramen
 - Buccal shelf of the mandible.
61. *A patient comes with fracture because of blow in the right side of his face. He has ecchymosis around the orbit in the right side only and subjunctional bleeding in the maxillary buccal vestibule with limited mouth open. What is your diagnosis?*
- Le Fort 1
 - Le Fort 2
 - Le Fort 3
 - Zygomatic fracture.
62. *In case of traumatic intrusion of young permanent incisor, the treatment of choice is:*
- Surgical repositioning of intruded tooth and splinting.
 - To wait for re eruption of the intruded tooth
 - Slow orthodontic extrusion using light force.
 - Only antibiotic prescription and wait for eruption.

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e. Most difficult of extract:

- a. Mandibular 3rd molar with mesioangular fused roots
- b. Maxillary 3rd molar with disto angular fused roots
- c. Mandibular 3rd molar with distoangular angulation with divergent curve roots.
- d. Maxillary 3rd molar with buccally erupted

63. *Most frequent cause of fainting in dental office:*

- a. Vaso-vagal shock.
- b. Diabetes.
- c. Fear
- d. Local anesthesia

64. *Most frequent cause of loss of consciousness is:*

- a. Syncope.
- b. CO₂
- c. Hyper oxygen
- d. Local anesthesia

65. *Factors delay healing of wound:*

- a. Infection.
- b. Torn wound edges
- c. Strain.
- d. All of the above.

66. *Factor interfere with healing:*

- a. Poor suturing
- b. Infection
- c. Mobilization of wound edges
- d. All the above

67. *Dry socket happen after:*

- a. 24 hr
- b. 3- 5 days.
- c. 1 week
- d. 2 weeks

68. *The important factor that affects reimplantation of avulsed tooth is:*

- a. Contaminated roots.
- b. Time since the avulsion
- c. Skill of dentist
- d. Patient age

69. *Most sign of fracture of mandible:*

- a. Nose bleeding.
- b. Malocclusion.
- c. Parasthesia.
- d. Difficult mouth opening

70. *If epinephrine 1: 100 000 in 2% xylocaine, what is the amount of LA in mg?*

- a. 2 mg
- b. 1.8 mg
- c. 36 mg
- d. 0.36 mg

71. *A patient has hyperventilation in clinic. Most important cause:*

- a. Reduced of CO₂
- b. Increase CO₂
- c. Anxiety.
- d. Increased O₂

72. *Contraindication to extraction:*

- a. Cardiac patient
- b. Recent dialysis
- c. Hypertension
- d. Previous recent radio therapy.

Also, coagulopathy; uncontrolled diabetic; hematologic malignancy; leukemia; uncontrolled cardiac disease

73. *Base of the flap should be wide for:*

- a. Healing
- b. Better blood supply to the wound.
- c. For better suture placement
- d. Nothing relevant

74. *A 25 year old patient came to the clinic after he has an accident. X-ray revealed bilateral fracture of the condyle, but his mandible movements are normal. What will be your management?*

- a. Inter maxillary mandibular fixation.
- b. Fixed IMF for 6 weeks.
- c. Inter mandibular fixation.
- d. No treatment is performed only anti inflammatory drugs and observation.

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75. *What is the best media for keeping avulsion tooth?*
a. In water same temperature of room. b. In milk same temperature of room
c. In cold water. d. In cold milk.
76. *A child patient with the blood report of prolong PT & slightly increase clotting time & increase capillary fragility and Tournique test is positive. The diagnosis is:*
a. Hemophilia B. b. Hemophilia A c. Thrombocytopenia. d. Vit.K deficiency.
77. *A patient need complete denture. When you did the examination you notice the maxillary tuberosity will interfere with denture:*
a. Need 12 no blade to be extention. b. Partial thickness flap extend
c. Buccal & palatal suture under tension d. None of the above
78. *The indications of implantation:*
a. Diabetic patient. b. Loss of one tooth only with the adjacent teeth.
c. HIV patient d. Bruxism patient
79. *A patient suffering from a submandibular gland abscess, dentist made a stab incision and is fixing a rubber drain to evacuate the pus. The drain is sutured to:*
a. Intra-oral b. From angle of the mandible.
c. Between mylohyoid muscle d. All the above
80. *A 20 years old patient has avulsed tooth for 60 minimum. The management to return vascularity of the tooth:*
a. Scrap the surface of the root b. Place the tooth in sodium sulfide of 10%
c. Place it in sodium chloride then sodium sulfide. d. Wash it in running water
81. *A patient having bleeding disorder, but he has to go for tooth extraction. Which of the following favorable conditions is for doing the procedure?*
a. When PTT is 1 – 1.5 INR on the same day. b. When PTT is 2 – 2.5 INR on the same day.
c. When PT is 1 – 1.5 INR on the same day. d. When PT is 2 – 2.5 INR on the same day
82. *All of these are ways to give local anesthesia with less pain:*
a. Give it slowly. b. The needle size over than 25 gauge
c. Topical anesthesia. d. All the above
83. *A patient presented to you complains of click sound during open and close. There is no facial asymmetry except when opening. What is the diagnosis?*
a. Internal derangement with reduction. b. Internal derangement without reduction.
c. Rheumatoid arthritis. d. Ankylosis of TMJ
84. *Following teeth are impacted second most commonly after third molars?*
a. Mandibular canines. b. Maxillary canines.
c. Maxillary lateral incisors d. Mandibular second premolars.
85. *Which of the following local anesthetic agents should be avoided in pts with chronic heart failure?*
a. Lidocaine b. Tetracaine c. Bupivacaine d. Propoxycaine
86. *Minimum distance between the outer surfaces of two adjacent implants should be:*
a. 1 mm b. 2 mm c. 3 mm d. 4 mm

Section II: Topicwise Questions / Answers

87. The treatment of choice for recurrent pericoronitis involving partially impacted mandibular third molar is:
- a. Operculectomy
 - b. Antibiotic therapy
 - c. Removal of third molar
 - d. Warm saline rinses
88. When you give inferior dental block for pedo patient the angulations for the needle:
- a. 7 mm below the occlusal plane
 - b. 5 mm below the occlusal plane
 - c. 7 mm above the occlusal plane
 - d. At the occlusal plane
89. Best treatment for a conscious patient with partial airway obstruction who is breathing adequately and is capable of forceful coughing:
- a. Patient should be kept in supine position
 - b. Use finger sweep
 - c. Perform Heimlich maneuver
 - d. Patient should be left alone
90. A 25 years old patient with avulsed incisors 21. How long it should splint?
- a. 1 - 2 days
 - b. 1 - 2 weeks
 - c. 1 - 2 months
 - d. 3-4 months
91. A patient who wasn't anesthetized well in his 1st visit, next day he returns with a limited mouth opening (trismus). He must be anesthetized. What's the technique to be used for inferior alveolar nerve block?
- a. William's technique
 - b. Bercher's technique
 - c. Akinosi technique
 - d. All the above
92. A compound fracture is characterized by:
- a. Many small fragments
 - b. A star shaped appearance
 - c. An incomplete break in the bone
 - d. Communication with oral cavity
93. Contents of the anesthesia carpule:
- a. Lidocaine + epinephrine + Ringer's liquid
 - b. Lidocaine + epinephrine + distilled water.
 - c. Lidocaine + epinephrine only.
 - d. Anesthetic agent, vasoconstrictor, preservative, sodium chloride, distilled water
94. Avulsed tooth washed with tap water, it should be replaced again:
- a. Immediately.
 - b. After 20 mins
 - c. After 2 hours.
 - d. After 5 hours
95. What kind of suture used under the immediate denture?
- a. Horizontal matters suture
 - b. Vertical matters suture
 - c. Interrupted suture
 - d. Continuous locked suture.
96. A 18 year old girl had an accident. Her maxillary central incisors intruded. She has pain in her lip with superficial wound. What is the diagnosis of this?
- a. Subluxation
 - b. Laceration
 - c. Luxation.
 - d. Abrasion
97. When extracting all the teeth in one arch. Which is the correct order?
- a. 87654321
 - b. 12345678
 - c. 87542163
 - d. 36124578
98. A patient with lupus erythematosus and under cortisone. He needs surgical extraction of tooth. What should the surgeon instruct the patient?
- a. Take half of the cortisone dose at the day of operation.
 - b. Double the cortisone dose at the day of operation.
 - c. Take half of the cortisone dose day before and at the day of operation and day after
 - d. Double the cortisone dose day before and at the day of operation and day after.

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99. *Contraindication to extraction:*
- a. Previous recent radio therapy.
 - b. Hematologic malignancy
 - c. Coagulopathy
 - d. Uncontrolled diabetic.
 - e. All the above
100. *When do we do incision and drainage?*
- a. Indurated diffuse swelling.
 - b. Submucosal abscess
 - c. Sinus tract
 - d. Chronic apical periodontitis
101. *Which of the following is correct for a pregnant lady, who needs oral surgery?*
- a. Needs under GA
 - b. Needs steroid cover
 - c. Needs prophylactic cover.
 - d. None of the above.
102. *Radiographic evaluation in extraction except:*
- a. Relationship of associated vital structures.
 - b. Root configuration and surrounding bone condition.
 - c. Access to the tooth, crown condition and tooth mobility.
 - d. All of the above
 - e. a & b
103. *Root most commonly pushed in maxillary sinus:*
- a. Buccal of 7
 - b. Palatal of 6
 - c. Palatal of 7
 - d. Buccal of 6
 - e. Distal of 6 & 7
104. *What is the immediate treatment of traumatized teeth with open apex?*
- a. Extraction
 - b. Observe over time
 - c. Endo
 - d. None of the above
105. *If severe bony undercut exists, best treatment is:*
- a. Remove both undercut so that no undercut exists.
 - b. Remove undercut on one side.
 - c. Nothing but do only alveolar ridge contouring.
 - d. None of the above.
106. *All of these are ways to give L.A with less pain except:*
- a. Give it slowly
 - b. Stretch the muscle
 - c. Topical anesthesia
 - d. The needle size over than 25 gauge
107. *The following are indications of outpatient general anesthesia except:*
- a. ASA categories 1 & 2
 - b. Very young child
 - c. Cost increase
 - d. Patient admitted and discharged the same day
108. *Which of the following is the submandibular abscess:*
- a. Intraorally through the mylohyoid muscles.
 - b. Extraorally under the chin.
 - c. Extraorally at the most purulent site.
 - d. Extraorally at the lower border of the mandible.
109. *Patient with leukemia absolute neutrophilic count is 1700. What the oral surgeon should do?*
- a. Postpone another day
 - b. Work with prophylactic antibiotic.
 - c. Platelets transfusion
 - d. Do nothing

Section II: Topicwise Questions / Answers

110. *A patient with a history of subacute bacterial endocarditis is a medical problem in a surgery because of the possibility of:*
- a. Bacteremia. b. Septicemia. c. Hypertension. d. Mitral stenosis.
 e. Auricular fibrillation. 4. b, c and e.
1. a, b and c. 2. a, b and d. 3. a, d and e.
111. *The distinguishing feature of masticatory space infection is:*
- a. Pain. b. Dysphagia. c. Trismus. d. Swelling.
112. *Myelinated nerve fibers have all of the following properties except:*
- a. Conduction is slower in myelinated than in non myelinated fibers.
 b. Current discharges at nodes of Ranvier.
 c. Outer layer is of lipids.
 d. Depolarisation occurs only at nodes of Ranvier.
113. *Which of the following regarding thyroglossal duct cysts is true?*
- a. Called Lympho-epithelial cysts.
 b. Found anywhere along the pathway of the embryonic thyroglossal duct.
 c. Found in the posterior tongue.
 d. Clinically present in the lateral neck tissue.
114. *A patient comes to the clinic and you revealed seeing medical history that he had chronic renal failure; he was done hemodialysis. The treatment should be:*
- a. Before one day of dialysis. b. On the day of dialysis.
 c. After one day of dialysis. d. After one week of dialysis.
115. *Location to give inferior alveolar nerve block. The landmarks are:*
- a. Pterygomandibular raphy. (Flod) b. Cronoid notch.
 c. Inner and external oblique ridge d. All of the above.
116. *In systemic LA toxicity there is:*
- a. Post depression convulsion. b. Post convulsion depression.
 c. Convulsions. d. Hypertension.
117. *What's the first (early) sign of syncope?*
- a. Paleness. b. Nose bleeding. c. Increase heart rate d. Sweating
118. *A patient with a limited mouth opening. What's the LA technique to be used?*
- a. Bircher's technique. b. Gow-Gates technique
 c. William's technique. d. None of the above
119. *In hypertension patient the history is important to detect severity:*
- a. True. b. False.
120. *How will you check TMJ movement?*
- a. MRI b. Traditional tomography.
 c. Arthrography. d. Computerized tomography.
121. *How will you open an incision in a periapical abscess in a lower first molar?*
- a. The most bottom of the abscess. b. Upper margin of the abscess
 c. The most necrotic part of the abscess. d. Extra oral.

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122. Which is contraindicated to the general anesthesia?
- Patient with an advanced medical condition like cardiac.
 - Down's syndrome patient.
 - Child with multiple carious lesion in most of his dentition.
 - Child who needs dental care, but who's uncooperative, fearful.
123. A patient comes to you after trauma to 4 incisor teeth and they do not respond to electric pulp testing. IOPA X-ray of these tooth appears normal. What do you do?
- Pulpotomy,
 - Pulpectomy,
 - Extraction
 - No need for treatment
 - Do not do anything and put the patient on recall appointment
124. A child has avulsed tooth and has come to your clinic within 1 hour of avulsion. What are the chances of replantation to succeed?
- 20%
 - 40%
 - 50%
 - 80%
125. Patients on treatment with steroids are placed on antibiotics after oral surgical procedures, because:
- The patient is more susceptible to infection.
 - Antibiotics are synergistic to steroids.
 - Antibiotics inhibit Herkheimer reaction.
 - Antibiotics protect the patient from steroid depletion.
126. The postoperative complication after removal of third molar impaction is:
- Secondary hemorrhage.
 - Swelling.
 - Pain.
 - Alveolar osteitis.
 - All the above.
127. Bleeding of the socket following tooth extraction:
- Is always a capillary bleeding in nature.
 - Takes not less than half day in normal individual.
 - Is always favorable if it is primary type.
 - Can be due to the presence of a nutrient vessel.
- 1 and 2 are correct.
 - 1, 2 and 3 are correct.
 - 1, 3 and 4 are correct.
 - All are correct.
128. A displaced, unfavorable fracture in the mandibular angle region is a potentially difficult fracture to treat because of:
- Injury to neurovascular bundle
 - Malocclusion secondary to the injury.
 - Distraction of the fractured segments by muscle pull.
 - The density of bone in this region of mandible.
129. Dry socket appears after extraction:
- 24 hours.
 - 2-3 days.
 - 1 week.
 - 2-3 weeks
130. The infection will spread cervical in infection from:
- Lower incisors.
 - Lower premolars.
 - Lower 2nd and 3rd molars.
 - Upper incisors.
131. A 25 year old patient came to you after a football accident with fractured tooth. When you examine him you found fractured tooth at alveolar crest level. What's the best way to treat?
- Restore with amalgam subgingivally.
 - Crown lengthening.
 - Extrusion with orthodontics.
 - Wait for the tooth to erupt
132. Arrange the steps of cleft palate management:
- Measures to adjust speech.
 - Establish way for nursing and feeding.
 - Cosmetic closure.
 - Prevent collapse of two halves.
- 2-4-1-3
 - 3-2-4-1
 - 4-2-1-3
 - 1-2-3-4

Section II: Topicwise Questions / Answers

133. *An adult 20 years male, with soft tissues and dental trauma reveals severe pain in soft tissues with loss of epithelial layers and anterior upper centrals are intruded. The diagnosis is:*
- a. Laceration with luxation.
 - b. Abrasion with luxation.
 - c. Erosion with sub luxation.
 - d. Laceration with sub luxation
134. *Gillis approach is used in:*
- a. Open reduction of zygomatic fracture.
 - b. Mandible.
 - c. Closed reduction of zygomatic fracture.
 - d. None of the above
135. *Alveolar osteitis occur in extraction site after:*
- a. 1 day
 - b. 2 days
 - c. 1 week
 - d. 1 month
136. *Most used scalpel in oral surgery:*
- a. Bard Parker blade # 15
 - b. Bard Parker blade #20
 - c. Bard Parker blade #12
 - d. Bard Parker blade #16
137. *Avulsed tooth should be:*
- a. Splint (7-14) days
 - b. Splint (15- 25) days
 - c. Splint for 30 days
 - d. Splint for 60 days
138. *For removal of a root tip from the maxillary antrum, one should block the:*
- a. Infraorbital nerve.
 - b. Anterior superior alveolar nerve.
 - c. Posterior superior alveolar nerve.
 - d. Second division of trigeminal nerve.
139. *Non absorbable suture:*
- a. Catgut
 - b. Vicryl
 - c. Silk
 - d. None of the above
140. *When the posterior teeth are infected which lymph nodes become infected?*
- a. Sub mandibular.
 - b. Submaxillary.
 - c. Sub mental.
 - d. Sublingual.
141. *Most common site which drains pus is:*
- a. Mandibular central incisors
 - b. Mandibular canines
 - c. Mandibular first molar
 - d. Maxillary canine
142. *Needle aspiration of a central bone lesion is used to:*
- a. Feel for root surfaces.
 - b. Rule out a vascular lesion.
 - c. Determine the thickness of the buccal cortical plate.
 - d. All of the above.
143. *An abscess is a pathological cavity filled with pus and lined by:*
- a. A pyogenic membrane
 - b. Epithelium
 - c. Both
 - d. None of the above
144. *Mandibular fracture other complications:*
- a. Nasal bleeding
 - b. Exophthalmos
 - c. Numbness in the infraorbital nerve distribution
 - d. None of the above
145. *Hypercementosis and ankylosis is seen in:*
- a. Monocytic fibrous dysplasia
 - b. Hyperparathyroidism
 - c. Down syndrome
 - d. None of the above

9. Oral Surgery and Local Anesthesia

146. *Absorbable suture:*
- a. Nylon b. Vicryl c. Silk. d. None of the above
147. *Which are the symptoms of chronic pericoronitis except?*
- a. Grossly decayed tooth b. Difficult mouth opening
c. Pain d. Halitosis
148. *Forceps to hold flap when suturing:*
- a. Adson's forceps b. Russian forceps
c. Allis forceps d. Stills forceps
149. *After usage of sharp scalpels, needles, what's the best management:*
- a. Throw in a special container of sharp instrument. b. Sterilize and reuse
c. Through in ordinary plastic waste basket d. None of the above
150. *About CSF, which of the following are true?*
- a. Contains glucose b. Total quantity is 150 ml c. Contain chloride d. a+b
e. a+b+c
151. *A patient with renal dialysis the best time of dental tx is:*
- a. 1 Day before dialysis b. 1 Day after dialysis.
c. 1 Week after dialysis d. 1 Week before dialysis
152. *Which of the following factors interfere very much with wound healing?*
- a. Suture b. Diet c. Infection. d. All the above
153. *When resection the tip of root in apicosectomy the cut should be:*
- a. Perpendicular to the long axis of tooth b. Parallel to the long axis of the tooth
c. Acute angle. d. Obtuse angle
154. *The spread of infection in body is based on which of the following?*
- a. Immunity of host b. No. of bacteria
c. Virulent of microorganism d. All the above
155. *The splint period require for avulsed teeth:*
- a. 6 weeks b. 8 weeks
c. 1-2 months d. None of the above
156. *Vestibuloplasty is:*
- a. The deepening of the vestibule. b. Most commonly done in maxilla.
c. Most commonly done in mandible. d. Both 1 and 3.
157. *The bony enlargement of the maxillary tuberosity usually occurs in:*
- a. Upward direction. b. Anterior direction.
c. Mesial direction. d. Downward and lateral direction.
158. *What is the diagnosis of tooth with chronic pulpitis and radiopacity at the apex of a tooth?*
- a. Condensing osteitis b. Cemental dysplasia. c. Pulpolyp d. Periapical granuloma.
159. *If tooth or root is pushed during surgical extraction into maxillary sinus:*
- a. Leave it and inform the patient b. Remove it as soon as possible.
c. Follow the patient for 3 months. d. None of the above.

Section II: Topicwise Questions / Answers

160. *Management of tuberosity fracture during extraction of maxillary molar is:*
- a. Replace and suture.
 - b. Remove and suture with primary heal
 - c. Replace and suture intra alveolar by wire
 - d. Remove and leave to heal.
161. *Reduction of mandibular fracture is defined as:*
- a. Nonalignment and separation of the fracture segment.
 - b. Realignment of fracture segments.
 - c. Holding of the fracture segments in place.
 - d. Screw and bone plates.
 - e. Internal fixation.
162. *The incidence of nerve damage after third molar surgery is estimated to be:*
- a. 5% or less.
 - b. 10% to 15%.
 - c. 15% to 20%
 - d. 20% to 25%.
163. *The least likely mechanism for the nerve damage is:*
- a. Direct needle trauma.
 - b. Intra-neural hematoma formation..
 - c. Local anesthetic toxicity.
 - d. Stretching and binding of the nerve.
164. *High rate of fractures at canine area in the mandible due to:*
- a. Change direction of forces occurring here
 - b. Long canine root
 - c. Lower border is thin in this area
 - d. Alveolus is thin in this area
165. *Which of the following spaces are bilaterally involved in Ludwig's angina?*
- a. Submandibular + masticatory spaces
 - b. Sublingual+lateral pharyngeal space
 - c. sub mandibular +sublingual space
 - d. Submandibular+sublingual+submental
166. *What are the significant complications of untreated odontogenic infection?*
- a. Tooth loss
 - b. Spread to the cavernous sinus and brain
 - c. Spread to the neck with large vein complications
 - d. Spread to potential fascial spaces with compromise of the airway
 - e. Septic shock
167. *After you inject local anesthesia in maxillary 2nd molar, patient's face becomes colorless and there is an external swelling. This is due to:*
- a. Plexus vein.
 - b. Posterior alveolar nerve.
 - c. Facial artery.
 - d. None of the above
168. *During maxillary 3rd molar extraction the tuberosity is fractured. It was firmly attached to the tooth and cannot be separated. What is the management?*
- a. Remove it with the tooth.
 - b. Splint the tooth to the 2nd molar then re-extracted after 6 weeks.
 - c. Remove and suture with primary heal
 - d. Replace and suture intra alveolar by wire
169. *Wiring the upper and lower teeth together is called:*
- a. Internal fixation.
 - b. An open reduction.
 - c. Displacement.
 - d. External fixation
 - e. None of the above
170. *Suture commonly used in oral cavity:*
- a. Black silk.
 - b. Catgut.
 - c. Chromic.
 - d. nylon
171. *Tooth fracture during extraction may occur due to:*
- a. None vital tooth.
 - b. Diabetic PT.
 - c. Improper holding by forceps.
 - d. a and c

9. Oral Surgery and Local Anesthesia

172. *Mobility in midface with step deformity in front zygomatic suture. Diagnosis:*
- | | |
|--|-----------------|
| a. Le Fort II. | b. Le Fort III. |
| c. Bilateral zygomatic complex fracture. | d. Le Fort I |
| a. a+b | b. a+c |
| c. a+c | d. d+c |
173. *What is the first sign if there is fracture in the face in x-ray?*
- | | | | |
|---------------------|------------|---------------------|-------------------|
| a. Fluid paranasal. | b. Suture. | c. Overlap of bone. | d. All the above. |
|---------------------|------------|---------------------|-------------------|
174. *Infection of which tooth has more chances of traveling to clavicles*
- | | |
|------------------------|--|
| a. Mandibular incisors | b. Maxillary canine |
| c. Maxillary premolar | d. Maxillary 1st molar and 2nd molar teeth |
175. *Which of the following is principle of elevator in tooth extraction?*
- | | | | |
|--------------------|------------|----------|------------------|
| a. Wheel and axle. | b. Wedging | c. Lever | d. All the above |
|--------------------|------------|----------|------------------|
176. *The most common complication after extraction for diabetic patient is*
- | | |
|--------------|---------------------|
| a. Infection | b. Severe bleeding |
| c. Edema | d. All of the above |
177. *Average time duration for dry socket to appear in extraction socket is?*
- | | | | |
|-------------|-------------|-----------|------------|
| a. 24 hours | b. 3-5 days | c. 1 week | d. 2 weeks |
|-------------|-------------|-----------|------------|
178. *For removal of palatally impacted maxillary canine, palatal flap:*
- a. Should start with a vertical incision in the midline
 - b. Should be raised after giving a semilunar incision over the crown of impacted tooth
 - c. Should be reflected from the necks of teeth
 - d. Should not be raised
179. *Which of the following endodontic failures may be retreated only with surgery?*
- | | |
|----------------------------|---------------------------------------|
| a. Apical fracture of root | b. Persistent periapical radiolucency |
| c. Post and core. | d. All the above |
180. *The color of curing light used for blood coagulation is:*
- | | | | |
|---------|--------|----------|------------------|
| a. Blue | b. Red | c. Green | d. Natural light |
|---------|--------|----------|------------------|
181. *When removing lower molar:*
- | | |
|--|--|
| a. Occlusal plane perpendicular To the floor | b. Buccolingual direction to dilate socket |
| c. Mesial then lingual | d. All the above |
182. *Trauma lead to fracture in the root between middle cervical and apical third:*
- | | |
|-------------------|-------------------|
| a. Poor prognosis | b. Good prognosis |
|-------------------|-------------------|
183. *To drain submandibular abscess:*
- | | |
|--|---|
| a. Intraorally through the mylohyoid muscles | b. Extraorally at the lower border of the mandible. |
| c. Extraorally under the chin. | d. Extraorally at the most purulent site. |
184. *Hematoma immediately following posterior superior alveolar nerve block anesthesia occurs due to damage to:*
- | | |
|------------------------------|----------------------------|
| a. Internal maxillary artery | b. Maxillary vein |
| c. Pterygopalatine artery | d. Pterygoid venous plexus |

Section II: Topicwise Questions / Answers

185. For discharged BP blades after oral surgery is done by:

- a. Discharged paper basket
- b. Designed sharp instrument container
- c. Disinfectant in auto clave then throw
- d. Put it in multifoil

186. For continuous evacuation of pus in a mandibular space infection, the incision and drainage will be done in:

- a. The most necrotic part of the abscess
- b. The most bottom of the abscess
- c. Intra oral
- d. All the above

187. What's the best implant type allowing osseointegration?

- a. Transosteal implant
- b. Subperosteal implant
- c. Root-form endosseous implant.
- d. All the above

188. A patient suffering from a submandibular gland abscess, dentist made a stab incision and is fixing a rubber drain to evacuate the pus. The drain is sutured to:

- a. Intra-oral
- b. From angle of the mandible
- c. Between myloids muscle
- d. All the above

189. Contraindication of extraction:

- a. Patient recent receive radiotherapy
- b. Tooth in the malignant tumor
- c. Recent history of MI
- d. All the above

190. What is the use of Addison forceps?

- a. Helps in flap surgery
 - b. Third molar surgery
 - c. Suturing the tissues
 - d. Remove epulis fissuratum
- a. a+b b. b+c c. a+d d. c+d

191. Tooth fracture during extraction may occur due to:

- a. Nonvital tooth
- b. Excessive pressure
- c. Improper holding by forceps
- d. All the above

192. What is the difference between subluxation and concussion?

- a. Concussion has got a line of bleeding and no mobility or displacement of teeth.
- b. Concussion has mobility & displacement of teeth and no bleeding.
- c. Subluxation has got no mobility of teeth
- d. Subluxation has mobility of teeth.

193. Rigid splinting of tooth is not advised in treatment of luxated tooth to prevent:

- a. Calcium metamorphosis.
- b. Ankylosis
- c. Root resorption
- d. Pulp necrosis

194. Which are the following appliances used for immobilization of fracture mandible?

- a. Stents.
- b. Obturators.
- c. Splints
- d. Speech aids.

195. Which of the following will occur as first symptoms in hypovolumic shock?

- a. Vomiting
- b. Nausea
- c. Mental confusion
- d. Pain

196. Endocarditis prophylaxis is not recommended for following condition:

- a. Isolated secundum atrial septal defect.
- b. Mitral valve prolapse without regurgitation.
- c. Patent ductus arteriosus.
- d. All of the above.

197. Submandibular abscess drainage will be done in which of the following ?

- a. Intraorally through the mylohyoid muscles.
- b. Extraorally under the chin.
- c. Extraorally at the most purulent site.
- d. None of the above

9. Oral Surgery and Local Anesthesia

198. *A patient taking steroid drugs before extraction impacted third molar. Dentist must have administered to avoid adrenal crisis by:*
- a. Administer supplemental hydrocortisone IV or IM
 - b. Administer prophylactic antibiotic IM
 - c. Administer LA double dose
 - d. All the above
199. *Principle of dental elevator is:*
- a. Wheel and axis
 - b. Wedging
 - c. Lever
 - d. All the above
200. *Healing by secondary intention cause:*
- a. There is space between the edges filled by fibrous tissue
 - b. Leading to scar formation
 - c. a and b
 - d. None of the above
201. *The post operative complication after the removal of impacted third molar is:*
- a. Secondary hemorrhage.
 - b. Swelling.
 - c. Pain.
 - d. Alveolar osteitis.
 - e. All of the above.
202. *Which of the following is most difficult of extract?*
- a. Maxillary 3rd molar with mesioangular fused roots
 - b. Mandibular 3rd molar with mesioangular fused roots
 - c. Maxillary 3rd molar with mesioangular with divergent curve roots
 - d. Mandibular 3rd molar with mesioangular divergent curve roots
203. *Which of the following is a contraindication to extraction?*
- a. Cardiac patient
 - b. Previous recent radio therapy
 - c. Diabetic patient
 - d. Pregnancy
204. *DNA only infects humans but RNA doesn't infect humans:*
- a. True.
 - b. False.
205. *The most common immediate treatment reported for fractured teeth was:*
- a. 25%.
 - b. 50%.
 - c. 82%.
 - d. 95%.
206. *Which of the following is true about CPR?*
- a. Is best performed in the dental chair.
 - b. Should be performed on all patients experiencing chest pain.
 - c. Is more efficient when using a full mask, delivering 100% oxygen, than with the mouth to mouth technique
 - d. Is beyond the medico legal responsibility of the practicing dentist.
207. *Transverse fracture of developing teeth in the mixed dentition can be managed by:*
- a. Forced eruption.
 - b. Extraction and placement of a removable partial denture.
 - c. Placement of single tooth.
 - d. All of the above.
208. *Inferior alveolar nerve block is absolutely contraindicated in patients suffering from one of the following diseases:*
- a. Thrombocytopenia.
 - b. Hemophilia.
 - c. Hypoprothrombinemia.
 - d. Von Willebrand's disease.

Section II: Topicwise Questions / Answers

209. *Mobility of the midface bilateral in frontozygomatic suture:*
 a. Le Fort III fracture
 b. Le Fort II fracture
 c. Le Fort I fracture
 d. Zygoma fracture
210. *A patient came with small trauma of the lower lip and discoloration of his tooth. What is the name of this condition?*
 a. Abrasion & subluxation
 b. Abrasion and luxation
 c. Laceration & subluxation
 d. Laceration and luxation
211. *Ecchymosis of orbit is the sign of which of the following fracture?*
 a. Le fort 1
 b. Le Fort 2
 c. TMJ fracture
 d. Zygomatic fracture
212. *Patients of heart failure are best treated in:*
 a. Early morning.
 b. Late morning.
 c. Afternoon.
 d. Early evening.
213. *Acute periapical cyst and acute periodontal cyst are differentiated by:*
 a. Vitality test.
 b. Radiograph.
 c. Clinical examination.
 d. All the above
214. *If tooth or root is pushed into maxillary sinus, during surgical extraction, which of the following surgeries you will do to remove the root?*
 a. Willis technique
 b. Caldwell luc
 c. Sinus floor lift
 d. All the above.
215. *On blood clotting heparin acts for:*
 a. 4 to 6 hours.
 b. 2.8 to 12 hours.
 c. 3.12 to 16 hours.
 d. 4.16 to 24 hours.
216. *Post graduate student use MTA the prognosis depend on:*
 a. Prevent immediate suture
 b. Disturbance during closure of wound.
 c. Using a flab
 d. All the above
217. *A 55 year old patient needs multiple extractions, after extraction what will you do first?*
 a. Suturing.
 b. Primary closure should be obtained
 c. Alveoplasty should be done in all cases.
 d. All the above
218. *Which of the following results may be expected following surgery when both buccal and lingual cortical plates have been lost?*
 a. Ankylosis.
 b. Osteocementosis.
 c. Normal bone regeneration.
 d. Scar tissue formation.
219. *A patient presented to you complains of pain and tensed muscle at TMJ area. When he opens his mouth it deviates to the right side but the patient does not complain of clicking. What is the diagnosis?*
 a. Internal derangement with reduction
 b. Internal derangement without reduction
 c. Rheumatoid arthritis
 d. None of the above
220. *The choice of local anesthesia depends on:*
 a. Diameter of the nerve
 b. Structure of the bone
 c. Number of branches
 d. Type of L.A agent chemistry.
221. *The choice of local anesthesia technique is influenced by:*
 a. Chemical composition of anesthesia.
 b. Location of the nerve.
 c. Bone structure.
 d. All the above

9. Oral Surgery and Local Anesthesia

222. A 28 years male with soft tissue and dental trauma reveals severe pain in soft tissues with loss of epithelial layers and anterior upper centrals are intruded. The diagnosis is:
- Abrasion with luxation
 - Errosion with sub luxation
 - Ulceration with luxation
 - Ulceration with subluxation
223. In case of multiple teeth extraction, which teeth have to be extracted last?
- Maxillary incisors.
 - Mandibular incisors.
 - Maxillary canines.
 - Mandibular canines.
224. Which of the following statements is false in relation to myofacial pain dysfunction syndrome?
- Mainly affects young females
 - Is caused by muscle fatigue due to chronic oral habits as grinding and clenching.
 - Treatment involves construction of occlusal guard and stress free emotional condition.
 - The perioral musculature becomes hypotonic.
225. Maxillo facial accident patient transferd in which postion:
- Lateral position
 - Supine position
 - Inclined position
 - Declined position
226. Implant is contraindicated in which patient?
- Uncontrolled Type II diabetes
 - Controlled diabetics
 - Patient with cardiac problem
 - More than 3 tooth missing
227. In HIV patient the implant will be a failure. Why?
- Patient immune level is low
 - More chance of infection
 - Bone healing will be less
 - None of the above
228. A patient with diuretics medication for his cardiac problem. What will be his cardiac problem?
- Congestive heart failure
 - MI
 - Valvular disease
 - Hypertension
229. Trimus present due to the infection of pharengeal space. This will irritate the musle?
- Medial pterycoid
 - Lateral pterycoid
 - Masseter
 - Posterior pherengeal
230. Bone graft from different animal is called:
- Xenograft
 - Allo graft
 - Autograft
 - Hetero graft
231. Hypovolemic shock first symptom will be:
- Tachycardia
 - Vasoconstriction
 - Hypotension
 - Bradycardia
232. The coolent used for minor surgeries with bone cutting with burs:
- Saline used as coolent and irrigant
 - Water areosal is enough in minor surgeries
 - NaOCl used as coolent
 - No need for coolent in minor surgeries
233. Nitrous oxide affects which of the following?
- Vit A.
 - Vit B₆.
 - Vit B₁₂.
 - Vit C.
234. What are all complications of posterior superior alveolar nerve block technique?
- Hematoma
 - Trimus
 - Post operative pain
 - All the above
235. Which of the following best describes the anesthetic effects of a posterior superior alveolar nerve block?
- Pulpal anesthesia of the maxillary second and third molar.
 - Pulpal anesthesia of the maxillary first molar
 - Pulpal anesthesia of the maxillary first and second premolars.
 - Pulpal anesthesia of the second premolar.

Section II: Topicwise Questions / Answers

236. *For the best prognosis of avulsed tooth:*
- a. Reposition it and splint rigidly
 - b. Reposition and splint flexibly
 - c. Radiographic follow up and figure of eight wiring
 - d. Alveolar wiring
237. *Bone healing is done after extraction:*
- a. By fibrous tissue
 - b. By growth factor accumulation
 - c. By osteogenesis
 - d. Epithelial proliferation
238. *Decreased effect of local anesthesia in inflammation is due to:*
- a. Presence of infection
 - b. Decrease in tissue pH
 - c. Increased blood supply
 - d. Presence of inflammatory cells
239. *Graft best suited for augmentation of atrophied mandible is:*
- a. Autogenous iliac crest
 - b. Autogenous rib
 - c. Freeze dried bone graft
 - d. Alloplast
240. *A patient presents in the OPD with history of road traffic accident. He had bilateral subconjunctival hemorrhage, increased intercanthal distance. On intraoral examination, maxilla was mobile and the mobility was felt at frontonasal suture and bilateral infraorbital margin. The most likely diagnosis for the patient is:*
- a. Le Fort - I fracture
 - b. Le Fort - II fracture
 - c. Le Fort - III fracture
 - d. Le Fort - IV fracture
241. *Which of the following fractures is most likely to cause paresthesia of infra-orbital nerve?*
- a. Le Fort-I fracture
 - b. Le Fort-II fracture
 - c. Le Fort-III fracture
 - d. Isolated zygomatic arch fracture
242. *Local contraindication of extraction except:*
- a. Recent history of radiotherapy
 - b. Tooth in the malignant tumor
 - c. Severe alveolar bone loss
 - d. All the above
243. *Most impacted tooth is:*
- a. Maxillary 2
 - b. Maxillary 8
 - c. Mandibular 8
 - d. Maxillary 3
244. *The following medical conditions may precipitate syncope:*
- 1. Hypoglycemia.
 - 2. Mild hyperglycemia.
 - 3. Anti hypertensive drugs with gang ionic blocking agent.
 - 4. Antidepressant therapy.
- a. 1 only is correct.
 - b. 1 and 2 are correct.
 - c. 2, 3 and 4 are correct.
 - d. 1, 2, 3 and 4 are correct.
245. *A patient presented to you complains of click during open and close. There is no facial asymmetry except when opening, What is the diagnosis?*
- a. Internal derangement with reduction
 - b. Internal derangement without reduction
 - c. Rheumatoid arthritis
 - d. MFDS
246. *Upon opening an incision in a periapical abscess in a lower 1st molar, you open:*
- a. The most bottom of the abscess
 - b. The most necrotic part of the abscess
 - c. Extra oral
247. *A patient has anaphylactic shock after taking penicillin. You have to give him*
- a. Epinephrin I.V
 - b. Adrenalin I.M
 - c. Cortizone I.M
 - d. Saline I.V

248. *The infection will spread cervically from:*

- a. Lower incisors
- c. Lower 2nd and 3rd molars

- b. Lower premolars
- d. Upper incisors

249. *Implant is contraindicated in which of the following?*

- a. 20 year old patient with missing 21
- c. 50 year old diabetic patient with missing 36

- b. 5 year old patient with missing 62
- d. 55 year old cardiac patient with missing 45, 46

250. *Face muscles are not working in the side of the face after inferior nerve block injection, you injected in:*

- a. Infra orbital nerve.
- c. Pherengeal plexus

- b. Facial nerve branches in parotid capsule
- d. PSA nerve

251. *Diagnostic finding of unilateral condylar fracture is:*

- a. Anterior open bite.
- c. Posterior open bite on the contralateral side.

- b. Posterior open bite on the ipsilateral side.
- d. None of the above

252. *Which is contraindicated to the general anesthesia:*

- a. Patient with an advanced medical condition like cardiac
- b. Down's syndrome patient
- c. Child with multiple carious lesion in most of his dentition
- d. Child who needs dental care, but who's uncooperative, fearful...etc.

253. *Most common site of pus drain in mouth:*

- a. Mandibular central incisors
- c. Mandibular first molar

- b. Mandibular canines
- d. Mandibular premolar

254. *Which of the following is a floating fracture of middle third of facial skeleton?*

- a. Pyramidal fracture.
- c. Suprazygomatic fracture.

- b. Transverse fracture.
- d. Le Fort I fracture.

255. *Treatment of choice in dry socket:*

- a. Placement of suture to approximate flaps.
- b. Curettage to remove granulation tissue.
- c. Systemic antibiotics.
- d. Use of warm saline mouthrinse or dilute solution of hydrogen peroxide.

256. *A patient taking 10 mg prednisolone daily. The line of treatment for extraction of lower molar is?*

- a. Double the dose one day before the extraction
- b. Double the dose on the day of extraction
- c. Double the dose one day after the extraction
- d. Double the dose one day before, on the day and one day after the extraction

257. *A patient having MTA on anterior teeth for good prognosis?*

- a. Proper wound closure
- c. Proper R/F followup

- b. Precarious during flap surgery
- d. Antibiotic coverage

258. *After extraction of lower third molar, which suture forceps is used for suturing?*

- a. Hemostat curved forceps
- c. Killner's forceps

- b. Russian forceps
- d. Addsons's forceps

259. *Excision of margins of necrotic bone overlying a focus of osteomyelitis is called as:*

- a. Sequestrectomy.

- b. Trephination.

- c. Saucerization.

- d. Decortication.

Section II: Topicwise Questions / Answers

260. *Avulsed teeth with replantation, dentist evaluate prognosis with?*
 a. Flexible wire b. Ridge wire c. In follow-up PD wire d. All the above
261. *HbS antigen or antibody means:*
 a. Hepatitis A b. Hepatitis B c. Hepatitis C d. Hepatitis D
262. *Anesthesia by infiltration technique will be successful in following mandibular tooth:*
 a. Molar b. Incisor c. Canine d. Premolar
263. *What is the type of fracture that causes mobility of the mid face?*
 a. Le Fort II. b. Le Fort III. c. Zygomatic fracture. d. Le Fort I
264. *Fracture of maxillary tuberosity is treated by:*
 a. Replaced. b. Removed. c. Alveoplasty d. No treatment.
265. *During mentoplasty doctor should take care for injury of what nerve?*
 a. Mental nerve b. Lingual nerve c. Inferior alveolar nerve d. Facial nerve
266. *Which of the following is a non-absorbable suture?*
 a. Nylon b. Plain catgut. c. Chromic catgut. d. All the above.
267. *The best time to do dental surgical procedures for the pregnant lady is:*
 a. First to third month. b. Second fifth month.
 c. Forth to sixth month d. Seventh to ninth month.
268. *If the patient is taking heparins. you should perform the surgery after:*
 a. 1 hr. b. 2 hr. c. 4 hr. d. 6 hr.
269. *While doing the extraction of upper posterior tooth, the root is pushed inside the maxillary sinus. What will you do?*
 a. Leave it and inform the patient b. Remove it as soon as possible
 c. Follow the patient for 3 months d. None of the above
270. *Pain during injection of local anesthesia in children could be minimized by:*
 a. Slowly injection. b. Talking to the child during injection.
 c. Using long needle. d. a+b.
271. *Commonest cause of TMJ ankylosis is:*
 a. Trauma. b. Development disturbances.
 c. Infections. d. Atrophy.
272. *Step deformity of mandibular body fracture may be due to:*
 a. Forward pull of lateral pterygoid muscle. b. Upward pull of masseter and temporals.
 c. Inward pull of medial pterygoid muscle. d. Downward pull of geniohyoid and mylohyoid.
273. *A patient has dull pain and discomfort in right preauricular area on opening the mouth. On opening the mouth, mandible deviates to the right with limited lateral movements and no crepitus or popping sound is heard. Reason could be:*
 a) Osteoarthritis b) MPDS
 c) Articular derangement with reduction d) Articular derangement without reduction

9. Oral Surgery and Local Anesthesia

274. *Partsch II operation is:*
- a. Marsupialization.
 - b. Enucleation.
 - c. Combined 1 and 2.
 - d. Marsupialization by opening into nose or antrum.
275. *Complications of PSA nerve block:*
- a) Hematoma
 - b) Injury to pterygoid plexus
 - c) Parasthesia of palate
 - d) a+b
276. *Autogenous rib graft for ridge augmentation is usually harvested from:*
- a. First rib.
 - b. Second and fourth rib.
 - c. Sixth and ninth rib.
 - d. Eleventh and twelfth rib.
277. *Best media for the avulsed tooth:*
- a. Tap water.
 - b. HBSS
 - c. Saliva.
 - d. Milk.
278. *The compression / relaxation cycle of external cardiac compression should be repeated:*
- a. 2 times / second
 - b. 60 times / minute
 - c. 76 times / second
 - d. 100 times / minute.
279. *One of the primary considerations in the treatment of fractures of the jaw is:*
- a. To obtain and maintain proper occlusion
 - b. Test teeth mobility
 - c. Vitality
 - d. Embedded foreign bodies
280. *A patient wears complete denture for 10 years and now he has cancer in the floor of the mouth. What is the first question that the dentist should ask?*
- a. Is your denture ill fitted?
 - b. Do you smoke?
 - c. Do you take alcohol?
 - d. Does your denture impinge the oral mucosa?
281. *A patient who sustained a subcondylar fracture on the left side would be:*
- a. Unable deviate to the left side.
 - b. Unable deviate to the right side.
 - c. No deviation
 - d. Unable to open mouth
282. *Upon giving a lower mandible anesthesia, you notice the patient's eye, cheek corner of the lip are uncontrolled. What's the reason?*
- a. Parasthesia of the facial nerve.
 - b. Parasthesia of the buccal nerve
 - c. Parasthesia of the mandibular nerve.
 - d. Parasthesia of the orbital nerve.
283. *Where does the breakdown of amide type LA occurs?*
- a. Kidneys.
 - b. Liver.
 - c. Lungs
 - d. GIT
284. *What is the normal prothrombin time?,*
- a. 11 – 15 sec.
 - b. 25 – 40 sec.
 - c. 1 min
 - d. 15 min
285. *Patient is on 10 mg corticosteroids (prednisolone) for months, need dental extraction. You will:*
- a. Give antibiotics.
 - b. Double doze the day of extraction.
 - c. Double doze one day before, the same day, and day after surgery.
 - d. Take no action.
286. *Trauma caused fracture of the root at junction between middle and cervical third:*
- a. Do endo for coronal part only.
 - b. Do endo for the both coronal and apical
 - c. Splint together.
 - d. Extraction
287. *One of the prim considerations in the treatment of fractures of the jaw is:*
- a. To obtain and maintain proper occlusion.
 - b. Test teeth mobility.
 - c. Vitality.
 - d. Embedded foreign bodies.

Section II: Topicwise Questions / Answers

288. *Tooth with ankylosis:*
 a. No PDL b. Caused by trauma c. Extracted surgically d. All of the above
289. *Acute periapical abscess is associated with:*
 a. Swelling b. Widening of PDL c. Pus discharge d. All the above
290. *Alveolectomy is one of the commonly used procedures. It is:*
 a. Closure of an orotracheal fistula.
 b. Removal of alveolar bone.
 c. Reconstruction of mucoperiosteum and alveolar bone.
 d. None of the above.
291. *The infection will spread cervically from:*
 a. Lower incisors b. Lower premolars
 c. Lower 2nd and 3rd molars d. Upper incisors
292. *Swelling in the side of the face after inferior nerve block injection, so you have injected in:*
 a. Facial artery's branches in parotid gland b. Mandibular artery
 c. Maxillary artery d. None of the above
293. *A patient has had an angina attack before undergoing a dental procedure. What is the reason for attack of angina?*
 a. Fear. b. Patient was in fasting
 c. Patient had heavy breakfast d. All the above
294. *All of the following drugs in an emergency kit are considered essential, except:*
 a. Epinephrine b. Analgesic c. Antihistamine d. Anticonvulsant
295. *Which of the following is true about sphenomandibular ligament*
 a. It is medial to insertion of needle for infra alveolar nerve block
 b. It is lateral to insertion of needle for infra alveolar nerve block
 c. It is above the insertion of needle for infra alveolar nerve block
 d. It is below the insertion of needle for infra alveolar nerve block
296. *After dental surgery patient is asked to rinse out his mouth for:*
 a. 2 hours. b. 8 hours. c. 16 hours. d. 24 hours.
297. *A patient on a long term steroid therapy (3 years) and you want to perform an extraction? What dose of medicine you will ask the patient to take?*
 a. Double dose for 2 days
 b. On day of extraction double the dose
 c. Half the dose on day of extraction
 d. Double dose 2 days before the day of extraction till 2 days after the extraction.
298. *An adult had an accident, maxillary central incisors intruded. What is the trauma's classification?*
 a. Luxation. b. Subluxation c. Laceration d. Abrasion
 e. Contusion
299. *Principle of elevator use of all the following except:*
 a. Wheel and axis. b. Wedging the socket wall.
 c. Wedging. d. Lever.

9. Oral Surgery and Local Anesthesia

300. *Inferior alveolar nerve block alone can be used in:*
- Pulpotomy of 3rd molar.
 - Apicoectomy of 3rd molar.
 - Extraction of 1st molar.
 - Root resection of 1st molar.
301. *A pregnant lady needs oral surgery:*
- Under GA
 - Under steroid cover
 - Second trimester
 - Third trimester
302. *Radiographic evaluation in extraction of tooth:*
- Relationship of associated vital structures.
 - Root configuration
 - Surrounding bone condition.
 - All of the above
303. *Root most commonly pushed in maxillary sinus:*
- Buccal of 7
 - Palatal of 6
 - Palatal of 7
 - Buccal of 6
 - Distal of 6 & 7
304. *When do we do incision and drainage?*
- Indurated diffuse swelling.
 - Sinus tract
 - Chronic apical periodontitis
 - None of the above
305. *A pregnant lady may need which of the following during oral surgery:*
- Needs prophylactic antibiotic.
 - Needs under GA
 - Needs steroid cover
 - None of the above.
306. *The most common activity associated with percutaneous injury of the dentist is:*
- Suturing.
 - Anesthesia injection.
 - Handpiece dig.
 - Trimming impressions.
307. *Wiring the upper and lower teeth together is called:*
- Internal fixation.
 - An open reduction.
 - Intermaxillary fixation.
 - Displacement.
 - External fixation.
308. *The incidence of nerve damage following mandibular third molar surgery is estimated to be:*
- 5% or less.
 - 10% to 15%.
 - 15% to 20%
 - 20% to 25%.
309. *Which of the following will cause nerve damage?*
- Direct needle trauma.
 - Intraneural haematoma formation.
 - Stretching and binding of the nerve.
 - a+b
310. *Factors that make impaction surgery of lower third molar more difficult is?*
- Mesioangular position, large follicle, wide periodontal ligament and fused conical roots
 - Mesioangular position, large follicle, wide periodontal ligament and curved roots
 - Distoangular position, large follicle, wide periodontal ligament and fused conical roots
 - Distoangular position, thin follicle, narrow periodontal ligament and divergent curved roots
 - Soft tissue impaction, separated from second molar and inferior alveolar nerve
311. *The nerve which supplies the tongue and may be anesthetized during inferior alveolar nerve block injection is*
- V.
 - VII.
 - IX.
 - XII.
312. *Safe months to treat pregnant ladies*
- 1-3
 - 4-6.
 - 7-9.
 - 8-10
313. *Rigid fixation in a tooth which have no mobility but have luxation, will cause:*
- Tooth resorption.
 - Fracture of root
 - Ankylosis
 - Periapical abscess

Section II: Topicwise Questions / Answers

314. Which of the following materials is anti hemorrhagic agent?
a. Oxidized cellulose
b. Zinc oxide
c. Atrenaline
d. Lactose
315. During anesthesia what's true:
a. The needle should be inserted before cartridge
b. The needle cap is inserted before the stopper
c. Excessive force should be applied to allow insertion of the cartridge into the harpon
d. All the above
316. Material for perforation in mandibular molar:
a. MTA
b. Zinc oxide
c. Calcium hydroxide
d. GIC
317. Which of the following instrument is used for disimpacting the maxilla in Le Fort fractures?
a. Walsham's forceps.
b. Asche's forceps.
c. Both 1 and 2.
d. Rowe's forceps.
318. Hypoglycemia will cause:
a. Coma
b. Seizures
c. Tachycardia
d. All the above
319. Which of the following is submandibular approach to TMJ?
a. Risdon's approach.
b. Dingman's approach.
c. Blair's approach.
d. Thomas approach.
320. A patient on corticosteroid therapy should take antibiotic, because:
a. More susceptible to infection
b. Less susceptible to infection
c. There is no chance of infection
d. None of the above
321. Tobacco should be considered a risk factor when planning treatment for patient who require:
a. Implants.
b. Periodontal surgery.
c. Oral surgery.
d. Esthetic treatment.
e. All of the above.
322. Which of the following is the cause of immediate type allergic reaction to latex products?
a. Accelerator.
b. Antioxidants.
c. Latex protein.
d. Nickel.
323. A pregnant lady needs oral surgery:
a. Needs prophylactic antibiotic.
b. Needs under GA.
c. Needs steroid cover.
d. None of the above.
324. Hyperventilation in dental office:
a. Anxiety.
b. Low CO₂.
c. High CO₂.
325. A patient has gunshot, results in Le Fort 2, discharge from nose CSF. What it contains?
a. High protein
b. High glucose
c. High cholesterol
d. Blood cells
326. A patient with hemophilia A came to the clinic, in discomfort and mobile D. On radiograph distal root is not absorbed well, but a part of 4 appear from gingiva beside it. What is your management?
a. Leave it
b. Extraction
c. Extraction then suture
d. Refer it to specialist
327. What is Obwegeser's technique?
a. Extraction technique
b. Suture technique
c. Used to treat cleft palate
d. Orthonagthic surgery

9. Oral Surgery and Local Anesthesia

328. *Doctor wants to make incision in mylohyoid ridge, avoid trauma to:*
- a. Mylohyoid nerve b. Lingual c. Infer. alveolar d. Long buccal
329. *Difference between Akinosi and Gow-Gates technique:*
- a. Gow-Gates technique is indicated for use in quadrant dentistry in cases where soft-tissue anesthesia from the most distal molar to midline is needed, and where conventional inferior alveolar nerve block (IA block) is unsuccessful.
b. Akinosi tech. is the closed mouth technique used for extraction with trismus pts.
c. a+b
d. None of the above
330. *Extraction socket healing is by:*
- a. Primary healing b. Secondary healing c. Tertiary healing
331. *During tooth removal, half root fracture inside the socket. Which elevator can be used to remove it?*
- a. Apexo elevator b. Crane pick c. Root tip pick d. All the above
332. *A patient not anesthetized on 1st visit, 2nd visit he has trismus. What should you do?*
- a. Vaze technique b. Akinosi technique
333. *A patient with pain and swelling in buccal surface and tooth non vital and patient jump by percussion:*
- a. Necrotic with apical abscess b. Pulipitis
c. Periodontitis d. Occlusal trauma
334. *LA in pregnant ladies, advisable:*
- a. With adrenaline b. Without adrenaline c. Not advisable d. No effect with LA
335. *A patient comes to you and you give him inf. nerve block and he comes to you the day after procedure with trismus from anesthesia. Which space was affected?*
- a. Sub mandibular b. Sub massetric c. Infratemporal fossa
336. *Local anesthesia in periodontal ligament. What effect is on pulp?*
- a. Cease for 30 min b. The same c. Great reduce d. Slight reduce
337. *WHich of the following is NOT a sign of occlusal trauma?*
- a. Fremitus b. Gingival recession
c. Widening of periodontal ligament d. Tooth migration
338. *The most common initial sign of occlusal trauma:*
- a. Tooth mobility b. Tooth sensitivity
c. Radio evidence of increase PD space d. Loss of pulp vitality
339. *Trauma causing loosening in 4 anteriors:*
- a. Luxation b. Subluxation c. Alveolar fracture
340. *How to avoid laceration in upper 8 impact on flap?*
- a. Widening flap b. Inverted U-shaped flap c. Excessive force of retraction of flap & cheek
341. *Which is more stable orthognathic surgery?*
- a. Apical repositioning of maxilla
b. Coronal repositioning of maxilla
c. Backward repositioning of maxilla

342. *Hemodent contains:*
 a. Aluminum chloride b. Epinephrine free c. Lignocaine d. a+b
343. *Excessive bleeding after extraction:*
 a. Foam & celluloid oxide b. Gauze with epinephrine
 c. Gelatin foam
344. *Flare up happen which tooth?*
 a. Necrotic b. Caries c. Periodontal d. Fractured
345. *Suture after extraction:*
 a. Figure 8 b. Continues lock
346. *Treatment of ossifying fibroma:*
 a. Antibiotic b. Curettage c. Surgical removal d. No need for treatment
347. *The local anesthesia depends on:*
 a. Strength bond between drug and nerve
 b. Strength bond between drug and its intensity
 c. Bond between drug and time of removal from body
348. *A patient has multiple extraction. What to do after extraction for dentures sake?*
 a. Make interrupted suture cross papillae b. Leave to heal to avoid elevations from sutured papillae
 c. Make extensive bone smoothing d. Put surgical pack only
349. *Extra oral block anesthesia after needle touch pterygoid plate in which direction should move?*
 a. Forward and anteriorly b. Backward and anteriorly
 c. Backward and posteriorly d. Forward and posteriorly
350. *Bacteria in pericoronitis:*
 a. Staphylococcus b. Bactericides c. Famulis
351. *The substance in local anesthetic cartridge responsible to prevent oxidation of vasoconstrictor:*
 a. Sodium chloride solution b. Sodium sulphate
 c. Sodium metasilphate
352. *To prevent osteoradionecrosis for the patient:*
 a. Extract under hyperbaric oxygen b. Extract under GA
 c. Extract after proper antibiotic coverage d. All the above
353. *In case of infection which tooth can cause swelling in anterior part of hard palate?*
 a. Upper lateral b. Upper central c. Upper canine d. Upper first premolar
354. *Le Fort I injury:*
 a. Greater Palatine artery b. Infra orbital artery
 c. Maxillary artery d. Mandibular vein
355. *Use irrigation when cutting bone to:*
 a. Prevent risk of infection
 b. Remove bad smell of bone
 c. Heat generation during cutting bone affect bone vitality

356. *The local anesthesia depends on:*
- Strength bond between drug and nerve
 - Strength bond between drug and its intensity
 - Bond between drug and time of removal from body
357. *Paranasal fluid occurs in the fracture of the face:*
- Le Forte I
 - Le Forte II
 - Le Forte III
 - Zygomatic fracture
 - All above
358. *Patient has multiple extraction. What to do after extraction for denture sake?*
- Make interrupted suture cross papillae
 - Leave to heal to avoid elevations from sutured papillae
 - Make extensive bone smoothing
 - Put surgical pack only
359. *Pt needs extraction of tooth. He takes antidepressant, amount of epinephrine on anesthesia:*
- 0.1
 - 0.02
 - 0.4
 - 0.8
360. *What type of L.A has the slowest onset?*
- Procaine
 - Lidocaine
 - Bupivacaine
361. *TMJ and disc direction displaced:*
- Anterior
 - Posterior
 - Lateral
362. *Color code of ester L.A:*
- Always red
 - Always blue
 - Green
 - No color code
363. *Nerve that you infiltrate to anesthetize anterior part of hard palate in relation to anterior incisors?*
- Anterior superior alveolar
 - Nasopalatine
 - Greater palatine
 - Posterior superior alveolar
364. *Most difficult group of teeth that is difficult to anesthetize:*
- Maxillary premolars
 - Maxillary molars
 - Mandibular premolar
 - Mandibular molars
365. *The case with increase in both the rate and depth of respiration:*
- Hypoventilation
 - Hyperventilation
 - Chyne chest breathing
 - Stridor
366. *Dental forceps component:*
- Hand, shank, beak
 - Hand, hinge, beak
367. *A 38 yrs old male pt. comes to restore his badly decayed upper 7. During dentist examination he found white lesion on left cheek with dot of ulceration. When he asks the patient, he said that he is on tobacco chewing for 10 yrs. What is the appropriate management?*
- Give analgesic and follow up
 - Send him to oral surgeon for biopsy
 - No treatment
368. *Dislodging force in implant:*
- Occlusal
 - Hinged or swing
 - Pulling force
 - All the above
369. *Content of anesthetic carpule:*
- Lidocaine + epinephrine + Ringer's liquid
 - Lidocaine + epinephrine + distilled water
 - Lidocaine + epinephrine only

370. *The needle size for surgery:*
 a. 19 Gauge b. 25 Gauge c. 30 Gauge
371. *Periodontal surgery needle used is:*
 a. 3/8 reverse cutting b. 1/2 flat needle
372. *Maxillary upper premolar—forceps:*
 a. 88 b. 150 c. 120 d. 68
373. *A case tells you #26 extruded as # 36 extraction and you need go FPD for #35 and # 37. Which movement interference will happen?*
 a. Right movement b. Left movement c. Right and left movement d. Protruded
374. *Wound healing complete vascularity:*
 a. 2-3 b. 7-14 c. 15 -21
375. *Trauma most happens in which class:*
 a. 1 b. 3 c. 2 deviation 1
376. *A patient has hyperventilation, do with treatment what?*
 a. CO₂ b. O₂ c. NO₂
377. *Chromic catgut suture absorbs in:*
 a. 7-10 days b. 10-15 days c. 21 days d. 50 days
378. *Treatment of acute perichorionitis:*
 a. Antibiotic only b. Surgical removal and antibiotic
 c. Relief of occlusion d. Antiseptic
379. *Role of V.C in local anesthesia:*
 a. Decrease toxicity b. Decrease pain c. Decrease duration
380. *Nitrous oxide interferes with:*
 a. Vit C b. Vit A c. Vit B₆ d. Vit B₁₂
381. *About rarefaction:*
 a. Thin cortical plate b. Thick cortical plate c. Irregular bony plate
382. *About re-epithelization:*
 a. 5-10 days b. 10-15 days c. 15- 18 days d. 3 weeks
383. *Role of anesthesia with saliva:*
 a. Reduce anxiety and sensitivity b. Block cholinergic receptor
 c. Block salivary gland
384. *Anesthesia of upper 6 for posterior superior alveolar nerve but still feels pain, before RCT. What additional anesthesia should be used:*
 a. Anesthesia to anterior superior alveolar nerve b. Palatal infiltration
 c. Infiltration buccally d. Repeat it another time
385. *A 20 yrs patient complains of perichorionitis and pain associated with lower 3 molar and patient said the same symptoms occurred (before 2 months) and the patient has fever and swelling. So the treatment is:*
 a. Extract the offending tooth. b. Irrigate with hydrogen peroxide and give antibiotic.
 c. Give antibiotic and remove operculum. d. Extract offending tooth after symptoms disappear

9. Oral Surgery and Local Anesthesia

386. *The action of the local anesthesia depends on:*
- Special receptor
 - Acetylcholine
 - Location of injection
387. *Best diagnosis of root fracture involved in place of fracture during healing:*
- Interproximal connective tissue
 - Interproximal bone
 - Interproximal connective tissue and bone
 - Inflammation tissue
388. *Nerve that passes over ilium. Which nerve can be injured during surgery?*
- Iliac nerve
 - The lateral femoral cutaneous nerve.
 - Facial nerve
 - Hypoglossal nerve
389. *A patient has multiple extraction. What to do after extraction for denture sake?*
- Make interrupted suture cross papillae
 - Leave to heal to avoid elevations from sutured papillae
 - Make extensive bone smoothing
 - Put surgical pack only
390. *Doctor gives inferior alveolar nerve block but does not affect. What is the alternative technique?*
- Akinosi
 - Gow gate
391. *Patient under aspirin therapy and had a cardiac catheterization 8 months ago and need extraction of 2 molar teeth. Your management is:*
- BT
 - INR/TTP
 - Clotting time
 - Consult hematologist
392. *Herpetic whitlow in:*
- Mouth
 - Lip
 - Eye
 - Finger
393. *Action of L.A. depends on:*
- Lipid solubility of ionized
 - Lipid solubility of union
 - Water solubility ionized
 - Water solubility union
394. *A 20-year-old male has undergone extraction of 26 and returns to clinic after one week with painless ulcer in his palate related to extraction wound. What will be your diagnosis?*
- Squamous cell carcinoma
 - Necrotizing sialometaplasia
 - Acetonyces
 - Sialodentitis with infection
395. *Active ingredient of hemodent:*
- Ferric sulphate
 - Zinc phosphate
 - Aluminum chloride
 - Ferric chloride
396. *A 50-years old patient with coronal artery disease and takes warfarin, stopped by surgeon and takes unfractionated heparin to bridge warfarin. He stops unfractionated heparin before operation by:*
- 3 hours
 - 4 hours
 - 5 hours
 - 6 hours
397. *Prilocaine HCl 4% with epinephrine 1:200000 LA for patient with amide allergy. What is the color coding for cartridge?*
- Red
 - Yellow
 - Blue
 - Green
398. *Size of needle used for most dental procedure:*
- 0.2
 - 0.4
 - 0.5
 - 0.6
399. *The most likely diagnosis for a patient with an interincisal opening of 30 mm before feeling pain and a maximum opening of 44 mm with pain is:*
- Internal derangement of TMJ with reduction
 - Subluxation of TMJ
 - Myofascial pain
 - Internal derangement of TMJ without reduction

Section II: Topicwise Questions / Answers

400. Mesial shift, palatal of maxillary PM, palatal root will in relation to zygomatic arch:
a. Buccal b. Lingual c. Mesialy d. Distally
401. A patient with trismus, used technique akinosis in closed mouth technique needle to be:
a. 23 Gauge short needle b. 25 Gauge ultra short needle
c. 23 Gauge long needle d. 25 Gauge long needle
402. Dog bites a 10 years old boy on right side of his face. The treatment is?
a. Leave it to heal b. Place iodine to make healing faster
c. Convert punch to laceration, then suture d. Suture with resorbable suture
403. CPR in unconscious patient with cervical fracture:
a. Collar preferred than manual CO₂ b. Manual preferred than collar CO₂
c. No need for collar
404. CPR patient with spinal injury:
a. Tilt head, chin left and jaw thrust b. Tilt head and chin left only
c. Chin left only d. Jaw thrust only
405. Brush cytology in apprehensive patient:
a. Bleeding and pain b. Only survey then used for biopsy
406. Blood clot suture to retain blood in its place:
a. Figure 8 suture b. Continuous suture
c. Intermittent suture
407. Endo surgery needs to be done. LA long duration of action anesthesia:
a. Bupivacaine b. Lidocaine c. Cocaine d. Mepivacaine
408. Upon examination, dentist decided to do fine needle aspiration of keratocyst. The best gauge is:
a. 20 gauge b. 25 gauge c. 19 gauge d. 30 gauge
409. While doing a procedure, patient went unconscious. The dentist cannot estimate breathing. What should the dentist do for patient because of breathing?
a. Call CPR b. Call for help c. Just wait some time d. Use osilometer
410. Pt. has nasal fracture. Which forceps is used to reposition or impact nasal bone?
a. Walsham or arch forceps b. Willis forceps
c. Russian forceps d. Bone rancher
411. Patient blow in the anterior maxilla has Le Fort I. Where to put peak of Rowe impaction forceps in?
a. Zygomatic process b. Canine eminence
c. Maxillary tuberosity d. Hard palate along nasal floor
412. Maxillo mandibular fixation, the steel wire size of gauge:
a. 5 inch 20 gauge b. 5 inch 22 gauge c. 6 inch 20 gauge d. 6 inch 26 gauge
413. 3rd molar incision is done by:
a. Orben knife b. Kelly's knife c. Surgical blade
414. Analgesia is:
a. Absence of pain to all sensations. b. Absence of pain that is normally painful
c. Diminish sensitivity to all sensations

9. Oral Surgery and Local Anesthesia

415. *During anesthesia what's true:*

- a. The needle should be inserted before cartridge.
- b. The needle cap is inserted before the stopper.
- c. Excessive force should be applied to allow insertion of the cartridge into the harpoon.

416. *Patient allergic to both amide + ester. GA can't be done, absolute need of L.A. We use:*

- a. 1% Hydro chloramine
- b. 4% Nitrous oxide
- c. Benzocaine

417. *A patient with pain in lower mandibular molar. He has osteoporosis. The dentist should expect the following in OPG:*

- a. Cotton wool appearance
- b. Orange peel appearance
- c. Root may not be apparent due to bone density
- d. Thin cortical plates

418. *Scissor to hold the lip during surgery:*

- a. Kingsley
- b. Alliator
- c. Minnesota

EXPLANATION

1. Answer: a

2. Answer: a

3. Answer: a

4. Answer: a

5. Answer: b

6. Answer: b

7. Answer: c

Reference: Shafer's Textbook of Oral Pathology, 4th ed, page 55

The traumatized tooth, which is usually a maxillary central incisor, is pushed into the developing tooth underneath it and consequently affects the formation of enamel.

8. Answer: c

Reference: Guyton and Hall's Textbook of Medical Physiology, page 447

9. Answer: b

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery. The angulation should be 0–10 degree from the long axis of the root.

10. Answer: a

Allis forceps is used for the removal of epulis fissuratum

Addson forceps is used to hold soft tissue, flaps etc, ruptured cyst during removal of third molar.

Curved hemostat is used for holding needles

11. Answer: a

Reference: Phillips Science of Dental Materials, 11th ed, page 174

12. Answer: c

13. Answer: c

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 23

14. Answer: b

Reference: Handbook of Dental Trauma, page 71

15. Answer: a

16. Answer: b

Extrusion orthodontic is called ferrule effect. It will help in crown lengthening of the tooth for prosthodontic management.

17. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

18. Answer: b

19. Answer: a

20. Answer: b

Reference: Monheim's Local Anesthesia and Pain Control in General Practice, 7th ed, page-131

21. **Answer: b**

87542163 or 87546213 also can be done. To maintain the arch integration and shape, canine should be extracted last among all the tooth.

22. **Answer: b**

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery

23. **Answer: a**

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery

(during mouth opening the mandible will deviate to the same side of the condylar fracture)

24. **Answer: d**

Reference: AHA Guidelines 2010 (American Heart Association)

25. **Answer: a**

26. **Answer: a**

Reference: Peterson's Principles of Oral and Maxillofacial Surgery

27. **Answer: a**

28. **Answer: d**

Reference: Malamed's Local Anesthesia, page 36

29. **Answer: a**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 576

A faint may mimic far more serious conditions, most of which can be excluded by a familiarity with the patient's PMH. These include strokes, corticosteroid insufficiency, drug reactions and interactions, epileptic fit, heart block, hypoglycemia, and MI

30. **Answer: b**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-528

The INR is a test of blood clotting, which is primarily used to monitor warfarin therapy.

31. **Answer: b**

Reference: National Board Dental Examination-April 1986

32. **Answer: d**

The difference between carbide burs and diamond burs vary; a) Tungsten carbide steel burs are good for cutting, cutting bones (surgical), metal crowns etc. b) Diamond burs as diamond powder, good as grinder, as well as cutting zirconia or metal crowns, **Diamond burs** will safely accomplish this and are unlikely to cause enamel fracture.

33. **Answer: b**

34. **Answer: a**

Reference: Monheim's local Anesthesia and Pain Control in General Practice

Inferior alveolar nerve block or IANB - The nerve is approached from the opposite side of the mouth over the contralateral premolars. After piercing the mandibular tissue on the medial border of the mandibular ramus within the pterygomandibular space and then contacting medial surface of the alveolar bone as well as being lateral to the pterygomandibular fold and the sphenomandibular ligament, the injection is given.

Section II: Topicwise Questions / Answers

35. Answer: a

Bone swaging: Technique requires existence of an edentulous area adjacent to the defect from which bone is pushed into contact with the root surface without fracturing the bone at its base.

36. Answer: d

Reference: Peterson's Principles of Oral and Maxillofacial Surgery

37. Answer: b

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 406

38. Answer: a

Reference: Monheim's Local Anesthesia and Pain Control in General Practice

39. Answer: c

40. Answer: b

Reference: Harrison's Principles of Internal Medicine, page 675

41. Answer: d

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 50

42. Answer: b

43. Answer: a

Reference: Winkler's Essentials of Complete Denture, Prosthodontics

44. Answer: c

Reference: Peterson's Principles of Oral and Maxillofacial Surgery, page 320

3 mm between outer edge of implant

45. Answer: d

Reference: Dental Decks, 2nd ed, page 1846

46. Answer: d

Reference: Peterson's Principles of Oral and Maxillofacial Surgery

47. Answer: d

48. Answer: a

Reference: Malamed's Medical Emergencies in the Dental Office, page 129

49. Answer: d

Reference: Karl's Oral and Maxillofacial Surgery, vol 2, page 57

50. Answer: b

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, Vol 2, page 336

51. Answer: a

52. Answer: a

Reference: Peterson's Principles of Oral and Maxillofacial Surgery, 2nd ed, page 173

Reference: Winkler's Essentials' of Complete Denture Prosthodontics

53. Answer: c

54. Answer: b

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 316

55. Answer: b

Reference: Peterson's Principles of Oral and Maxillofacial Surgery

56. Answer: b

57. Answer: b

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery
Handbook, Local Anesthesia, page 168

Hematoma: This is commonly produced by inserting the needle too far posteriorly into the pterygoid plexus of veins. Additionally, the maxillary artery may be perforated.

58. Answer: b

Reference: Monheim's Local Anesthesia and Pain Control in General Practice, 7th ed, page 133

<http://www.scribd.com/doc/17106080/Local-Anesthetics>

Both sensory and motor nerves are equally sensitive.

Order of pain blockade is pain, temperature, touch, deep pressure sense.

When applied to tongue bitter taste is lost first, followed by sweet and sour, and salty taste is lost last of all.

59. Answer: a

Reference: Guyton and Hall's Textbook of Medical Physiology, page 447

60. Answer: c

Reference: Peterson's Principles of Oral and Maxillofacial Surgery, page 320

61. Answer: d

Reference: Peterson's Principles of Oral and Maxillofacial Surgery

Zygoma fracture: Clinical flattening of the cheekbone prominence, paraesthesia in distribution area of infraorbital nerve, diplopia, restricted eye movements, subconjunctival hemorrhage - limited lateral excursions of mandibular movements palpable step in infraorbital bony margin.

62. Answer: b

63. Answer: a

Reference: Malamed's Medical Emergencies in the Dental Office

64. Answer: a

Reference: Harrison's Principles of Internal Medicine

65. Answer: d

66. Answer: d

Reference: Dental Decks, 2nd ed, page 1792

67. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 408-409

68. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

69. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 492

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery

70. Answer: c

71. Answer: c

72. Answer: d

Also coagulopathy; uncontrolled diabetic; hematologic malignancy; leukemia; uncontrolled cardiac disease

73. Answer: b

74. Answer: d

Observation:

If there is change in occlusion: Perform open reduction and bone plating of one side only

If no changes: Conservative treatment, including close observation, soft diet, physiotherapy, and functional appliances, is advised in most cases

Unilateral condylar fractures without displacement, are generally treated conservatively using arch bars and intermaxillary fixation

75. Answer: d

Reference: <http://www.dentistry.com/conditions/dental-emergency/dental-care-for-traumatic-dental-injuries>

If circumstances such as contaminated wounds, extensive injuries, or multiple tooth loss preclude reimplantation of the tooth, transport it to the dental office in a container of milk, preferably cool temperature. The patient's own saliva or water are secondary choices.

Reference: <http://www.sbt.d.org.br/journal/2009/artigos/BJDT-v1n2a07.PDF>

Eagle's medium was less effective than milk attributed to the low temperature (4°C) of storage at the study. This low temperature may have induced aggregation and thus lowered the cell's functional capacity needed to evaluate the effectiveness of this medium at higher temperatures.

Reference: Pediatric Critical Care Medicine – Basic science and clinical evidence

Cold milk aids in keeping the PDL fibers healthy during transport.

76. Answer: c

Reference: Dental Decks, 2nd ed, Dental Secrets, Stephen T. Sonis, page 274

77. Answer: a

Reference: Peterson's Principles of Oral and Maxillofacial Surgery, 2nd ed, page 169

Tuberosity Reduction:

Excesses in the maxillary tuberosity may consist of soft tissue, bone, or both. Sounding, which is performed with a needle, can differentiate between the causes with a local anesthetic needle or by panoramic radiograph.

9. Oral Surgery and Local Anesthesia

Bony irregularities may be identified, and variations in anatomy as well as the level of the maxillary sinuses can be ascertained. Excesses in the area of the maxillary tuberosity may encroach on the interarch space and decrease the overall freeway space needed for proper prosthetic function. Access to the tuberosity area can be obtained easily using a crestal incision beginning in the area of the posterior tuberosity and progressing forward to the edge of the defect using a no. 12 scalpel blade. Periosteal dissection then ensues exposing the underlying bony anatomy. Excesses in bony anatomy are removed using a side-cutting rongeur.

78. **Answer: b**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 428

79. **Answer: b**

80. **Answer: c**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

<http://emedicine.medscape.com/article/763291-treatment>

Avoid handling root surface. If tooth contaminated, hold crown and agitate gently in saline.

If extraoral time is longer than 60 minutes, soak the tooth in citric acid and fluoride to make the root as resistant to resorption as possible. Consult a dentist.

81. **Answer: c**

82. **Answer: d**

83. **Answer: a**

84. **Answer: b**

Reference: Damle's Textbook of Pediatric Dentistry, page 419.

85. **Answer: c**

Reference: Scully's Medical Problems in Dentistry 5th ed, page 66

86. **Answer: c**

Reference: Peterson's Principles of Oral and Maxillofacial Surgery, page 320

87. **Answer: c**

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 50

88. **Answer: d**

Reference: McDonald's Dentistry for the Child and Adolescent

89. **Answer: d**

Reference: Malamed's Medical Emergencies in the Dental Office, page 183

90. **Answer: b**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

91. **Answer: c**

Reference: Malamed's Local Anesthesia

The technique used to administer a block with trismus or limited mouth opening is akinosi closed mouth technique

92. **Answer: d**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 498

Peterson's Principles of Oral and Maxillofacial Surgery, 2nd ed, page 409

In common with all fracture they can be grouped into simple (closed linear fracture) compound (open to mouth or skin)

93. Answer: d

Reference: Monheim's Local Anesthesia and Pain Control in General Practice

Reference: Handbook of Local Anesthesia, page 92

Local anesthetic drug – vasopressor - Ringer's liquid (nacl) distilled water - preservative substance (methyl paraben) preservative for vasopressor.

94. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

95. Answer: d

96. Answer: c

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 114

Handbook of dental trauma 2001- page 73

Intrusive luxations, or intrusions, result from an axial force applied to the incisal edge of the tooth that results in the tooth being driven into the socket.

97. Answer: c

Reference: Dentogist, MCQs in Dentistry

Archer suggested that the first maxillary molar and canine are key pillars of maxilla and most firm teeth of the arch, once their adjacent teeth are removed they can be easily luxated and extracted rather than when these are tried to be removed first.

98. Answer: b

Reference: Dental Secrets, Stephen T. Sonis, page 49

Instruct the patient to double the dose of steroids the morning of surgery up to 200 mg. If taking greater than 100 mg, then give only an additional 100 mg.

For multiple extractions or extensive mucogingival surgery, the dose of corticosteroids should be doubled on the day of surgery. If the patient is treated in the operating room under general anesthesia, stress level doses of cortisone, 100 mg intravenously or intramuscularly, should be given preoperatively.

99. Answer: e

Leukemia; uncontrolled cardiac disease is also a contraindication to extraction

100. Answer: b

101. Answer: c

102. Answer: c

103. Answer: b

104. Answer: b

105. Answer: a

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page-386

106. Answer: b

Reference: Malamed's Local Anesthesia

Patients can't differentiate between 23 –25 –27 and 30 gauge needles.

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107. Answer: d

Reference: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2149014/pdf/anesthprog00222-0007.pdf>
<http://www.bcm.edu/oto/grand/121996.html>

Although age can no longer be considered as a contraindication to outpatient anesthesia and surgery, anesthetic-related morbidity and mortality remain higher

108. Answer: d

Reference: "Oral and Maxillofacial Surgery, Jonathan Pedlar, page 96"

Below lower border of mandible by at least 1 cm to avoid injury to marginal mandibular nerve, submandibular gland, facial artery and lingual nerve.

109. Answer: d

Reference: NIDCR recommendation

Absolute neutrophil count are sufficient to recommend oral treatment. Postpone oral surgery or other oral invasive procedures if platelet count is less than $75,000/\text{mm}^3$ or abnormal clotting factors are present. absolute neutrophil count is less than $1,000/\text{mm}^3$ (or consider prophylactic antibiotics).

110. Answer: 2

Reference: Damles' Textbook of Pediatric Dentistry, page 465

111. Answer: c

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 2nd ed, page 599

112. Answer: a

Reference: Monheim's Local Anesthesia and Pain Control in General Practice, 7th ed, page 132

113. Answer: b

Reference: Oral Pathology Clinical Pathologic Correlation, 3rd ed, page 316

Oral Pathology Clinical Pathologic Correlation, 3rd ed, page 357

114. Answer: c

Reference: Dental Secrets by Stephen T. Sonis, page 54

Dental Decks, 2nd ed, page 1742

115. Answer: d

Reference: Malamed's Local Anesthesia

116. Answer: b

Reference: Monheim's Local Anesthesia and Pain Control in General Practice, 7th ed, page 129, 214

117. Answer: a

Reference: Harrison's Principles of Internal Medicine

118. Answer: b

119. Answer: a

120. Answer: c

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page- 23

121. Answer: c

Section II: Topicwise Questions / Answers

122. Answer: a

123. Answer: e

124. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-118

125. Answer: a

126. Answer: e

127. Answer: c

128. Answer: c

Reference: National Board Dental Examination, Mar-1983

129. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-408-409

130. Answer: c

131. Answer: c

132. Answer: a

133. Answer: a

134. Answer: a

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 2nd ed, page 369

135. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 408-409

136. Answer: a

137. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-118

If closed apex and stored in suitable medium such as hank's solution then 7-10 days.

138. Answer: d

Reference: National Board Dental Examination, Dec-1979

139. Answer: c

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 392

Dental Decks, 2nd ed, page 1774

140. Answer: b

Reference: Grossman's Endodontic Practice

141. Answer: c

Mandibular first molar is most common site with vestibular space infection or abscess and thinnest overlying buccal bone.

142. Answer: b

Reference: National Board Dental Examination, July 1981

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143. Answer: c

Reference: Pathway of the Pulp, 9th ed, page 54

Reference: Master Dentistry - Oral and Maxillofacial, Surgery, Radiology, Pathology and Oral Medicine

144. Answer: d

145. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-73

146. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-392

Dental Decks, 2nd ed, page 1774

147. Answer: a

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 50

148. Answer: A

Reference: Textbook of Oral Surgery, page 46

Surgical forceps are used for suturing the wound, firmly grasping the tissues while the needle is passed. There are two types of forceps: the long standard surgical forceps, used in posterior areas, and the small narrow Adson forceps, used in anterior areas.

149. Answer: a

150. Answer: e

151. Answer: b

Reference: Dental Secrets by Stephen T. Sonis, page 54

Dental Decks, 2nd ed, page 1742

Patients typically receive dialysis 3 times/week. Dental treatment for a patient on dialysis should be done on the day between dialysis appointments to avoid bleeding difficulties.

152. Answer: c

Reference: Dental Decks, 2nd ed, page 1792

Healing occur more rapidly with a lower risk of infection.

153. Answer: c

154. Answer: d

155. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-118. The maximum time to splint is 2 weeks

156. Answer: d

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 391

157. Answer: d

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 387

Section II: Topicwise Questions / Answers

158. Answer: a

Reference: Dental Decks, 2nd ed, page 1050

159. Answer: b

160. Answer: a

Reference: Dental Decks, 2nd ed, page 1954

If the tuberosity is fractured but intact, it should be manually repositioned and stabilized by sutures.

161. Answer: c

162. Answer: a

163. Answer: c

164. Answer: b

Reference: *Surgery: Basic Science and Clinical Evidence*, Jeffrey A. Norton, page 2013

The mental foramen, and the long roots of the canine teeth as well as impacted 3rd molars create points of weakness that are particularly prone to fracture.

165. Answer: d

Reference: Dental Decks, 2nd ed, page 1554

Ludwig angina remains a potentially lethal disease, rapidly spreading bilateral cellulitis of the submental, sublingual, and submandibular spaces.

166. Answer: d

167. Answer: a

Reference: Handbook of Local Anesthesia, page 168

168. Answer: a

169. Answer: e

170. Answer: a

Reference: http://www.bethesda.med.navy.mil/careers%5Cpostgraduate_dental_school%

171. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed.

Shillingburg's Fundamentals of Fixed Prosthodontics, page 185

http://dfd.atauni.edu.tr/UploadsCild/files/2007-1/2007_1_4%20.pdf

Light-cure composite resin (president) and amalgam (cavexavalloy) were statistically different than the other materials tested. They are stronger than compomer followed by resin modified glass ionomer and conventional glass ionomer core materials.

172. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 494

Le Fort I: Le Fort I may occur singly or associated with other facial fractures. The tooth-bearing portion of the upper jaw is mobile, unless impacted superiorly. There is bruising in the buccal sulcus bilaterally, disturbed occlusion, and posterior 'gagging' of the bite. Grasp the upper jaw between the thumb and forefinger anteriorly, place thumb and forefinger of other hand over the supraorbital ridges, and attempt to mobilize the upper jaw to assess mobility. Spring the maxillary teeth to detect a palatal split. Percussion of the upper teeth may produce a 'cracked cup' sound.

Le Fort II and III: Le Fort II and III fractures produce similar clinical appearances; namely, gross edema of soft tissues, bilateral black eyes (panda facies), subconjunctival hemorrhage, mobile mid-face, dish-face appearance, and extensive bruising of the soft palate. Look for a CSF leak and assess visual acuity.

Le Fort II fracture may also show infra-orbital nerve paraesthesia and step deformity in the orbital rim. Peculiar to Le Fort III fracture are tenderness and separation of the frontozygomatic suture, deformity of zygomatic arches bilaterally, and mobility of entire facial skeleton.

Le Fort I is the lowest level of fracture, in which the tooth-bearing part of the maxilla is detached.

Le Fort II or a pyramidal fracture of the maxilla involves the nasal bones and infraorbital rims. Le Fort III involves the nasal bones and zygomatic-frontal sutures and the whole of the maxilla is detached from the base of the skull.

173. **Answer: a**

Reference: Master Dentistry, Oral and Maxillofacial, Surgery, Radiology, Pathology and Oral Medicine

The eyes are examined for double vision (diplopia), any restriction of movement and subconjunctival hemorrhage. The condyles of the mandible are palpated and movements of the mandible checked. Swelling, bruising and lacerations are noted together with any areas of altered sensation that may have resulted because of damage to branches of the trigeminal nerve. Any evidence of cerebrospinal fluid leaking from the nose or ears is noted, as this is an important feature of a fracture of the base of the skull. An intra-oral examination is then carried out, looking particularly for alterations to the occlusion, a step in the occlusion, fractured or displaced teeth, lacerations and bruises. The stability of the maxilla is checked by bimanual palpation, one hand attempting to mobilise the maxilla by grasping it from an intra-oral approach, and the other noting any movement at extra-oral sites such as nasal, zygomatic-frontal and infraorbital.

174. **Answer: c**

175. **Answer: d**

Reference: Textbook for General and Oral Surgery, page 193

176. **Answer: d**

177. **Answer: b**

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 408-409

178. **Answer: c**

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, Vol 2, page 73

179. **Answer: d**

180. **Answer: c**

The green wavelength of 510 nm is mainly for soft tissue procedures and coagulation.

181. **Answer: b**

182. **Answer: b**

Reference: Damles' Textbook of Pediatric Dentistry, page 361

183. **Answer: b**

Reference: Oral and Maxillofacial Surgery, Jonathan Pedlar, page 96"

184. **Answer: d**

Reference: Malamed's Handbook of Local Anesthesia, page 295

185. **Answer: b**

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186. Answer: b

187. Answer: c

Reference: Skinner's Science of Dental Materials, page 761

188. Answer: b

189. Answer: d

190. Answer: a

191. Answer: d

192. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 114

(Concussion – Injury of supporting tissues without loosening or displacement but marked reaction to percussion.
Subluxation- abnormal loosening but without displacement of teeth)

193. Answer: b

194. Answer: c

195. Answer: c

196. Answer: d

Reference: Damles' Textbook of Pediatric Dentistry, page 465

197. Answer: d

198. Answer: a

199. Answer: d

200. Answer: c

201. Answer: e

202. Answer: c

203. Answer: b

Reference: Ingle's Endodontics

204. Answer: b

(Both can infect humans, example: influenza, hepatitis C, SARS)

205. Answer: a

206. Answer: c

CPR (Cardiopulmonary Resuscitation)

207. Answer: a

208. Answer: b

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 681

209. Answer: a

210. Answer: c

211. Answer: d

Reference: Oxford Handbook of Clinical Dentistry - 4th ed, page 496

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212. Answer: b

Reference: Scully's Medical Problems in Dentistry, page 66

213. Answer: a

Reference: Rosensteel, page 20

Periodontal cyst appears the same as the gingival cyst of the adult.

214. Answer: b

215. Answer: a

Reference: Scully's Medical Problems in Dentistry, page 151

216. Answer: b

217. Answer: c

218. Answer: d

219. Answer: b

This is due to anterior disc displacement TMJ without reduction.

A displaced disc without reduction will result in mandibular deviation to the affected side

220. Answer: d

Chemical structure of local anesthesia will decide what type of LA we want to give to patient.

221. Answer: c

Bone structure of maxilla and mandible will decide the technique of LA administration

222. Answer: c

223. Answer: d

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 118

224. Answer: d

Reference: Shafer's Textbook of Oral Pathology, 5th ed, page 1022, 1023

225. Answer: a

226. Answer: a

All kinds of dental surgical procedures are contraindicated for uncontrolled diabetes.

227. Answer: a

Reference: Robbin's Basic Pathology, 7th ed, page 256

228. Answer: a

229. Answer: a

230. Answer: a

Reference: <http://en.wikipedia.org/wiki/Xenograft>

Xenograft bone substitute has its origin from another animal.

231. Answer: a

232. Answer: a

233. Answer: c

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 646

234. Answer: a

235. Answer: a

Reference: Grossman's Endodontic Practice

236. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

237. Answer: b

Current perspective on residual ridge remodelling, beginning with the cascade of inflammatory reactions that is activated immediately after tooth extraction. The socket fills with blood from the severed vessels, which contain proteins and damaged cells. These cells initiate a series of events that will lead to the formation of a fibrin network, which, along with platelets, forms a "blood clot" or "coagulum" within the first 24 hours. Acting as a physical matrix, the coagulum directs the movement of cells, including mesenchymal cells, as well as growth factors. Neutrophils and later macrophages enter the wound site and digest bacteria and tissue debris to sterilize the wound. They release growth factors and cytokines that will induce and amplify the migration of mesenchymal cells and their synthetic activity within the coagulum.

Within a few days, the blood clot begins to break down (fibrinolysis). The proliferation of mesenchymal cells leads to gradual replacement of the coagulum by granulation tissue (2–4 days). By the end of 1st week, a vascular network is formed and by 2 weeks the marginal portion of the extraction socket is covered with young connective tissue rich in vessels and inflammatory cells. By 4–6 weeks, most parts of the alveolus are filled with woven bone, while the soft tissue becomes keratinized. At 4–6 months, the mineral tissue within the original socket is reinforced with layers of lamellar bone that is deposited on the previously formed woven bone. Although bone deposition in the socket will continue for several months, it will not reach the coronal bone level of the neighbouring teeth.

238. Answer: b

Reference: Malamed's Handbook of Local Anesthesia, page 19

239. Answer: b

Reference: Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 316

240. Answer: b

Reference: Karl's Oral and Maxillofacial Surgery, 2nd ed, page-55

241. Answer: b

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 329

242. Answer: c

243. Answer: c

244. Answer: a

245. Answer: a

246. Answer: b

247. Answer: a

248. Answer: c

249. Answer: b

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250. Answer: b

251. Answer: c

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 406

252. Answer: a

253. Answer: c

254. Answer: d

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 354

255. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 408-409
Damles' Textbook of Pediatric Dentistry, page 422

256. Answer: b

257. Answer: a

258. Answer: a

259. Answer: c

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 650

260. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 118

261. Answer: b

262. Answer: b

Supraperiosteal injection (commonly known as local infiltration) is indicated whenever dental procedures are confined to a localized area in either the maxilla or mandible. The terminal endings of the nerves innervating the region are anesthetized. The indications are pulpal anesthesia of all the maxillary teeth (permanent and primary), mandibular anterior teeth (primary and permanent) and mandibular primary molars when treatment is limited to one or two teeth.

263. Answer: b

264. Answer: a

265. Answer: a

266. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 392

Dental Decks, 2nd ed, page 1774

267. Answer: c

268. Answer: d

269. Answer: b

270. Answer: d

271. Answer: a

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 207

272. Answer: b

273. Answer: d

274. Answer: c

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 463

275. Answer: d

276. Answer: c

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 395

277. Answer: b

Best media in order:

1. HBSS (Hank's balanced salt solution).

2. Patient saliva

3. Milk in room temperature

4. Saline

5. Water

278. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed.

Dental Decks, 2nd ed, page 1790

Circulation feel for a carotid pulse. If it is present, provide 10 breaths per minute, checking the pulse for 10 sec every 10 breaths. If no pulse commence chest compression, at the middle of the lower half of the sternum, depressing $4\frac{3}{5}$ cm 100 times per minute.

279. Answer: a

Reference: Dental Decks, 2nd ed, page 1756

280. Answer: b

Reference: Screening Oral Cancer - Prepared by University of Missouri-Kansas City School of Dentistry

80% of the cancer of the floor of the mouth is caused by smoking

Ulceration on floor of mouth in edentulous patient, initially misinterpreted as denture irritation.

281. Answer: b

A patient who sustained a subcondyler fracture on the left side would be unable to deviate the mandible to the right.

282. Answer: a

While giving a lower mandible anesthesia, Parasthesia of the facial nerve occur if you are injecting the LA solution near a branch of facial nerve in parotid capsule

283. Answer: b

284. Answer: a

285. Answer: b

286. Answer: d

287. Answer: a

288. Answer: d

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289. Answer: a

290. Answer: b

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 385

291. Answer: c

(Sublingual submandibular space infections)

292. Answer: a

293. Answer: a

294. Answer: b

Reference: Malamed's Medical Emergencies in the Dental Office, page 58

295. Answer: a

296. Answer: d

Reference: Scully's Medical Problems in Dentistry, page 37

297. Answer: b

298. Answer: a

Reference: Oxford Handbook of Clinical Dentistry. 4th ed, page 114

Intrusive luxations, or intrusions, result from an axial force applied to the incisal edge of the tooth that results in the tooth being driven into the socket.

299. Answer: b

Reference: Textbook for General and Oral Surgery, page 193

Reference: Oral Surgery, page 119-155

Mechanical principles involved in extraction - Lever, wedge, & wheel and axle

300. Answer: a

Reference: Monheim's Local Anesthesia and Pain Control in General Practice, 7th ed, page 100

301. Answer: c

302. Answer: d

303. Answer: b

Reference: Dental Decks, 2nd ed, page-1816

The palatal root of the maxillary first molar is most often dislodged into the maxillary sinus during an extraction procedure.

304. Answer: d

With a localized, fluctuant, soft-tissue swelling indicating a submucosal abscess, an incision and drainage procedure should be attempted

305. Answer: a

306. Answer: b

307. Answer: c

308. Answer: a

309. Answer: b

310. Answer: d

Reference: Dental Decks, 2nd ed, page 1846

311. Answer: a

It is lingual nerve, a branch of the mandibular division of fifth cranial (trigeminal) nerve

312. Answer: b

313. Answer: c

Reference: Handbook of Dental Trauma, page 71

314. Answer: a

315. Answer: c

316. Answer: a

317. Answer: a

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 50

318. Answer: d

Reference: <http://en.wikipedia.org/wiki/Hypoglycemia>

319. Answer: a

Reference: Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 220

320. Answer: a

321. Answer: e

322. Answer: c

323. Answer: d

324. Answer: a

325. Answer: b

326. Answer: d

327. Answer: d

Obwegeser's Technique

Obwegeser suggested further modification of dean's tech.

For cases of extreme premaxillary protrusion technique:

- i. Teeth are removed as usual.
- ii. Sockets are connected and rongeurs /burs are used to remove the medullary interradicular bone.
- iii. A large pear shaped/round bur is taken and the sockets and their interconnecting through is enlarged.
- iv. Both labial and palatal plates are cut with burs in the canine area to weaken the bone and to form three sided bone flaps in both cortical plates
- v. A small mounted disk is inserted into the sockets and trough, to score/groove, the labial and palatal plates, horizontally weakening them.
- vi. Since the labial cortex is very thin, usually only the palatal cortex need to be scored with the disk
- vii. A pair of broad flat elevators is inserted into the sockets and their connecting trough and is used to # the labial plate labially and palatal plate palatally.

9. Oral Surgery and Local Anesthesia

viii. Finger pressure is used to mold the alveolar process into the desired shape.

ix. Sutures are placed and a denture splint is used to stabilize the alveolar process (46 wks)

- 328. Answer: b
- 329. Answer: c
- 330. Answer: b
- 331. Answer: d
- 332. Answer: b
- 333. Answer: a
- 334. Answer: b
- 335. Answer: c
- 336. Answer: a
- 337. Answer: b
- 338. Answer: a
- 339. Answer: c
- 340. Answer: a
- 341. Answer: a
- 342. Answer: d
- 343. Answer: a
- 344. Answer: a
- 345. Answer: b
- 346. Answer: b
- 347. Answer: a
- 348. Answer: b
- 349. Answer: d
- 350. Answer: b
- 351. Answer: c
- 352. Answer: a
- 353. Answer: a
- 354. Answer: a
- 355. Answer: c
- 356. Answer: a
- 357. Answer: c
- 358. Answer: b
- 359. Answer: b
- 360. Answer: a
- 361. Answer: a

- 362. Answer: a
- 363. Answer: b
- 364. Answer: d
- 365. Answer: b
- 366. Answer: b
- 367. Answer: b
- 368. Answer: b
- 369. Answer: b
- 370. Answer: b
- 371. Answer: a
- 372. Answer: b
- 373. Answer: d
- 374. Answer: b
- 375. Answer: c
- 376. Answer: a
- 377. Answer: d
- 378. Answer: b
- 379. Answer: a
- 380. Answer: d
- 381. Answer: a
- 382. Answer: b
- 383. Answer: a
- 384. Answer: c
- 385. Answer: d
- 386. Answer: a
- 387. Answer: b
- 388. Answer: b
- 389. Answer: c
- 390. Answer: b
- 391. Answer: d
- 392. Answer: d

This is a characteristic non oral site for primary infection as a result of contact with infected vesicle fluid or saliva. The vesiculation and crusting are identical to those seen in herpes labialis.

- 393. Answer: b
- 394. Answer: b
- 395. Answer: c

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396. Answer: d

Patient on heparin should be delayed surgery until heparin inactive in circulation, 6 h if heparin given IV and 24 h if SC

397. Answer: b

398. Answer: b

399. Answer: c

400. Answer: c

401. Answer: d

402. Answer: c

403. Answer: a

404. Answer: d

405. Answer: b

406. Answer: a

407. Answer: a

408. Answer: c

409. Answer: a

410. Answer: a

411. Answer: d

412. Answer: d

413. Answer: a

414. Answer: b

415. Answer: c

416. Answer: b

417. Answer: c

418. Answer: c