



## 4. Oral Pathology

- Most common benign tumor in salivary gland:**
  - a. Pleomorphic adenoma
  - b. Adenoid cystic carcinoma
- Patient has pain in floor of the mouth while eating:**
  - a. Submandibular salivary gland stone
  - b. Ulcer
  - c. SCC
- Malar bone deformity, skeletal class 2, hearing loss:**
  - a. Treacher Collin syndrome
  - b. Albert syndrome
  - c. Gardner syndrome
- Hearing loss, lesion on tongue, notched incisor:**
  - a. Congenital syphilis
  - b. Dens invaginatus
  - c. Tertiary syphilis
- Biopsy for tongue lesion show, S.C.C with undifferentiation. What is the prognosis?**
  - a. Good with no recurrent
  - b. Poor with no recurrent
  - c. Poor with recurrent
- Patient with angular cheilitis and glossitis:**
  - a. Vit B deficiency
  - b. Xerostomia
  - c. Vit C deficiency
  - d. Poor oral hygiene
- How to reduce occurrence of osteoradionecrosis:**
  - a. Endo and periodontal curettage
  - b. Extraction with hyperbaric oxygen therapy
  - c. Antibiotic therapy
  - d. All the above
  - e. Patient just takes L.A, he gets discomfort, warm, his blood pressure 100/75, and he started taking arthritis medication recently:
- Bundles of well formed collagen fibres with a scattering of fibriocytes and a variable vascularity are seen in which tumors of gingival?**
  - a. Fibroma.
  - b. Papilloma.
  - c. Peripheral giant cell granuloma.
  - d. Central giant cell granuloma.
- Ameloblastoma can occur from which of the following cysts?**
  - a. Dentigerous cyst
  - b. Odontogenickeratocyst.
  - c. Adenomatoid odontogenic cyst.
  - d. Periapical cyst
- Child with vesicle on the hard palate with history of malaise for 3 days. What is the possible diagnosis?**
  - a. Herpes simplex infection.
  - b. Erythematic multiform
  - c. Aphthous ulcer
  - d. traumatic ulcer

Section II: Topicwise Questions / Answers

11. Oral lesions aphthous ulcers, herpes labialis, hairy leukoplakia can be seen first in which stage of HIV disease?  
a. Initial infection. b. Early HIV disease.  
c. Intermediate HIV disease d. Late HIV disease
12. Young patient came to clinic with swelling in the mandible 36, 37, 38 area. In the clinical examination 3rd molar is missing, in X ray examination we found radiolucent is cover the pericoronal part of the 3rd molar. What will be your diagnosis?  
a. Dentigerous cyst. b. Central hemangioma  
c. Periradicular cyst d. Eruption cyst
13. Which of the following facts are present in hypercementosis?  
a. Occur in Paget disease. b. Difficult to extract.  
c. Bulbous root. d. All of the above
14. Patient came to your clinic with the complaint of deep caries in the lower molar, no symptoms present but X ray shows there is radiopaque lesion at the apex of the distal root of the tooth. What is your diagnosis?  
a. Condensing osteitis. b. Cemental dysplasia.  
c. Periapical granuloma. d. None of the above
15. Intra epithelial bulla are found in:  
a. Pemphigus. b. Bullous pemphigoid.  
c. Bullous lichen planus. d. Pemphigoid.
16. Schick intradermal test used to identify the susceptibility of which of the following?  
a. Tuberculosis. b. Typhoid.  
c. Diphtheria. d. Cholera
17. Which is the common disease for the persons who are working in glass factories?  
a. Silicosis. b. Asepsis.  
c. Dermatitis d. Melanoma
18. Squamous cell carcinoma is a malignant from of:  
a. Skin. b. Mucous membrane.  
c. Gland tissue. d. Mucous epithelial membrane.
19. Amalgam tattoo is an oral pigmentation lesion:  
a. True b. False
20. Cementum contains cells like bone and it is yellow in color in vital, extracted or avulsed tooth but in non vital tooth, its color is dark:  
a. True b. False
21. The factors that influence the induction of cleft palate:  
a. Hereditary b. Environmental.  
c. a and b d. None
22. The most common benign tumor in oral cavity is:  
a. Sarcoma b. Fibroma  
c. Papilloma d. Lipoma

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23. A diabetic patient came to clinic with pain and swelling and enlarged mandible. On radiographic examination it showed moth eaten appearance. Your diagnosis is:
- a. Acute osteomyelitis.
  - b. Focalsclerosing osteomyelitis.
  - c. Diffusesclerosing.
  - d. Condensing osteomyelitis
24. Which of the following has radiographic diagnosis of bone destructive in the mandible without evidence of bone formation is?
- a. Osteomyelitis.
  - b. Osteosarcoma
  - c. Fibro-osseous lesion.
  - d. Fracture.
  - e. Osteoradionecrosis.
25. A 60-year-old man has been treated for a T2N0M0 squamous cell carcinoma by radical radiotherapy. He has a history of chronic alcoholism and was a heavy smoker. Six years after treatment, he develops a painful ulcer in the alveolar mucosa in the treated area following minor trauma. His pain worsens and the bone became progressively exposed. He is treated by a partial mandibular resection with graft. The diagnosis is:
- a. Acute osteomyelitis
  - b. Gerre'sosteomyelitis
  - c. Osteoradionecrosis
  - d. Chronic osteomyelitis
26. A patient suffering from pain in the area of the mandibular molars with paresthesia in the lower lip. By clinical and radiographic examination your diagnosis:
- a. Acute osteomyelitis.
  - b. Chronic osteomyelities
  - c. Condensing osteomyelities
  - d. Necrotizing osteomyelities
27. A 40 year male has undergone extraction of 26 and return to clinic after one week with painless ulcer in his palate related to extraction wound. What will be your diagnosis?
- a. Squamous cell carcinoma
  - b. Sialodinitis with infection
  - c. Necrotizing sialometaplasia
  - d. Rupture of cyst of minor salivary gland
  - e. Acetenomyceds
28. A patient came to your clinic with a dental problem. On clinical examination you found patient has all his teeth present and they are dark in color, generalized occlusal attrition also present. Early diagnosis will be:
- a. Amelogenesisimperfecta
  - b. Dentinogenesisimperfecta
  - c. Tetracycline discoloration
  - d. Trauma
29. Which of the following is false?
- a. Gingival & palatal cyst of newborn is derived from dental lamina
  - b. Epstein's pearl are found along the mid palatine suture
  - c. Bohn's nodules are found along the mid palatine suture
  - d. Palatal cyst of newborn persists into adult life.
30. Turner's hypoplasia is a term given to describe enamel hypoplasia due to:
- a. Congenital syphilis
  - b. Local infection
  - c. Rh hemolytic disease
  - d. Fluoride
31. Following may not be an oral manifestation of peptic ulcer:
- a. Anemia
  - b. Dental erosions
  - c. Vascular malformations of the lips
  - d. None of the above
32. Following is not a feature of Ascher's syndrome:
- a. Double lip
  - b. Blepharochalasis
  - c. Thyroiditis
  - d. None of the above

33. *False regarding mucocele is:*  
 a. Mucous retention cyst are common on palate and floor of mouth  
 b. Discrete painless smooth surfaced swelling  
 c. Superficial lesions frequently have a characteristic blue hue  
 d. Treatment is surgical removal with sparing the minor salivary gland
34. *Stage one B disease of squamous cell carcinoma:*  
 a. T1 NO MO  
 b. T3 NO MO  
 c. T2 NO MO.  
 d. T4 NO MO
35. *The majority of intraoral squamous cell carcinomas are histologically:*  
 a. Poorly differentiated.  
 b. Well moderately differentiated.  
 c. Spindle cell in type.  
 d. Carcinoma in situ.
36. *The difference between cellulitis and abscess is:*  
 a. Cellulitis acute stage with diffuse swelling no pus  
 b. Cellulitis chronic stage with diffuse swelling no pus  
 c. Cellulitis acute stage with diffuse swelling and contain pus  
 d. Cellulitis chronic stage with diffuse swelling and contain pus
37. *A female patient came to your clinic with dry lips and mouth and bilateral submandibular edema and ocular dryness. Diagnosis is:*  
 a. Polymorphecadenoma  
 b. Sialadenitis  
 c. Sjögren's syndrome  
 d. Measles
38. *Hypercementosis and ankylosis is seen in:*  
 a. Paget disease  
 b. Monocytic fibrous dysplasia  
 c. Hyperparathirodism  
 d. Trauma
39. *White lesion bilaterally on cheek, and other members in the family has it:*  
 a. Leukoplakia  
 b. White sponge nevus  
 c. Frictional keratosis  
 d. Leukodema
40. *Head and neck nevi with multi lesion is:*  
 a. Peterson Kelly syndrome  
 b. Van der woody syndrome  
 c. Eagle syndrome.  
 d. Albright syndrome
41. *The movement of polymorphic cells in the gaps of intracellular to the blood capillary. Outside it is called:*  
 a. Porosity  
 b. Slinking  
 c. Osmosis  
 d. Diapedesis.
42. *Child with cleft palate and cleft lip with anodontia due to:*  
 a. Van Der Woude syndrome  
 b. Treacher Collins syndrome  
 c. Paget disease  
 d. Ectodermal dysplasia
43. *Radiographic feature of moth eaten appearance will appear in which of the following?*  
 a. Focal sclerosing osteomyelitis.  
 b. Diffuse sclerosing osteomyelitis  
 c. Acute osteomyelitis.  
 d. Condensing osteomyelitis
44. *A patient suffering from pain in the area of the mandibular molars with paresthesia in the lower lip. By clinical and radiographic examination your diagnosis is:*  
 a. Acute osteomyelitis.  
 b. Paget's disease  
 c. Peripaicalabcess  
 d. Radicular cyst

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45. *Giant cell granuloma most commonly occur in which of the following places in child patient?*
- a. Buccal side of upper anterior tooth
  - b. Palatal side of upper anterior tooth
  - c. Buccal side of upper posterior tooth
  - d. Palatal side of upper posterior tooth
  - e. a+b
  - f. All the above
46. *The best definition to odontoblast:*
- a. It is subjacent to predentine, odontoblastic process.
  - b. It is the cells which produce enamel.
  - c. It is the cells which produce dentin.
  - d. It is the cells which produce pulp tissues.
47. *Salivary gland tumors usually occur in:*
- a. First two decades of life.
  - b. Third or fourth decade of life.
  - c. Fourth or fifth decade of life.
  - d. Sixth or seventh decade of life.
48. *A patient comes to your clinic complaining that the denture become tight. During examination you notice nothing, but when the patient stand you notice that his legs bowing (curved). What you suspect?*
- a. Paget's disease
  - b. Arthritis
  - c. Diabetic
  - d. Osteofibroma
49. *A 33 years old female patient comes with slow growing swelling in the angle of the mandible. Radiograph show radio-opaque with radio-lucent border diagnosis:*
- a. Osteoma.
  - b. Osteosarcoma.
  - c. Cemental dysplasia
  - d. Cementoblastoma
50. *The most common type of malignant bone tumor of the jaws is:*
- a. Osteochondrosarcoma.
  - b. Osteosarcoma.
  - c. Leiomyosarcoma.
  - d. Chondrosarcoma.
51. *Fordyce's granules occurs mostly in the:*
- a. Tongue.
  - b. Palate and bilaterally symmetric.
  - c. Palate.
  - d. Buccal mucosa and bilaterally symmetric.
52. *Wave length of CO<sub>2</sub> laser is:*
- a. 488 nm.
  - b. 532 nm.
  - c. 1060 nm.
  - d. 10600 nm.
53. *Squamous cell carcinoma is derived from:*
- a. Epithelial tissue.
  - b. Connective tissue.
  - c. Bone tissue
  - d. Blood
54. *Most common site of squamous cell carcinoma in the body:*
- a. Postero-lateral border of tongue.
  - b. Floor of the mouth.
  - c. Buccal mucosa.
  - d. Lip.
  - e. Skin.
55. *Most common site of oral squamous cell carcinoma:*
- a. Postero-lateral border of tongue.
  - b. Floor of the mouth.
  - c. Buccal mucosa.
  - d. Lip.
  - e. Skin.
56. *The majority of introral squamous cell carcinomas are histologically:*
- a. Poorly differentiated.
  - b. Well moderately differentiated.
  - c. Spindle cell in type.
  - d. Carcinoma in situ.

57. *Early squamous cell carcinoma of oral cavity present as:*

- a. Vesicle.
- b. Sessile mass.
- c. A red plaque.
- d. An ulcer.
- e. A white cauliflower like les
- f. c+d

58. *Firm, fixed neck nodes are most to be detected in association with:*

- a. An ameloblastoma
- b. A basal cell carcinoma
- c. An odontogenic fibroma
- d. A squamous cell carcinoma.

59. *Stage I B disease of squamous cell carcinoma:*

- a. T1 NO MO
- b. T3 NO MO
- c. T2 NO MO.
- d. T4 NO MO

60. *Cause of radicular cyst:*

- a. Non vital tooth
- b. Vital tooth
- c. Impacted tooth
- d. Fractured tooth

61. *Extreme bone fragility is a characteristic feature of:*

- a. Type II OI.
- b. Type III OI.
- c. Type IV OI.
- d. Type I OI.

62. *Which of the following is not a differential diagnosis for white sponge nevus?*

- a. Cheek chewing.
- b. Leukoplakia.
- c. Leukoderma.
- d. Chemical burns.

63. *Most common cyst oral cavity:*

- a. Radicular cyst.
- b. Peridontal cyst.
- c. Dentigerous cyst
- d. Naso palatine cyst

64. *Osteomyelitis most in:*

- a. Maxilla
- b. Mandible
- c. Skull bones
- d. Skeletal bones

65. *Aphthous ulcers occurs in:*

- a. Small size.
- b. In mucosa lining.
- c. Leave scars.
- d. Occur in childrens

66. *Nicotine stomatitis:*

- a. Palatal hyperplasia
- b. Bingival hyperplasia
- c. Prickle cell like shape
- d. Nasal cell lesion

67. *Dentinogenesis imperfecta have all except:*

- a. Broken enamel.
- b. Blue sclera.
- c. Broken bone.
- d. Supernumerary teeth.

68. *Generalized gray discoloration in a 28 years old patient's teeth, with blue sclera and an enlarged pulp chambers and short roots, and multiple fractures in enamel the diagnosis is:*

- a. Dentinogenesis imperfecta
- b. Amelogenesis imperfecta
- c. Ghost tooth
- d. None of the above

69. *Hairy tongue is elongation of:*

- a. Fungiform papillae.
- b. Filiform papillae.
- c. Circumvalate papillae
- d. Minor salivary glands

70. *A 3 year old child with vesiculobullous eruptions on the face and hands, discoloration of teeth which exhibit red fluorescence under UV light is suffering from:*

- a. Erythroblastosisfetalis
- b. Progeria
- c. Congenital porphyria
- d. Congenital copper intoxication

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71. *Histopathologically, of early verrucous carcinomas:*
- Have characteristic microscopic features.
  - Can be confused with acute hypertrophic candidiasis
  - Can be confused with lichen planus
  - Can be confused with chronic hypertrophic candidiasis
72. *A patient feels severe pain in upper mouth. Pain is radiated to eye and ear. After you check, no caries when you pressure on maxillary premolar he feels pain. In IOPA x-ray no changes seen. What is your diagnosis?*
- Acute apical periodontitis
  - Maxillary sinusitis.
  - Canine space infection
  - Dentoalveolar infection
73. *A patient is having unilateral pain in one side of his face. Pain started after a touching the face. What is your diagnosis is?*
- Trigeminal neuralgia
  - Bell's palsy
  - Myofacial pain
  - None of the above
74. *A pregnant 25 years patient, bleeding on probing, location on papilla of anterior area of the maxilla, isolated:*
- Giant cell granuloma
  - Pyogenic granuloma
  - Gingival hyperplasia
  - All the above
75. *Shick test, which is true?*
- Tst positive patient susceptible to infection
  - Test negative patient immune to infection
- A+B are true
  - A only true
  - B only true
  - Both are wrong
76. *Gold standard test of syphilis*
- TPI
  - Wasserman test
  - Lepronin test
  - Schultz- Charlton test
77. *A 16 year old female having carious lesion on her molar tooth, radiographic examination shows a presence of well circumscribed radio opaque lesion in that. What is the diagnosis?*
- Periapical granuloma
  - Condensing otitis
  - Periapical cyst
  - Cementblastoma
78. *Which of the following tests for Sjogren syndrome?*
- Schirmer test
  - Frei test
  - Schick test
  - Schiller test
79. *The most common type of biopsy used in oral cavity is:*
- Excisional biopsy.
  - Incisional biopsy.
  - Aspiration through needle.
  - Punch biopsy.
80. *A 10 years old child present with bilateral swelling of submandibular area, what could be the disease?*
- Fibrous dysplasia.
  - Cherubism
  - Polymorphic adenoma.
81. *A patient comes to dental clinic having a homological problem. After lab test they found that factor VIII clotting activity is less 10% what's the diagnosis:*
- Hemophilia A.
  - Hemophilia B.
  - Thrombocytopenia
  - None of the above





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95. *Odontogenic infection can cause least complication:*
- a. Pulmonary abscess
  - b. Peritonitis
  - c. Prosthetic valve infection
  - d. Cavernous sinus thrombosis
96. *The submandibular salivary gland is usually affected by:*
- a. Infected sialoadenitis
  - b. Viral sialoadenitis
  - c. Sialolithiasis
  - d. Adenomas
- Sialolithiasis The most common causes of salivary gland pathology
97. *Aplastic anemia may be caused due to:*
- a. Deficiency of iron in nutrition.
  - b. Exposure to drugs and chemical substances.
  - c. Hereditary.
  - d. Deficient folic acid.
98. *The patient have dull pain and swelling and the PA shows apical radiolucency your diagnosis will be:*
- a. Acute periodontal abscess
  - b. Chronic periodontal abscess with swelling
  - c. Acute periodontitis
  - d. Chronic periodontitis
99. *All these shows honey combed bone radiographically, except*
- a. Ameloblastoma
  - b. Odontogenic myxoma cyst
  - c. Odontogenic keratocyst
  - d. Adenomatoid odontogenic tumor
100. *The way to remove mucocel is*
- a. Radiation
  - b. Excision
  - c. Chemotherapy
  - d. Caterization
101. *Patient with factor IX is less 50%. What's the diagnosis?*
- 1. Hemophilia A.
  - 2. Hemophilia B
  - 3. Thrombocytopenia
  - 4. None of the above
102. *Impacted supernumerary and permanent teeth with osteoma of jaws is a feature of:*
- a. Rubinstein Taybi syndrome
  - b. Hereditary ectodermal dysplasia
  - c. Gardner's syndrome
  - d. Cleidocranial dysplasia
103. *Acute abscess is:*
- a. Cavity lined by epithelium.
  - b. Cavity containing blood cells.
  - c. Cavity containing pus cells.
  - d. Cavity containing fluid.
104. *Schick test an intradermal test for determination of susceptibility to:*
- a. Diphtheria.
  - b. TB
  - c. Allergy
  - d. HBC
105. *A 25 year old patient came for routine check up. But his radiographic examination shows between the two lower molar lesion diameter about 2 mm. It extends laterally with irregular shape. What is the diagnosis?*
- a. Dentigerous cyst
  - b. Apical cyst
  - c. Radicular cyst
  - d. Static bone cyst
106. *Candida infection is a frequent cause of:*
- a. Burning mouth
  - b. Bleeding gums
  - c. Bad breath
  - d. Dental caries

Section II: Topicwise Questions / Answers

107. Necrotizing sialometaplasia occur in which of the following locations?

- a. Lesion at junction between hard and soft palate
- b. In submandibular salivary gland
- c. Junction between attached and non attached gingival
- d. Buccal mucosa

108. Which of the following is true about acute abscess?

- a. Cavity lined by epithelium.
- b. Cavity containing blood cells.
- c. Cavity containing fluid.
- d. None of the above

109. Which of the following will give rise to apical periodontal cyst?

- a. Hertwig sheath
- b. Epithelial cell rest of malassez.
- c. Infected periodontal tissues
- d. Non of the above

110. Origin of primary malignant melanoma in oral cavity is:

- a. Nevus cells in the connective tissue
- b. Without the surface epithelium.
- c. Within the surface epithelium
- d. Langerhans cells within epithelium.

111. The risk of malignant change being present in epithelium is greatest in:

- a. Homogenous Leukoplakia
- b. Erythroplakia.
- c. Chronic hyperplastic candidiasis
- d. Speckled leukoplakia

112. Down syndrome child will be having:

- a. Above 80% IQ level
- b. Braque cephalic skull
- c. Congenital heart disease
- d. b + c

113. A 30 year old patient came to your clinic with the complaint of pain related swelling on maxillary central incisor area. The clinical examination shows the tooth is vital and there is pain on percussion what is your diagnosis?

- a. Incisive canal cyst
- b. Periapical cyst.
- c. Ankyrsmal bone cyst.
- d. Periodontal cyst.

114. Patient complaining of xerostomia, frequent going to the toilet at night:

- a. Diabetes mellitus.
- b. Diabetes incipendus
- c. URTI
- d. None of the above

115. Test used to detect HIV is:

- a. Elisa
- b. Western blot assay
- c. Indirect Immunofluorescence Assay
- d. None of the above

116. What is the time between the first onset of HIV virus and the appearance of the symptoms?

- a. 1-5 years.
- b. 10 years.
- c. 11-15 years
- d. No specific time.

117. Radiolucent area that covers the pericoronal part of the mandibular 3rd molar is:

- a. Dentigerous cyst.
- b. Central hemangioma
- c. Radicular cyst
- d. Eruption cyst

118. A young patient came without any complaint during routine x-ray appear between the two lower molar lesion diameter about 2 mm and extend laterally with irregular shape. What's the type of cyst:

- a. Dentigerous cyst.
- b. Apical cyst.
- c. Radicular cyst.
- d. Median nasal cyst

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119. *The x-ray shows scattered radio opaque line in the mandible. The diagnosis will be:*
- a. Paget disease.
  - b. Garres syndrome.
  - c. Fibrous dysplasia.
  - d. Osteosarcoma.
120. *Verrucous carcinoma is:*
- a. Malignant
  - b. Non-malignant
  - c. Hayperplastic
  - d. None of the above
121. *Geographic tongue is seen in patient with:*
- a. Diabetes.
  - b. Iron deficiency anemia.
  - c. Pemphigus.
  - d. Psoriasis
122. *A patient complaining of a severe edema in the lower jaw that increases in size upon eating, Diagnosis is:*
- a. Sialolithiasis
  - b. Pleomorphic adenoma
  - c. Adenoma
  - d. None of the above
123. *Which of the following regarding lupus erythematosus is false?*
- a. Shows hyperkeratosis with keratotic plug
  - b. Shows band like leukocytic inflammatory infiltrate
  - c. Shows pronounced vasculitis in both superficial and deep connective tissue
  - d. Direct immunofluorescence shows deposition of immunoglobulin C3 in a granular band involving basement membrane
124. *Following is not a feature of Van der Woude's syndrome:*
- a. Commissural pits
  - b. Lip pits
  - c. Cleft lip
  - d. Cleft palate
125. *Oral lesions of lichen planus usually appear as:*
- a. White streaks.
  - b. Red plaques.
  - c. Small, shallow ulcers.
  - d. Papillary projections.
  - e. Bullae.
126. *The oral lesions of the lichen planus:*
- a. Are usually painful.
  - b. Rarely appear before lesion else where on the body.
  - c. May be part of a syndrome in which lesions also appear on the skin, conjunctiva and genitalia.
  - d. Often appear in nervous, high-strung individuals.
  - e. Heal with scarring.
127. *All the following are oral features of acquired immunodeficiency syndrome (AIDS) except:*
- a. Candidiasis.
  - b. Erythema multiform.
  - c. Hairy leukoplakia.
  - d. Rapidly progressing periodontitis.
  - e. Kaposi's sarcoma.
128. *Osteoradio necrosis mostly affect in:*
- a. Mandible.
  - b. Maxilla.
  - c. No difference.
  - d. None of the above
129. *Dentinogenesis imperfecta has all except:*
- a. Easily fractured bone.
  - b. Supernumerary teeth.
  - c. Easily fractured enamel.
  - d. Blue sclera.
130. *A 16 year old student came to clinic with severe pain, inter dental papilla is inflamed. What is the diagnosis:*
- a. Gingivitis.
  - b. ANUG.
  - c. Periodontitis.
  - d. AHGS'

131. *Cyst in mandible shows radiographic features of:*
- |                                      |                                     |
|--------------------------------------|-------------------------------------|
| a. Radiolucent with bone resorption. | b. Radiolucent with bone expansion. |
| c. Radioopaque with bone resorption  | d. Radioopaque with bone expansion  |
132. *Treacher Collins syndrome have characteristic feature:*
- |                            |   |
|----------------------------|---|
| a. No ear loss.            | b. Upward of eye.                         |
| c. Prognathia of mandible. | d. Malar bone not well formed or absence. |
133. *Adenomatoid odontogenic tumor is most commonly found in:*
- |                       |                       |
|-----------------------|-----------------------|
| a. Anterior mandible. | b. Posterior maxilla. |
| c. Anterior maxilla.  | d. Ramus of mandible. |
134. *Generalised lymphadenopathy is seen in:*
- |              |                         |
|--------------|-------------------------|
| a. Infection | b. Lymphocytic leukemia |
| c. HIV       | d. Pernicious anemia    |
1. a+b      2. a+b+c.      3. only d      4. b+d
135. *A patient came to the clinic complaining from pain related to swelling on maxillary central incisor area with vital to under percussion?*
- |                          |                        |
|--------------------------|------------------------|
| a. Periapical cyst       | b. Nasopalatine cyst   |
| c. Globulomaxillary cyst | d. Aneurysmalbone cyst |
136. *A white lesion bilaterally on cheek. But it appears in other members in the family. What is the diagnosis?*
- |                |                |                        |                         |
|----------------|----------------|------------------------|-------------------------|
| a. Leukoplakia | b. Candidiasis | c. White sponge nevus. | d. Frictional keratosis |
|----------------|----------------|------------------------|-------------------------|
137. *Which are all the features of nicotine stomatitis?*
- |                               |                         |
|-------------------------------|-------------------------|
| a. Appears in the hard palate | b. It is a white lesion |
| c. It is premalignant lesion  | d. All the above        |
138. *The most common benign tumor in oral cavity is:*
- |             |                      |
|-------------|----------------------|
| a. Fibroma. | b. Papilloma.        |
| c. Lipoma.  | d. None of the above |
139. *PMN cells predominant in which of the following conditions?*
- |                       |                         |
|-----------------------|-------------------------|
| a. Acute inflammation | b. Chronic inflammation |
| c. Allergy condition  | d. All the above        |
140. *Recurrent ulcers occurring on gingiva and palate are most probably:*
- |                     |                                  |
|---------------------|----------------------------------|
| a. Aphthous ulcers. | b. Herpes simplex.               |
| c. Koplik spots.    | d. Lesions of Bechet's syndrome. |
141. *The common disease affecting the submandibular salivary gland is:*
- |                        |                            |
|------------------------|----------------------------|
| a. Salivary calculi    | b. Pleomorphic adenomas.   |
| c. Viral sialoadenitis | d. Infected sialoadenitis. |
142. *Neoplasm that spread by lymphatic from the angle of the mouth reach the:*
- |                               |                        |
|-------------------------------|------------------------|
| a. Preauricular lymph nodes.  | b. Mental lymph nodes. |
| c. Submandibular lymph nodes. | d. Pterygoid plexus.   |
| e. Jugulo-digastric nodes.    |                        |
143. *Cavernous sinus thrombosis is not manifested as:*
- |                            |  |
|----------------------------|--|
| a. Infra orbital syndrome. | b. Syncope due to atrial obliteration. |
| c. Eye exophthalmos.       | d. All the above                       |

#### 4. Oral Pathology

144. Which of the following is most common malignant bone tumor in jaws?  
a. Leiomyosarcoma.  
c. Osteochondrosarcoma.  
b. Chondrosarcoma.  
d. Osteosarcoma.
145. Which is most common salivary gland neoplasm?  
a. Pleomorphic adenoma.  
c. Warthin's tumor  
b. Adenoid cystic carcinoma  
d. Mucoepidermoid carcinoma
146. All of the following are oral features of acquired immunodeficiency syndrome AIDS except:  
a. Hairy leukoplakia.  
c. Candidiasis  
e. Non of the above  
b. Rapidly progressing periodontitis.  
d. Kaposi's sarcoma
147. Hairy trichoglossia may be caused by:  
a. H<sub>2</sub>O<sub>2</sub> mouth wash.  
c. Heavy smokers.  
e. All of the above  
b. Systemic steroid.  
d. Broad spectrum antibiotic
148. Radiographic radiolucency in the interradicular area:  
a. Invasion of furcation.  
c. Periodontitis  
b. Periodontal abscess.  
d. Periodontal cyst.
149. A female patient came to your clinic with swelling in left of mandible, and it's slowly increasing in size since past few months, x-ray examination shows there is a radio opaque surrounded by radiolucent band: What is your diagnosis?  
a. Osteoma.  
c. Cementoblastoma.  
b. Ossifying fibroma.  
d. Osteosarcoma.
150. Radiolucent area covering the pericoronal part of the mandibular 3rd molar is:  
a. Dentigerous cyst  
c. Nasopalatine cyst.  
b. Globulomaxillary cyst  
d. Central
151. Which of the following lesions has more tendency to show well defined multilocular radiolucency?  
a. Ameloblastoma.  
c. Primordial cyst.  
b. Squamous cell carcinoma of jaw bones  
d. Lateral periodontal cyst
152. Intraosseous cyst in radiograph appears:  
a. Multiradiolucent may or not expand to cortical bone.  
b. Radiopaque may or not expand to cortical bone.  
c. Multiradiolucent may with resorption of cortical bone.  
d. Radiopaque may with resorption of cortical bone.  
a. a+c                      b. a+d                      c. b+d                      d. c+d
153. A patient come for check upon complaining. After radiograph you see well circumscribed radiolucent area related to mandibular molar and the periphery was radiopaque, which is not well defined border. The diagnosis is:  
a. Simple bone cyst  
c. Periodontal cyst  
b. Periapical abscess  
d. Periapical granuloma
154. A 45 years old female patient has slow growing swelling in the angle of the mandible. X-ray shows, radiolucent border of radiolucent mass. What is the diagnosis?  
a. Osteoma.  
b. Osteosarcoma.  
c. Cementoblastoma.  
d. Osteochondrosarcoma.

Section-II: Topicwise Questions / Answers

155. Most widely used effect of lasers in dentistry:

- a. Photochemical.    b. Photothermal.    c. Photomechanical    d. Photoelectrical.

156. A patient presents with severe pain. The periapical area over the involved tooth is inflamed and swollen. The tooth is mobile and depressible in its socket with a diffused radiolucency. The diagnosis is:

- a. Acute apical periodontitis.    b. Chronic apical periodontitis  
c. Acute exacerbation of chronic apical periodontitis.    d. Abscess.

157. What's the test used for HIV?

- a. Elisa    b. DOTS test    c. Schick test    d. All the above

158. Which of the following will cause inability for proper movement and position control?

- a. Cerebral palsy.    b. Down syndrome.    c. Epilepsy.    d. Bells palsy

159. A patient has white streaks and ulcers intraorally. Histology shows osteoclastic activity and saw rete tooth appearance. The patient has rheumatic fever and hepatitis history before. Lesion is:

- a. Lincinoid reaction    b. Aphthous ulcers  
c. Lichen plannus    d. Leukoplakia

160. Scattered radiopaque line in the mandible is the radiographical feature of?

- a. Garres syndrome    b. Fibrous dysplasia  
c. Paget disease    d. Osteosarcoma

161. HBV can be transmitted by transplacental:

- a. True.    b. False.

162. While performing cranial nerve examination you notice that the patient is unable to raise his eyebrows, hold eyelids closed, symmetrically smile or evert his lower lip. This may indicate:

- a. Trigeminal nerve problem.    b. Oculomotor nerve problem.  
c. Trochlear nerve problem.    d. None of the above.

163. Which of the following non odontogenic lesions is similar to endodontic lesion?

- a. Ossifying fibroma    b. Dentigeaus cyst  
c. Ameloblastoma    d. None of the above

164. What is the difference between a lateral radicular cyst and a lateral periodontal cyst?

- a. A lateral radicular cyst is an inflammatory  
b. Lateral periodontal cyst is an developmental  
c. Lateral periodontal cyst derived from rests of dental lamina.  
d. A lateral radicular cyst derived from rests of rests of Malassez.  
e. All the above

165. The most common malignant tumors of the minor salivary glands are:

- a. Adenoid cystic carcinoma and adenocarcinoma  
b. Adenoid cystic carcinoma and acinic cell carcinoma  
c. Mucoepidermoid carcinoma and adenoid cystic carcinoma.  
d. Mucoepidermoid carcinoma and polymorphous low grade adenocarcinoma

166. DOTS therapy is used for the treatment of:

- a. Typhoid    b. Malaria  
c. Tuberculosis    d. Hepatitis

#### 4. Oral Pathology

167. Radiographic diagnosis of a well-defined, unilocular radiolucent area between vital mandibular bicuspids is more likely to be:
- a. Residual cyst.
  - b. Mental foramen.
  - c. Radicular cyst.
  - d. Osteoporosis.
  - e. None of the above.
168. Formation of lateral periodontal cyst is due to:
- a. Nasolacrimal cyst
  - b. Hertwig's epithelial root sheath
  - c. Epithelial rest of Malassaz
  - d. Epithelial rests or glands of serrus
169. Which of the following is a character of verrucous carcinomas?
- a. Can be confused with chronic hypertrophic candidiasis
  - b. Can be confused with lichen planus
  - c. Can be confused with acute hypertrophic candidiasis
  - d. Have characteristic microscopic features
170. Patient came to dentist after previous stressful procedure complaining of burning and discomfort of his lip on examination you found lesions on the palate. Diagnosis is:
- a. Contact dermatitis
  - b. Allergy
  - c. Aphthous ulcer
  - d. Herpes simplex
171. After inferior alveolar anesthetic nerve block, the patient showed symptoms similar to facial paralysis. The solution is likely to be deposited in:
- a. Pterygopalatine fossa
  - b. Parotid gland
  - c. Submandibular gland
  - d. Submandibular space
172. Histopathologically, dentigerous cyst lining epithelium may be:
- a. Cuboidal in type.
  - b. Stratified squamous in type.
  - c. Reduced enamel epithelium.
  - d. All of the above.
173. Radiographic diagnosis of bone destructive lesion in the mandible without evidence of bone formation is:
- a. Osteomyelitis.
  - b. Malignancy.
  - c. Fibro-osseous lesion.
  - d. Fracture.
  - e. Osteoradionecrosis.
174. Histopathologically adenoid cystic carcinoma is characterized by islands of:
- a. Basophilic islands of tumor/cells that are intermingled with areas of pseudocartilage
  - b. Basophilic islands of tumor cells having a "Swiss cheese" appearance
  - c. Basophilic islands of tumor cells having a "Swiss cheese" appearance and evidence of serous acini
  - d. Basophilic islands of tumor cells that contain mucin and normal acini
175. Treacher - Collins syndrome is mainly:
- a. Mandibular retrognathia
  - b. Loss of hearing 10% of cases
  - c. Amnibularprognathia
  - d. None of the above
176. Isolation period of chickenpox should be:
- a. After appear of rash by week
  - b. Until vesicle become crusted.
  - c. Until carter stage is last
  - d. First 3 weeks
177. Deficiency of which vitamin does not lead to defects of tooth development?
- a. A
  - b. K
  - c. D
  - d. C
178. Patient came to the clinic complaining from soreness in the tongue, sore throat. The diagnosis is:
- a. Burning mouth syndrome
  - b. Geographical tongue
  - c. Fissure tongue
  - d. None of the above

Section II: Topicwise Questions / Answers

179. *What is the time period for the first onset of HIV virus and the appearance of acute symptoms?*  
a. 1-5 years  
b. 9-11 years  
c. No specific time is known  
d. Above 10 years
180. *The following are multilocular radiolucencies in x-ray except:*  
a. Ameloblastoma.  
b. Odontogenic keratocyst.  
c. Adenomatoid odontogenic cyst.  
d. Myxoma.
181. *Which of the following methods will be used in oral cavity for biopsy?*  
a. Excisional biopsy  
b. Incisional biopsy  
c. Aspiration through needle  
d. Punch biopsy
182. *Which of the following are characteristic of aphthous ulcer?*  
a. Is more characteristic in histology  
b. Leaves a scar  
c. Is less responsive to stress  
d. Occurs in the lining mucosa
183. *Dentinogenesis imperfecta patient can suffer from the following?*  
a. Fracture bone  
b. Fracture enamel  
c. Blue sclera  
d. All the above
184. *Hairy leukoplakia may be caused by except:*  
a. Broad spectrum antibiotic  
b. Cholera toxin mouthwash  
c. Systemic steroids  
d. Heavy smokers
185. *A 50 year old patient visits your dental office with the complaint of smoking stains in his tooth. He wants to remove that, but during examination you find there is a white colored slightly elevated papules in his palate. What is the diagnosis?*  
a. Nicotine stomatitis  
b. Candidiasis  
c. White sponge nevus  
d. Leukoplakia
186. *Which are the signs of dentinogenesis imperfecta?*  
a. Blue sclera  
b. Broken bone  
c. Supernumerary teeth  
d. a+b  
e. All the above
187. *Which of the following are characters of herpes ulcer?*  
a. More characteristic in histology.  
b. Leaves scar.  
c. Less response to stress.  
d. All the above
188. *Ackerman tumor is:*  
a. Malignant.  
b. Benign.  
c. Premalignant  
d. None of the above
189. *Scalloped border above inferior alveolar canal between roots of mandibular molars. This lesion is:*  
a. Solitary cyst.  
b. Aneurysmal bone cyst.  
c. Traumatic bone cyst  
d. Periapical cyst
190. *Which cyst is not radiolucent?*  
a. Globulomaxillary cyst  
b. Follicular cyst  
c. Nasopalatine cyst.  
d. All the above
191. *The x-ray shows scattered radiopaque lines in the mandible jaw. The diagnosis will be?*  
a. Paget disease  
b. Garres syndrome  
c. Fibrous dysplasia  
d. Osteosarcoma



#### 4. Oral Pathology

192. Which of the following is a soft tissue cyst which do not produce any radiographic changes?  
a. Nasolabial cyst. b. Nasopalatine cyst.  
c. Mid alveolar cyst. d. Palatine cyst.
193. Dentigerous cyst is likely to cause which neoplasia?  
a. Ameloblastoma. b. Adenocarcinoma.  
c. Fibrosarcoma. d. All of the above.
194. Burning mouth syndrome is a chronic disorder typically characterized by each of the following?  
a. Burning pain in multiple oral sites. b. Pain similar in intensity to toothache pain.  
c. Persistent altered taste perception. d. All the above.
195. What is the estimated incubation period of HIV infection:  
a. 4 weeks. b. 6 months.  
c. 3 years. d. 6 years. e. 10 years.
196. The most common cause of the angina is:  
a. Stress. b. Renal disease.  
c. Arteriosclerotic plaques of the coronary vessels. d. Hypoglycemia. e. Hypertension.
197. Which of the following is the cause of immediate type allergic reaction to latex product?  
a. Accelerator. b. Antioxidants.  
c. Latex protein. d. Nickel.
198. Aphthous ulcer, compared with herpes ulcer is:  
a. More characteristic in histology. b. Leaves scar.  
c. Less response to stress. d. Occur in lining mucosa.
199. Droplet nuclei containing mycobacterium tuberculosis:  
a. Do not cause infection. b. Settle out of room air quickly.  
c. Do not spread widely in the building. d. Remain airborne for prolonged period.
200. The most common form of oral-ulcerative disease is:  
a. Traumatic ulcer b. Herpatic ulcer  
c. Pempigus. d. None of the above
201. Tobacco should be considered a risk factor when planning for following treatment except.  
a. Implants. b. Periodontal surgery.  
c. Caries removal and restoration. d. Oral surgery.  
e. Esthetic treatment.
202. The most common disease of the submandibular salivary gland is:  
a. Salivary stones b. Pleomorphic adenomas  
c. Viral sialoadenitis. d. Sialoadenitis
203. Neoplasm in angle of the mouth can spread through:  
a. Submandibular lymph nodes b. Mental lymph nodes  
c. Pterygoid plexus. d. Jugulo-digastric nodes
204. The scientific evidence in dictating that oral lichen planus is a "pre-malignant lesion" is  
a. Very strong b. Non-existent  
c. Moderately strong. d. Weak

205. *Cavernous sinus thrombosis. Patient presents with:*
- a. Proptosis
  - b. Orbital swelling
  - c. Neurologic signs
  - d. Ver
  - e. All the above
206. *Dentigerous cyst is lined by:*
- a. Cuboidal in type
  - b. Stratified squamous in type
  - c. Reduced enamel epithelium
  - d. All of the above
207. *Odontogenic tumors:*
- a. Arise from dental tissue
  - b. Can turn malignant but rarely
  - c. Have specific radiographic features
  - d. All the above
208. *Torus palatinus commonly occurs in:*
- a. Anterolateral part of hard palate.
  - b. Posterolateral part of hard palate.
  - c. On the midline of the hard palate.
  - d. None of the above.
209. *Metastases from the floor of the mouth are found most commonly in the:*
- a. Submaxillary lymph node.
  - b. Submandibular lymph node.
  - c. Lingual lymph node.
  - d. Mental lymph node.
210. *Cholesterol crystals are found in:*
- a. Radicular cyst
  - b. Odontogenic keratocyst
  - c. Dentigerous cyst
  - d. All the above
211. *Syphilis first appearance:*
- a. Multiple vesicles
  - b. Erythematous reaction.
  - c. Ulcer.
  - d. Bullae.
212. *Tooth fracture during extraction may occur due to which of the following, except?*
- a. Non vital tooth.
  - b. Diabetic patient
  - c. Improper holding by forceps.
  - d. a and c.
213. *Radiographic radiolucency in the interradicular area:*
- a. Invasion of furcation.
  - b. Periodontal abscess.
  - c. Periodontal cyst.
  - d. Periodontitis
214. *A child 12 years old with swelling in the mandibular premolars area, first premolar clinically missing. In X-ray examination we found radiolucent cover the pericoronal part of the impacted premolar. What is the prognosis?*
- a. Dentigerous cyst
  - b. Lateral periodontal cyst
  - c. Squamous cell carcinoma of jaw bones
  - d. Primordial cyst.
215. *In radiographs, which disease causes multiple radiolucencies?*
- a. Hypothyroidism.
  - b. Hyperparathyroidism.
  - c. Ricket disease.
  - d. Odontogenic keratocyst.
  - e. a+d
216. *A 21 years old patient who has iron deficiency anemia, difficulty in swallowing. With the examination of barium sulphate, you found:*
- a. Plummer Vinson syndrome
  - b. Albright syndrome
  - c. Iron deficiency anemia,
  - d. Buring mouth syndrome

217. A patient comes with bristle even on mucous membrane, Nikolsky's sign is positive. What will be your diagnosis?
- a. Pemphigus vulgaris  
c. Lichen planus
- b. Bullos pemphigoid  
d. None of the above
218. A patient with cleft lip and cleft palate with missing of teeth. This presents with:
- a. Treacher Collins syndrome.  
c. Ectodermal dysplasia
- b. Van Der woude syndrome.  
d. All the above
219. Formation of granulation tissue is due to:
- a. Thrombosed vessels.  
c. Mucosal proliferation.
- b. Budding of new capillaries.  
d. Infiltration of cells.
220. Wickham's striae presents in which of the following?
- a. Pemphigus.  
c. Lichen planus
- b. Bullas pemphogoid.  
d. Aphthous ulcer
221. A patient presents with slightly painful white lesions of oral mucosa which when wiped off shows the red surface underneath. The patient is on penicillin therapy for last 12 weeks. The most likely diagnosis of lesion is:
- a. Actinomycosis  
c. Lichen planus
- b. Candidiasis  
d. Leukoplakia
222. The following are multilocular radiolucencies in x-ray:
- a. Ameloblastoma.  
c. Myxoma.
- b. Odontogenic keratocyst.  
d. All the above
223. Chronic pericoronitis:
- a. Difficult mouth opening  
c. Pain
- b. Halitosis  
d. All of the above.
224. Burning mouth syndrome is a chronic disorder typically characterized by each of the following except:
- a. Accompanied by mucosal lesion.  
c. Pain similar in intensity to toothache pain.
- b. Burning pain in multiple oral sites.  
d. Persistent altered taste perception.
225. Hyper cementum:
- a. Occur in Paget's disease.  
c. Bulbous root.  
e. a and b.  
g. All the above.
- b. Difficult to extract.  
d. Easy to manage by elevator.  
f. a and d.
226. In puperty, Albright precocious syndrome is suspected, if the following features are present:
- a. Eagle syndrome autonomous  
c. Unilateral Café-au-lait spots
- b. Polyostotic fibrous dysplasia  
d. All the above
- Eagle syndrome is a rare condition where an elongated temporal styloid process (more than 30 mm) is in conflict with the adjacent anatomical structures. can present with unilateral sore throat, dysphagia, tinnitus, unilateral facial and neck pain, and otalgia.
227. Histopathologically, early verrucous carcinoma have characteristic microscopic features
- a. Can be confused with acute hypertrophic candidiasis  
b. Can be confused with lichen planus  
c. Can be confused with chronic hypertrophic candidiasis  
d. It could be similar to papilloma

Section II: Topicwise Questions / Answers

228. A patient on antibiotic therapy for scarlet fever develops white plaques on his oral mucosa which when scraped with tongue blade leaves a painful bleeding surface. Most probable diagnosis is:

- a. Blastomycosis  
 c. Herpes simplex infection  
 b. Candidiasis  
 d. Syphilis

229. Edema is caused by which organism:

- a. Staphylococcus aureus  
 c. Streptococcus salivarius  
 b. Streptococcus mutans  
 d. Lactobacillus

230. Which of the following is the feature of hyperplastic candidosis?

- a. Caused by candida  
 c. Appears as white patches  
 b. Can lead to carcinoma  
 d. All the above

231. Most common skin cancer

- a. Squamous cell carcinoma  
 c. Squamous cell carcinoma  
 b. Basal cell carcinoma  
 d. None of the above

232. Epstein Barr virus in:

- a. Burkitt lymphoma  
 c. Infectious mono nucleolitis  
 b. Hodgkin's lymphoma  
 d. All the above

233. Patient has numerous sebaceous cyst over scalp and neck, he has many supernumerary teeth impacted in the jaws. Diagnosis is:

- a. Gardner's syndrome  
 c. Clidocranial dysplasia  
 b. Ectodermal dysplasia  
 d. Osteopetrosis

234. Most common malignancy of jaw bone is:

- a. Multiple myeloma  
 c. Osteogenic sarcoma  
 b. Osteiodosteoma  
 d. Osteochondroma

235. Dentinogenesis imperfecta type I patient can suffer from the following, except:

- a. Fracture bone.  
 c. Blue sclera.  
 e. Supernumerary teeth.  
 b. Fracture enamel.  
 d. Paget disease.

236. Wicham's straiie are seen in:

- a. Lichens planus  
 c. Aphthous ulcer  
 b. Pemphigus  
 d. Gingivitis

237. Gold standard in hepatitis:

- a. HBsAg assay  
 c. DOTS  
 b. Elisa  
 d. Schick

238. Premaxilla maxillary cyst is the same as:

- a. Globulomaxillary cyst.  
 c. Nasoalveolar cyst.  
 b. Median mandibular cyst.  
 d. Nasopalatine duct cyst.

239. Treacher Collins syndrome have characterstic feature:

- a. Prognathesia of mandible.  
 c. Upwards lenting of eye.  
 b. No ear loss.  
 d. Zygomatic arch malformed

240. Treatment of mucocele on lower lip:

- a. Incision.  
 c. Excision with adjacent glands.  
 b. Excision.  
 d. Biopsy.

241. *The most common fissural abnormality is:*  
 a. Cleft palate  
 c. Cleft lip & palate  
 b. Cleft lip  
 d. None of the above
242. *Which of the following is the most complicated fissural abnormality?*  
 a. Cleft palate  
 c. Cleft lip & palate  
 b. Cleft lip  
 d. None of the above
243. *A 45 year old patient having chronic renal failure. He is undergoing regular hemodialysis. Extraction of his tooth has to be done:*  
 a. One day before hemodialysis  
 c. One day after hemodialysis  
 b. On the day of hemodialysis  
 d. One week after hemodialysis
244. *A patient is undergoing long term steroid therapy. He has to go for extraction of his teeth to avoid the adrenal crisis, following drug has to be given*  
 a. Hydrocortisone sodium  
 c. Dexamethasone(IV)  
 b. Hydrocortisone succinate  
 d. Prednisolone
245. *Chickenpox patient has to be isolated:*  
 a. For 10 days  
 c. Till the catra stage subside  
 b. Till the lesion subside  
 d. After the fever subside
246. *Tooth with periapical granuloma after extraction pear shaped hard tissue found on bifurcation area, this is due to:*  
 a. Apical granuloma  
 c. Dentigerous cyst  
 b. Hypercementosis  
 d. Enamel pearl
247. *Patient having cleft palate, cleft lip, lip pit, hypodontic tooth. What is the diagnosis?*  
 a. Osteogenesis imperfect  
 c. Van der woude syndrome  
 b. Stills syndrome  
 d. Down syndrome
248. *Enamel pearl is present in tooth near:*  
 a. Apex of the root  
 c. Later border of root  
 b. Furcation area  
 d. Near cervical line
249. *Which disease is caused during initiation and proliferation phase of tooth development?*  
 a. Amelogenesis imperfecta  
 c. Oligodontia  
 b. Dentinogenesis imperfecta  
 d. Odonto dysplasia
250. *Psoriasis is associated with:*  
 a. Geographic tongue.  
 c. Lupus erythematosus  
 b. Benign median rhomboid glossitis  
 d. Lupus vulgaris.
251. *Squamous cell carcinoma is multifactorial:*  
 a. True  
 b. False
252. *Differences between ANUG and AHGS is:*  
 a. ANUG occurs in dental papillae while AHGS presents with diffuse erythematous inflamed gingivae  
 b. ANUG occurs during young adult and AHGS in children  
 c. All of the above  
 d. None of the above

253. *Radio opacity attached to root of mandibular molar:*
- |                                  |                    |
|----------------------------------|--------------------|
| a. Ossifying fibroma             | b. Hypercementosis |
| c. Periapical cemental dysplasia | d. Cementoma       |
254. *Large anterior fontanelles, open sutures, slanting eyes, decreased sexual development, macroglossia and enamel hypoplasia are seen in:*
- |                               |                      |
|-------------------------------|----------------------|
| a. Craniofacial dysostosis.   | b. Down syndrome.    |
| c. Treacher Collins syndrome. | d. Marfans syndrome. |
255. *Mucus retention cyst can be treated by:*
- |              |                      |
|--------------|----------------------|
| a. Excision. | b. Cauterization.    |
| c. Incision. | d. Marsupialization. |
256. *A 55 year old male has mucocutaneous lesion. On immunostaining it shows auto antibodies:*
- |                      |                       |
|----------------------|-----------------------|
| a) Pemphigus bullous | b) Pemphigus vulgaris |
| c) Aphthous ulcers   | d) Lichen planus      |
257. *If there is mass within the submandibular gland then:*
- |                                   |  |
|-----------------------------------|--|
| a. Whole gland should be removed. | b. Mass with some unaffected margin should be removed. |
| c. Only mass should be removed.   | d. No need to remove. It can cure by radiation.        |
258. *Initial lesion of acquired syphilis is:*
- |            |                       |
|------------|-----------------------|
| a. Ulcer   | b. Vesicles           |
| c. Chancre | d. Punched out lesion |
259. *Silicosis disease occurs in:*
- |                          |                          |
|--------------------------|--------------------------|
| a. Farmers               | b. Glass factory workers |
| c. Medical professionals | d. Pregnant females      |
260. *A patient presents with deficiency at the malar bone and he has open bite but normal mental abilities;*
- |                              |                            |
|------------------------------|----------------------------|
| a. Treacher Collins syndrome | b. Cleidocranial dysplasia |
| c. Eagle syndrome            | d. Albright syndrome       |
261. *Apical periodontal cyst most commonly involves:*
- |                          |                           |
|--------------------------|---------------------------|
| a. Maxillary anteriors.  | b. Maxillary posteriors.  |
| c. Mandibular anteriors. | d. Mandibular posteriors. |
262. *Epstein pearls are cysts that arise from:*
- |                                   |                                     |
|-----------------------------------|-------------------------------------|
| a. Squamous tissue of the mucosa. | b. Connective tissue of the mucosa. |
| c. Rests of Malassez.             | d. Dental lamina.                   |
263. *As a manifestation of AIDS; Kaposi's sarcoma most commonly occurs at:*
- |            |          |            |           |
|------------|----------|------------|-----------|
| a. Tongue. | b. Lips. | c. Palate. | d. Cheek. |
|------------|----------|------------|-----------|
264. *'Onion skin' appearance of radiographs is seen in:*
- |                       |                    |
|-----------------------|--------------------|
| a. Fibrous dysplasia. | b. Osteosarcoma.   |
| c. Ewing's sarcoma.   | d. Chondrosarcoma. |
265. *Necrotizing sialometaplasia most commonly affects:*
- |                        |                          |
|------------------------|--------------------------|
| a. Parotid gland.      | b. Submandibular gland.  |
| c. Submaxillary gland. | d. Minor salivary gland. |

266. Which of the following is not a type of cerebral palsy?
- |                |               |
|----------------|---------------|
| a. Spasticity. | b. Autism.    |
| c. Ataxia.     | d. Athetosis. |
267. Cholesterol crystals are found in:
- |                       |                     |
|-----------------------|---------------------|
| a. Keratocyst         | b. Periodontal cyst |
| c. Naso palatine cyst | d. All the above    |
268. Lining epithelium of dentigerous cyst is:
- |                                |                              |
|--------------------------------|------------------------------|
| a. Stratified squamous in type | b. Reduced enamel epithelium |
| c. Cuboidal in type            | d. All of the above          |
269. Which of the following is a benign epithelial neoplasm?
- |                    |                        |
|--------------------|------------------------|
| a. Rhabdomyoma     | b. Fibroma             |
| c. Lipoma          | d. Granular cell tumor |
| e. Keratoacanthoma |                        |
270. Unilateral swelling with slowly progressing lesion on the left side of the mandible. This could be:
- |                      |                    |
|----------------------|--------------------|
| a. Osteoma           | b. Cementoblastoma |
| c. Ossifying fibroma | d. Osteo-sarcoma   |
271. Apical periodontal cyst arises from:
- |                                   |                                     |
|-----------------------------------|-------------------------------------|
| a. Hertwig sheath                 | b. Epithelial cell rest of malassez |
| c. Epithelial cell rest of serrus | d. Dental lamina                    |
272. Which is the most likely cause of periodontal cyst?
- |                          |                        |
|--------------------------|------------------------|
| a. Cell rest of Malassez | b. Cell rest of serrus |
| c. Cell of Hertwig sheet | d. None of the above   |
273. HIV can be transmitted by transplacenta:
- |          |           |
|----------|-----------|
| a. True. | b. False. |
|----------|-----------|
274. In sickle cell anemia,  $O_2$  is decreased in oral mucosa:
- |          |           |
|----------|-----------|
| a. True. | b. False. |
|----------|-----------|
275. Immunofluorescence test and biology are used to diagnosis pemphigus:
- |          |           |
|----------|-----------|
| a. True. | b. False. |
|----------|-----------|
276. Arecanut chewing is etiological factor in:
- |                     |                             |
|---------------------|-----------------------------|
| a. Leukoedema.      | b. Oral submucous fibrosis. |
| c. Erythematiforme. | d. Oral lichen planus.      |
277. The following are types of hamartoma except:
- |                     |                      |
|---------------------|----------------------|
| a. Cementoblastoma  | b. Compound odontoma |
| c. Complex odontoma | d. All the above     |
278. Aplastic anemia is caused by:
- |                 |                |
|-----------------|----------------|
| a. Tetracycline | b. Penicillin  |
| c. Erythromycin | d. Sulfonamide |
279. A patient comes to clinic, after you check up you see supernumerary teeth and missing clavicle bone. What is the diagnosis:
- |                    |                              |
|--------------------|------------------------------|
| a. Paget's disease | b. Treacher Collins syndrome |
| c. Down syndrome.  | d. Cleidocranial dysplasia.  |

280. A patient comes to your clinic with severe pain; on x-ray the right side of the mandible has radiolucency with a radiopaque border that resembles the sunshine rays. Your diagnosis is:
- Ossifying fibroma.
  - Osteosarcoma.
  - Acute osteomyelitis.
  - Chronic osteomyelitis
281. Which of the following conditions is highly indicated for the short therapy of DOTS and is directly observed once in the clinic?
- Tuberculosis.
  - HIV.
  - H1N1.
  - Mental illness.
282. The root most likely to be pushed into the maxillary sinus during a tooth extraction is:
- Palatal root of the maxillary second molar
  - Palatal root of the maxillary first premolar
  - Palatal root of the maxillary first molar
  - Mesiobuccal root of the maxillary first molar
283. A patient with renal transplantation came with white elevated lesion on tongue no history of smoking or tobacco chewing diagnosis is:
- Candidiasis.
  - Iatrogenic lesion.
  - Hyperkeratosis.
  - Uremic stomatitis
284. All of the following about Stafne's cyst are true, except:
- Depression on lingual posterior surface of mandible
  - Usually located above inferior mandibular canal
  - Radiograph shows unilocular well circumscribed radiolucency
  - Usually located between first molar and angle of mandible
285. Malignancies associated with HIV:
- Kaposi sarcoma.
  - NHL.
  - Primary hepatitis B infection.
  - All.
286. Slow growing cyst at the site of 26, 27, 28 and 28 is missing:
- Dentigerous cyst
  - Periapical cyst
  - Radicular cyst
  - Static bone cyst
287. Which of the following is most firm?
- Ranula.
  - Angioma.
  - Lipoma.
  - All are equally firm.
288. Ameloblastoma can develop from:
- Residual cyst,
  - Lateral periodontal cyst
  - Apical cyst
  - Dentigerous cyst
289. Hepatitis B patient is communicating disease:
- Before the appearance of symptoms,
  - After appearance of symptoms,
  - During symptomatic phase.
  - All the above
290. Hypovolumic shock symptoms:
- Mental confusion,
  - Nausea,
  - Vomiting,
  - Pain
291. Patient is having Plummer Vinson syndrome with esophageal web has following symptoms
- Iron deficiency anemia
  - Inability to swallow
  - Boat shape nail bed
  - All the above



#### 4. Oral Pathology

292. *Repeated infections:*
- a. Diabetes mellitus
  - b. Hepatitis
  - c. TB
  - d. Flu
293. *How do you treat a mucocoele on lip region?*
- a. Excision
  - b. Cautry
  - c. Marsupialisation
  - d. Enucleation
294. *You see a radiolucent area in ramus and angle of mandible and lamina dura is intact and teeth in position. What is your diagnosis?*
- a. Radiolucent scalloped lesion above the inferior alveolar canal
  - b. Traumatic bone cyst
  - c. Solitary bone cyst
  - d. Central giant cell granuloma
295. *Patient's skin is shiny, he is having hypercementosis of tooth. What is the diagnosis?*
- a. Hyperparathyroidism,
  - b. Fibrous dysplasia
  - c. Paget's disease
  - d. All the above
296. *Malassaz epithelial cells:*
- a. Proliferate to periapical granuloma
  - b. Rest of malassez decrease with age.
  - c. Rest of malassez increase with age
  - d. Become Hertwig sheath
297. *Formation of periodontal cyst is due to:*
- a. Nasolacrimal cyst.
  - b. Hertwig's epithelial root sheath
  - c. Epithelial rest of Malassaz.
  - d. Peals of Serres.
298. *Primary malignant melanoma of the oral mucosa:*
- a. Always originates within the surface epithelium.
  - b. Mostly originates within the surface epithelium.
  - c. Always originates from nevus cells in the connective tissue.
  - d. Always originates from Langerhans cells within epithelium.
299. *Which of the following is premalignant disease with great risk?*
- a. Homogenous leukoplakia
  - b. Erythroplakia.
  - c. Chronic hyperplasic candidiasis
  - d. Speckled leukoplakia
300. *Generalized gray discoloration in a enlarged pulp chambers and short roots is:*
- a. Dentinogenesis imperfecta.
  - b. Dentine dysplasia.
  - c. Amelogenesis imperfecta
  - d. None of the above
301. *Clear view of mucous retention cyst is seen in:*
- a. OPG.
  - b. Water's view.
  - c. SMV view.
  - d. IOPA.
302. *Ghost teeth appears in:*
- a. Dentigerous imperfecta
  - b. Regional odontodysplasia
  - c. Amelogenesis imperfecta
  - d. Paget's disease
303. *Patient receiving radiation therapy to oral structures have increased number of following microorganisms, except:*
- a. Streptococcus mutans.
  - b. Staphylococcus aureus.
  - c. Lactobacillus.
  - d. Candida.

304. *A patient has frequent infections and has lost weight recently, has frequent urge to urinate. What's your diagnosis?*
305. *The spread of odontogenic infection is based on:*
306. *The most common form of oral ulcerative disease is:*
307. *The majority of primary herpetic infections are:*
308. *Which of the following are oral features of acquired immunodeficiency syndrome?*
309. *Clinical features of lichen planus is:*
310. *A patient has white lesion on lateral of tongue and his cheek, when scrubbed (wiped off) leaving eroded, bleeding surface. What is the diagnosis?*
311. *Oral and perioral cyst formed from epithelial rest of serrus:*
312. *A patient with lesion ~~at~~ the posterior of the tongue. We want to take excisional biopsy. How to pull the tongue forward?*
313. *'Floating tooth syndrome' is seen in:*
314. *Stotic cyst in lower premolar region, the treatment will be:*
315. *A patient having asymptomatic swelling at the region of premolar in mandible. Radiographic and histologic features reveal that it is a S cyst of bone. What would be the treatment?*

316. *Hyperparathyroidism will cause:*
317. *Which virus is present in the patient's mouth all his life?*
318. *In geriatric patients, cementum on the root end will:*
319. *Stage IB disease of squamous cell carcinoma:*
320. *A patient has stone in submandibular duct, how to remove the sialolithiasis:*
321. *Geographic tongue is associated with:*
322. *The lesion well defined radioopacity (RO) with ached to the molar separated radiolucent rim:*
323. *Most common cyst in oral cavity is:*
324. *Salivary gland disease (Swiss cheese) patient in x-ray:*
325. *Patient with solitary bone cyst, the treatment is:*
326. *Ameloblastoma of jaw can be treated by:*
327. *Fissural cyst and entirely located on soft tissue*
328. *Multiple odontogenic cyst seen in:*

Section II: Topicwise Questions / Answers

329. *What characteristic features can be seen in anteriolateral part of palate?*  
a. Sebaceous gland  
c. Salivary gland  
b. Taste buds  
d. Mucous gland
330. *A patient comes with a need restoration on upper right canine, take periapical radiograph, there is an image show radiolucency on periapical area in upper right lateral, the image shows no caries no fracture no perio involvement. Then your diagnosis is:*  
a. Periapical cyst  
c. Apical abscess  
b. Radicular cyst  
d. Periapical fibrous dysplasia
331. *A patient with multiple bone deformity, multiple OKC with Café-au-lait. Diagnosis is:*  
a. Hegashi syndrome  
c. Albright syndrome  
b. Syphilis  
d. Addison disease
332. *A patient with renal replacement and there is an image showing a white spot on his soft palate. Diagnosis is:*  
a. Pseudo membranous thrush  
c. Bacterial infection  
b. Erythematous candida  
d. Viral infection
333. *Which cancer is associated with gardener?*  
a. Skin  
c. Thyroid  
b. Liver  
d. Colorectal cancer
334. *Von Willebrand disease is:*  
a. Hemophilic disease  
c. Congenital cardiac disease  
b. Bacterial endocardis  
d. Rheumatic fever
335. *A female pt. comes to your clinic with a mass on left side of the neck, slowly growing. Started 6 yrs before, First surgeon said its harm sialodentitis, now on CT scan show mass of submandibular gland. Diagnosis is*  
a. Pleomorphic adenoma  
c. SCC  
b. Adenomatoidodontogenic.  
d. Glandular cyst
336. *Bacteria cause acute osteomyelitis in mandible:*  
a. Streptococcus  
b. Staphylococcus aureus
337. *X-ray picture for central with periapical large R.L:*  
a. Radicular cyst  
b. Dentigerous cyst
338. *Man with multi specious gland, osteomas in mandible, impacted teeth:*  
a. Gardner syndrome  
c. Albret's syndrome  
b. Down syndrome  
d. None of the above
339. *Hyperalgias:*  
a. Prostaglandin and serotonin  
c. Thyroxin  
b. Adrenalin
340. *Mamelon present in maxillary central incisor:*  
a. During amelogenesis  
c. Indicated sever malocclusion  
b. Normal
341. *The affected chromosome in mongolism patient:*  
a. Chromosome 19  
c. Chromosome 21  
b. Chromosome 20  
d. Chromosome 22

342. *Ameloblastoma follow up:*

- a. 10 years  
c. 3 years
- b. Every year  
d. 5 years

343. *The virus that causes herpes:*

- a. Epstein Bar V.  
c. Herpes simplex I
- b. Human papilloma V.  
d. Herpes simplex II

344. *Salivary gland disease tumor with perineural invasion:*

- a. Pleomorphic adenoma.  
b. Adenocystic carcinoma.

345. *Reiter syndrome:*

- a. Patient has TMJ pain and go to ophthalmologist  
c. Patient have TMJ pain only
- b. Patient has tooth pain and go to ENT

346. *A pt. with chronic renal failure. What has developed:*

- a. Hyperthyroidism  
c. Hypothyroidism
- b. Hyperparathyroidism  
d. Hypoparathyroidism

347. *What is the difference between center of the growth and site of growth?*

- a. Independent  
c. Center of growth is rapid
- b. Centered

348. *Question about Horner syndrome:*

- a. Oculosympathetic paresis  
c. Significant morbidity and mortality
- b. No loss of ocular function  
d. All the above

349. *Sign for venous thrombosis:*

- a. Homan's  
b. Hercules  
c. Hugmans  
d. albrechts

350. *Dye that used to differentiate between normal and cancerous tissue?*

- a. Toluidine blue  
c. Cresyl violet
- b. Bismark brown  
d. Eosin

351. *Polycystic lateral periodontal cyst is:*

- a. Odontogenic keratocyst  
c. Calcified cyst
- b. Botrioid cyst

352. *Down syndrome patient has:*

- a. Fissured tongue and protrusive  
c. Class 3 malocclusion
- b. High caries index  
d. Cleft lip

353. *A patient comes, can't taste sugar in anterior part of tongue. Which cranial nerve is affected:*

- a. Thyroglossal  
c. Facial
- b. Vagus  
d. Glossily

Facial = chorda tympani

354. *Change of tooth disorder happen in which stage:*

- a. Dentinogenesis  
c. Enamel hypoplasia
- b. Amelogenesis

355. *Lesion at junction between soft and hard palate and surrounded with pseudoepithelium and hyperplasia in salivary gland?*
356. *A patient feels severe pain in upper mouth, pain is radiated to ear and eye. After you check no caries, When you pressure on premolar feel pain?*
357. *A patient with lesion in posterior of the tongue. We want to take biopsy. How to pull the tongue?*
358. *A patient 22 yr smoking and stopped from 2 years, with inflamed dental papilla?*
359. *Flat, distinct, discolored area of skin:*
360. *Chronic renal disease comes with:*
361. *The content structure of salivary gland that has the role of controlling the concentration of chloride and sodium in saliva:*
362. *A patient 70 years has invasive poor differentiated ulcer lesion SCC. Its prognosis will be:*
363. *Which of the following has high recurrence rate?*
364. *Treacher Collins syndrome has:*
365. *Nerve that carries preganglionic fibers to pterygoid plexus:*
366. *A female patient with melanoma around the mouth. What is the prognosis?*
367. *During examination, there is an elevated lesion on the cheek, that has variable "many color". What is the diagnosis?*
368. *A patient after he quit smoking, minor aphthous ulcer appear. What is the cause?*

369. *Bluish to red swollen lesion on tip of tongue and laterally indicates:*

370. *Student had a stress and he has white lesion in his oral mucous of tongue and cheek. What he has?*

371. *Patient not able to open his eyelid, he may have problem in which cranial nerve?*

372. *A male patient visits your clinic, had irregular thickening of mandible?*

373. *A 65 yr old patient has a heavy calculus in her lower anterior teeth, after scaling you found 1 mm of horizontal bone loss and radiolucency between the roots of canine and lateral incisors?*

374. *A 38 year old male patient with burning sensation of tongue. He says he remembers having them all life, it could be:*

375. *A patient has fever a week ago, coming to the clinic complaining from palatal nodule with yellow base, histopathology shows that it is sialometaplasia. What is the treatment?*

376. *A pedo patient has difficulty in communicating with people and in learning. He pushes the food instead of swallowing it.*

377. *A 45 days baby, during examination we find asymptomatic, white, multiple nodules on the mid of the palate. What is your diagnosis?*

378. *How to check respiration if the pt. has respiratory problem?*

379. *A patient with TMJ pain, limited mandibular movement, pain in the morning for 30 minutes which works and progresses during day, limited joint space, RG formation of osteopaindivert head, clinically pain auricular area:*

Section II: Topicwise Questions / Answers

380. A patient has brown tooth, discoloration skin, slowly growing, no oral manifestations histology degeneration of melanocyte:
- a. Oral melanotic macula  
b. Lentigo melanoma  
c. Junctional nevus
381. Bilateral firm swelling palate syndrome, the most common things the surgeon expect to have in patient:
- a. Paralysis, facial edema, fissured tongue  
b. Paralysis, uveitis, serostomia  
c. Paralysis, ptosis, naso pharynx tumor  
d. Paralysis, herpes zoster in ear
382. Ulcer pharynx mouth and have desquamation body treated conjunctiva:
- a. Erythema multiforme  
b. Syphilis  
c. Stephen John syndrome
383. A 5 years old patient had extraction after a few days came with fever, sore throat, cervical lymphadenopathy, pain, bleeding, investigations show anemia thrombocytopenia WBC low:
- a. Acute lymphoblastic leukemia  
b. Acute myeloanemia  
c. Chronic myeloanemia
384. Squamous cell carcinoma start first as:
- a. Red plaque  
b. Blue patch  
c. White patch  
d. Black plaque
385. During eruption of lower mandibular molar, there is a specula of hard tissue in the central fossa when the tooth is erupting, this is called:
- a. Ectopic eruption  
b. Hematoma  
c. Eruption sequestering  
d. Eruption cyst
386. A patient came to your clinic with left eyelid closed, left side of the face is semi paralyzed, the left corner of the mouth can't smile accurately and elevate eyebrow. Which cranial nerve is affected?
- a. Facial nerve  
b. Trochlear nerve  
c. Trigeminal nerve
387. Difference between abscess and cellulites is:
- a. Cellulites is more diffuse than abscess without pus  
b. Abscess is more diffuse than cellulites without pus  
c. All like each other need medication and drainage
388. A patient with severe gingival redness and hyperplasia, using local medication for nose, histopathology, eosinophils + antibodies, low plaque index:
- a. Scarlet fever  
b. Granulomatosis  
c. Rhinorrhea
389. The doctor suspects hypophosphatasia, which of the following lab finding will assure the diagnosis:
- a. ↑ Alkaline phosphatase in liver  
b. ↓ Acid phosphatase in liver  
c. ↓ Calcium level in liver  
d. ↑ Urinary phosphoethar amine



#### 4. Oral Pathology

#### EXPLANATION

#### Section II: Topicwise Questions / Answers

1. Answer: a
2. Answer: a
3. Answer: a
4. Answer: a
5. Answer: c
6. Answer: a
7. Answer: b
  - i. Hyperglycemia
  - ii. Adrenal insufficiency
  - iii. Adrenal crisis
  - iv. Hyperthyroidism

Hyperglycemia = warm dry skin  
Adrenal insufficiency = cold wet skin  
Hyperthyroidism = warm wet skin
8. Answer: a  
*Reference:* Carranza's Clinical Periodontology, page 384
9. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361  
*Reference:* Article: British Dental Journal

Spontaneous regression of bilateral dentigerous cysts associated with impacted mandibular 3rd molar. Ameloblastomas are often associated with the presence of unerupted teeth. Radiographically, it appears as a lucency in the bone of varying size and features—sometimes it is a simple, well-demarcated lesion whereas it often demonstrates as a multiloculated "soap bubble" appearance. Resorption of roots of involved teeth can be seen in some cases, but is not unique to ameloblastoma. The disease is most often found in the posterior body and angle of the mandible, but can occur anywhere in either the maxilla or mandible.

Ameloblastoma is often associated with bony-impacted wisdom teeth—one of the many reasons some dentists recommend having them extracted.- 10. Answer: a  
Herpes simplex infection. (primary herpetic gingivostomatitis) The symptoms can be mild or severe and may include:
  - Not able to chew or swallow
  - Sores on the inside of the cheeks or gums
  - Fever, anorexia, irritability, malaise and headache
  - General discomfort, uneasiness, or ill feeling
  - Very sore mouth with no desire to eat
  - Halitosis (bad breath)

11. Answer: b  
*Reference:* Danies' Textbook of Pediatric Dentistry, page 481
  12. Answer: a  
Dentigerous cysts often associated with impacted mandibular 3rd molar
  13. Answer: d  
*Reference:* Glickman, 9th ed, page 43
  14. Answer: a
  15. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 1127
  16. Answer: c
  17. Answer: a  
*Reference:* <http://www.silicosisclaims.com/about.html>
  18. Answer: d  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452
  19. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology  
Squamous cell carcinoma is a malignant lesion which arises from epithelial tissue. Mucous epithelial membrane is a oral epithelial membrane.
  20. Answer: a  
*Reference:* Wheeler's Dental Anatomy, Physiology and Occlusion
  21. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 10
  22. Answer: b  
The etiology of cleft-lip and cleft palate involves both hereditary and environmental factors.
  23. Answer: a  
*Reference:* Dental Decks 2nd ed, page 1030-1039
  24. Answer: b  
*Reference:* Dental Decks, 2nd ed, page 170
  25. Answer: c  
*Reference:* Radiographically the "moth-eaten" appearance is quite characteristic
  26. Answer: a  
*Reference:* Dental Secrets by Stephen T. Sonis, page 95
- Oral paresthesia may be caused by manipulation or inflammation of a nerve or tissues around a nerve, direct damage to a nerve or tissues around a nerve, impinging on or invading a nerve, primary neural tumor, and central nervous system tumor

4. Oral Pathology

Section II: Topicwise Questions / Answers

27. Answer: c

*Reference:* Shafer's Textbook of Oral Pathology, page 344  
(Necrotizing sialometaplasia (also spelled necrotising sialometaplasia) is a benign ulcerative lesion found mostly on the posterior hard palate. It is due to a necrosis of minor salivary glands due to trauma (often palatal infiltrations of local anaesthetic or trauma during intubation).)

28. Answer: a

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

Shafer's Textbook of Oral Pathology

**Amelogenesis Imperfecta**

Amelogenesis imperfecta has teeth with abnormal color: yellow, brown or grey; this disorder can affect any number of teeth of both dentitions. The teeth have a higher risk for dental cavities and are hypersensitive to temperature changes as well as rapid attrition, excessive calculus deposition, and gingival hyperplasia.

Dentinogenesis imperfecta (DI) is a genetic disorder of tooth development. This condition is a type of dentin dysplasia that causes teeth to be discolored (most often a blue-gray or yellow-brown color) and translucent giving teeth an opalescent sheen. Teeth are also weaker than normal, making them prone to rapid wear, breakage, and loss

29. Answer: c

*Reference:* Burket's Oral Medicine, 10th ed, page 114

30. Answer: b

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

31. Answer: d

*Reference:* Burket's Oral Medicine 10th ed, page 395

32. Answer: c

*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 11

33. Answer: d

*Reference:* Burket's Oral Medicine 10th ed, page 246

34. Answer: c

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452

35. Answer: b

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452-453

36. Answer: a

37. Answer: c

Syndrome of Sjögren's syndrome is a generalized dryness, typically including xerostomia (dry mouth) and keratoconjunctivitis sicca (dry eyes), part of what are known as sicca symptoms.

38. Answer: a

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

*Reference:* Shafer's Textbook of Oral Pathology

39. Answer: b

*Reference:* Goaz White Oral Radiology Principles and Interpretation, page 116  
Dental Decks, 2nd ed, page 1336 "Burket- Oral Medicine"

40. Answer: d

*Reference:* Shafer's Textbook of Oral Pathology

41. Answer: d

42. Answer: a

*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 10  
[http://en.wikipedia.org/wiki/Van\\_der\\_Woude\\_syndrome](http://en.wikipedia.org/wiki/Van_der_Woude_syndrome)  
Van Der Woude syndrome (VDWS) is a genetic disorder. People with VDWS have cleft lip with or without cleft palate, isolated cleft palate, pits or mucous cysts on the lower lip, and hypodontia. Affected individuals have normal intelligence.

43. Answer: c

*Reference:* Dental Decks, 2nd ed, page 170

44. Answer: a

*Reference:* Dental Secrets by Stephen T. Sonis, page 95

45. Answer: e

*Reference:* Shafer's Textbook of Oral Pathology

46. Answer: a

*Reference:* [http://en.wikipedia.org/wiki/Pulp\\_\(tooth\)](http://en.wikipedia.org/wiki/Pulp_(tooth))  
Odontoblastic layer: outermost layer which contains odontoblasts and lies next to the predentin and mature dentin.

47. Answer: d

*Reference:* Robbins's Basic Pathology, page 584

48. Answer: a

*Reference:* Shafer's Textbook of Oral Pathology

49. Answer: d

*Reference:* Shafer's Textbook of Oral Pathology

50. Answer: b

*Reference:* Shafer's Textbook of Oral Pathology

51. Answer: d

*Reference:* Goaz White's Oral Radiology Principles and Interpretation, page 225

52. Answer: d

*Reference:* Dhingra's Ear Nose and Throat, page 315

53. Answer: a

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452

54. Answer: b

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452

55. Answer: b

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452  
Floor of mouth is the most common site of intra oral cancer

56. Answer: b

*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452

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57. Answer: f

Reference: Burket, Oral Medicine - A white "cauliflower like lesion" SCP, page 553

Clinical appearance: Most often seen as a painless ulcer, although may present as a swelling, an area of leukoplakia, erythroleukoplakia or erythroplakia (A reddened patch), or as malignant change of long-standing benign tumors or rarely in cyst linings. Pain is usually a late feature when the lesion becomes superficialized or during eating of spicy foods. Referred algalgia is a common manifestation of pain from oral cancer. The ulcer is described as firm with raised edges, with an indurated, inflamed, granular base and is fixed to surrounding tissues.

Squamous cell papillomas may present as exophytic pedunculated papules with a cauliflower-like appearance.

58. Answer: d

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 452-453

59. Answer: e

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 452

Reference: [http://en.wikipedia.org/wiki/Non-small\\_cell\\_lung\\_carcinoma](http://en.wikipedia.org/wiki/Non-small_cell_lung_carcinoma)

T1 N0 M0	Stage IA
T2 N0 M0	Stage IB
T1 N1 M0	Stage IIA
T2 N1 M0	Stage IIB
T3 N0 M0	
T1 N2 M0	Stage IIIA
T2 N2 M0	
T3 N1 M0	
T3 N2 M0	
Any T N3 M0	Stage IIIB
T4 Any N M0	
Any T Any N M1	Stage IV

60. Answer: a

61. Answer: a

Reference: Shafer's Textbook of Oral Pathology, page 957

62. Answer: d

Reference: Gozdz White's Oral Radiology Principles and Interpretation, page 116

63. Answer: a

Reference: Shafer's Textbook of Oral Pathology

64. Answer: b

Reference: Shafer's Textbook of Oral Pathology

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65. Answer: b

66. Answer: e

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 446

Shafer's Textbook of Oral Pathology

67. Answer: d

Reference: Shafer's Textbook of Oral Pathology

Dentogenesis imperfecta, type I includes the 14 symptoms listed below:

Bilush-gray teeth - Amber-colored teeth - Bulbous teeth crowns

Absent - toothcanals-pulp chambers roots

Too small - canals tooth-pulp chambers roots

Enamel separation(dentin) from the ivory

Misaligned-Recurring dental teeth abscess - Brittle bones - Blue sclera

68. Answer: a

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

Shafer's Textbook of Oral Pathology

69. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 449

A commonly observed condition of defective desquamation of the filiform papillae.

70. Answer: e

Reference: Shafer's Textbook of Oral Pathology, 4th ed, page 628

71. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page 453

Oral Pathology Clinical Pathologic Correlation, 3rd edition, Page 170-171.

72. Answer: b

73. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed page 462

74. Answer: b

Reference: Oxford Handbook of Clinical Dentistry, 4th ed page 414

75. Answer: a

76. Answer: b

77. Answer: b

78. Answer: a

79. Answer: a

Reference: Oxford Handbook of Clinical Dentistry, 4th ed, page-410

80. Answer: b

Reference: Shafer's Textbook of Oral Pathology, 4th ed, page 701

Oxford Handbook of Clinical Dentistry, 4th ed., page 416

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81. Answer: a
82. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 676
83. Answer: b
84. Answer: b  
*Reference:* Ananthanarayanan and Paniker's Textbook of Microbiology, 7th edition page 597
85. Answer: a  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 416  
Shafer's Textbook of Oral Pathology, 4th ed, page 701
86. Answer: d  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452
87. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, page 79
88. Answer: d  
*Reference:* Burke's Oral Medicine 10th ed, page 152
89. Answer: c
90. Answer: b  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 414  
Umarji's Concise Oral Radiology, page 161
91. Answer: a  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 262
92. Answer: a
93. Answer: b
94. Answer: c  
*Reference:* Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 356
95. Answer: d  
*Reference:* Dental Secrets by Stephen T. Somis, page 260
96. Answer: c  
Sialolithiasis is the most common cause of salivary glands pathology
97. Answer: b  
*Reference:* Danies Textbook of pediatric dentistry, page 472
98. Answer: b  
It's usually asymptomatic except when there's occasional closure of the sinus pathway. swelling, PA radiolucency, sinus tract
99. Answer: d  
*Reference:* White and Pharaoh, Oral Radiology Principles and Interpretation, 4th ed, page 386-389  
<http://www.head-face-med.com/content/1/1/13>  
Unilocular radiolucent lesion may have some flakes of calcifications.

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100. Answer: b  
*Reference:* Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 2nd ed, page 524  
**Mucocele**  
Infrequently, a mucocele goes away without treatment. But if some mucoceles remain untreated, they can scar over. Your dentist should examine for any swelling in your mouth.  
A mucocele usually is removed by surgery. The dentist may use a scalpel or a laser to remove the mucocele. Afterward, the tissue will be sent to a laboratory for evaluation. There is a chance that after the mucocele is removed another one may develop.  
Some doctors use corticosteroid injections before trying surgery. These sometimes bring down the swelling. If these work, you may not need surgery.
101. Answer: b  
*Reference:* Harrison's Principles of Internal Medicine
102. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 49
103. Answer: c  
*Reference:* Pathway of the Pulp 9th ed, page 54  
*Reference:* Master Dentistry - Oral and Maxillofacial Surgery, Radiology, Pathology and Oral Medicine  
An abscess is a pathological cavity filled with pus and lined by a pyogenic membrane epithelium
104. Answer: a  
*Reference:* Schick test - definition of Schick test in the medical dictionary - by the Free Online Medical Dictionary, Thesaurus and Encyclopedia.
105. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
106. Answer: a
107. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, page 344
108. Answer: d
109. Answer: b  
*Reference:* Oral Pathology, 4th ed.  
<http://obm.quinestenz.de/index.php?doc=html&abstractID=95558>  
[http://en.wikipedia.org/wiki/Epithelial\\_cell\\_rests\\_of\\_Malassez](http://en.wikipedia.org/wiki/Epithelial_cell_rests_of_Malassez)  
Apical periodontal cyst - pariapical cyst - radicular cyst. These inflammatory cysts derive their epithelial lining from the proliferation of small odontogenic epithelial residues (rests of Malassez) within the PDL  
In dentistry, the epithelial cell rests of Malassez or epithelial rests of Malassez (frequently abbreviated as ERMs) are part of the periodontal ligament cells around a tooth. They are discrete clusters of residual cells from Hertwig's epithelial root sheath (HERS) that didn't completely disappear. It is considered that these cell rests proliferate to form epithelial lining of various odontogenic cysts such as radicular cyst under the influence of various stimuli. They are named after Louis-Charles Malassez (1842-1909) who described them. Some rests become calcified in the periodontal ligament (cementicles)

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110. Answer: a  
111. Answer: b  
*Reference:* Shafer's Textbook of Oral Pathology  
Erythroplakia. The lesion is a precancer, i.e., it carries a higher than normal risk of malignant transformation
112. Answer: d  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page-757  
(Down syndrome has intellectual disability in the mild (IQ 50-70) to moderate (IQ 35-50) range)
113. Answer: a  
114. Answer: a  
115. Answer: a  
*Reference:* Ananthanarayanan and Paniker's Textbook of Microbiology, page 584
116. Answer: b  
*Reference:* Guyton and Hall's Textbook of Medical Physiology, page 447
117. Answer: a  
118. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
119. Answer: e  
120. Answer: a  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 453  
Oral Pathology Clinical Pathologic Correlation, 3rd ed, page 170-171.
121. Answer: d  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 1109
122. Answer: a  
123. Answer: b  
*Reference:* Burket's Oral Medicine, 10th ed, page 114
124. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 10
125. Answer: a  
126. Answer: d  
127. Answer: b  
*Reference:* Guyton and Hall's Textbook of Medical Physiology, page 447  
*Reference:* Dhingra's Ear Nose and Throat, page 327
128. Answer: a  
129. Answer: b  
*Reference source:* Oxford Handbook of Clinical Dentistry, 4th ed, page-73

130. Answer: b  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 222
131. Answer: a  
*Reference:* Master Dentistry - Oral and Maxillofacial, Surgery, Radiology, Pathology and Oral Medicine, page 149"
132. Answer: d  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 761
133. Answer: c  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, 395
134. Answer: 1  
*Reference:* Robbin's Basic Pathology, 7th ed, page 256  
Leukemia + infectious present, HIV not present
135. Answer: b  
136. Answer: c  
*Reference:* Dental Decks, 2nd ed, page 1336 "Burket- Oral Medicine"
137. Answer: d  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 446  
**Nicotine stomatitis:**  
An oral pathological condition that appears in the hard palate of the mouth as a white lesion. It is not considered to be premalignant and results from tobacco smoking (especially pipes or cigars, found in men over 45 years of age, it is characterized as a "fissured" or "dried mud" appearance from excess keratin production by cells. The palate may appear gray or white and contain many papules that are slightly elevated with red in their center. Furthermore, the teeth may be stained brown or black.
138. Answer: a  
*Reference:* Dental Decks, 2nd ed, page 1030-1039  
*Fibroma:* Reactive, the most common tumor seen in oral cavity.
139. Answer: a  
140. Answer: b  
*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 365
141. Answer: a  
142. Answer: c  
**Cancer Medicine**  
A standard rule of thumb is that the lymphatic drainage for any particular region is predicted by the arterial supply of that region. The lip, cheek, and anterior gingiva drain to submandibular and submental lymph node groups. In addition, the cheek and upper lip also drain to inferior parotid nodes.
143. Answer: b  
*Reference:* MCQs in Dentistry, Cawson, page 131  
Cavernous sinus thrombosis: may follow infection from the pyrogenic venous plexus.

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- Reference:** Dental Secrets by Stephen T. Somis, page 263  
Cavernous sinus thrombosis: Patients present with proptosis (eye exophthalmos), orbital swelling, neurologic signs, and fever.
144. **Answer: d**  
**Reference:** "Oral Pathology Clinical Pathologic Correlation"
145. **Answer: a**  
**Reference:** Oral pathology Clinical Pathologic Correlation, 3rd ed, page 239  
Pleomorphic adenoma is the most common tumor of the major and minor salivary glands
146. **Answer: e**  
**Reference:** ~~Oral~~ Ingra's Ear Nose and Throat, page 327  
**Reference:** Guyton and Hall's Textbook of Medical Physiology, page 447
147. **Answer: e**
148. **Answer: d**  
**Reference:** Oral Radiology, 5th ed, page 321  
Clinical Outline of Oral Pathology
149. **Answer: c**
150. **Answer: a**  
**Reference:** Shafer's Textbook of Oral Pathology, 5th ed, page 361
151. **Answer: a**  
**Reference:** White and Pharoah, Oral Radiology Principles and Interpretation, 4th ed, page 386-389
152. **Answer: a**  
Central intrasosseous ameloblastomas may perforate bone and present a similar pattern.
153. **Answer: a**
154. **Answer: c**
155. **Answer: b**  
**Reference:** Damley's Textbook of Pediatric Dentistry, page 489
156. **Answer: d**
157. **Answer: a**  
**Reference:** Ananthanarayanan and Paniker's Textbook of Microbiology, page 584  
Enzyme-linked immunosorbent assay (ELISA). This test is usually the first one used to detect infection with HIV.  
Western blot. It is done to confirm the results of two positive ELISA tests.  
Polymerase chain reaction (PCR). This test may be done in the days or weeks after exposure to the virus.  
Indirect fluorescent antibody (IFA). Like a Western blot test, it is used to confirm the results of an ELISA.
158. **Answer: a**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 52-5

159. **Answer: a**  
**Reference:** wikipedia
160. **Answer: c**  
**Reference:** Master Dentistry - Oral and Maxillofacial Surgery, Radiology, Pathology and Oral Medicine
161. **Answer: a**
162. **Answer: d**
163. **Answer: d**  
**Reference:** White and Pharoah's Oral Radiology, 4th ed, page 451
164. **Answer: e**  
**Reference:** Shafer's Textbook of Oral Pathology, 5th ed, page 676  
A lateral radicular cyst is an inflammatory cyst in which the epithelium is derived from rests of Malassez (like a paraperiapical or apical radicular cyst). It is in a lateral rather than an apical location because the inflammatory stimulus is emanating from a lateral canal. The associated tooth is always nonvital. The lateral periodontal cyst is a developmental cyst in which the epithelium probably is derived from rests of dental lamina. It is usually located between the mandibular premolars, which are vital.
165. **Answer: c**  
Pleomorphic adenomas (benign mixed tumors) are the most common benign SGTs, comprising 85% of all salivary gland neoplasms.  
Adenoid cystic carcinoma is the most common malignant tumor of all minor salivary glands
166. **Answer: c**  
**Reference:** Park's Textbook of Preventive and Social Medicine, page 336
167. **Answer: b**
168. **Answer: d**
169. **Answer: d**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 453  
Oral Pathology Clinical Pathologic Correlation, 3rd ed, page 170-171.
170. **Answer: d**
171. **Answer: b**  
**Reference:** Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, page 663
172. **Answer: b**  
Oral Pathology Clinical Pathologic Correlation, 3rd ed, page 294
173. **Answer: b**  
**Reference:** Dental Secrets, Stephen T. Somis, page 115  
Malignant lesions destroy bone uniformly. In osteomyelitis, areas of radiographically normal-appearing bone are frequently seen between the areas of destruction. Sequestra are not present in malignant lesions.
174. **Answer: c**
175. **Answer: a**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 761

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176. Answer: b  
*Reference:* Dental Decks, 2nd ed, page 1308  
 It is most contagious one day before the onset of rash and until all vesicle have crusted.
177. Answer: b  
*Reference:* Shafer's Textbook of Oral Pathology, 4th ed, page 647
178. Answer: a  
 179. Answer: b  
*Reference:* Guyton and Hall's Textbook of Medical Physiology, page 447
180. Answer: c  
*Reference:* White and Pharoah, Oral Radiology: Principles and Interpretation, 4th ed, page 386-389  
 Brown - aneurismal bone cyst - central giant cell reparative granuloma  
 Cherubism - Odontogenic Myxoma/Myxofibroma - tumor of hyperparathyroidism  
 Hypopharynx abscess hemorrhagic simple bone cyst: Solitary bone cyst, traumatic bone cyst, bone cavity, unicameral bone cyst, bone cyst, hemorrhagic cyst, idiopathic  
 Mucoepidermoid carcinoma - Fibrous dysplasia
181. Answer: a  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 410
182. Answer: d
183. Answer: d
184. Answer: b  
*Reference:* Dental Secrets, Stephen T. Sonis, 2nd ed.
185. Answer: a  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 446
186. Answer: d
187. Answer: d
188. Answer: a  
*Reference:* Oral Pathology: Clinical Pathologic Correlation, 3rd ed, page 170-171.  
 Ackerman tumor known as verrucous carcinoma.
189. Answer: c  
*Reference:* Oral Radiology, 5th ed, page 321  
 This is the radiographic finding for the traumatic bone cyst. Radiographically, these lesions tend to appear as smoothly outlined radiolucencies that scallop around the roots of the teeth. They do not displace teeth or resorb roots, and the lamina dura is left intact. They may range from very small (<1 cm) to very large (involving most of the mandible). They tend to occur above the inferior alveolar canal.
190. Answer: b
191. Answer: a  
*Reference:* Master Dentistry - Oral and Maxillofacial, Surgery, Radiology, Pathology and Oral Medicine

192. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 92
193. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
194. Answer: d
195. Answer: e  
*Reference:* Guyton and Hall's Textbook of Medical Physiology, page 447
196. Answer: c
197. Answer: c
198. Answer: d
199. Answer: d
200. Answer: d
201. Answer: c
202. Answer: a
203. Answer: a
204. Answer: d
205. Answer: e  
*Reference:* Dental Secrets, Stephen T. Sonis, page 263
206. Answer: b  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
207. Answer: d
208. Answer: c  
*Reference:* Neelima Anil Malik's Textbook of Oral and Maxillofacial Surgery, 1st ed, page 387
209. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, page 158
210. Answer: d  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
211. Answer: c  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 434  
 Ulcerative STDs that cause sores, ulcers, or breaks in the skin or mucous membranes, such as syphilis, disrupt barriers that provide protection against infections.
212. Answer: b
213. Answer: c
214. Answer: a  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 361
215. Answer: e

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216. **Answer: a**  
**Reference:** Oxford Handbook of Clinical Dentistry 4th ed, page-760  
Plummer-Vinson syndrome: MedlinePlus Medical Encyclopedia". 2011.
217. **Answer: a**  
**Reference:** Emergency Medicine Manual. McGraw Hill. 2004.
218. **Answer: b**  
**Reference:** Shafer's Textbook of Oral Pathology, 4th ed, page 10
219. **Answer: b**  
**Reference:** Robbin's Basic Pathology 7th ed, page 107
220. **Answer: c**
221. **Answer: b**
222. **Answer: d**  
**Reference:** White and Pharaoh, Oral Radiology Principles and Interpretation, 4th ed, page 386-389
223. **Answer: d**  
**Reference:** Laskin's Clinician's Handbook of Oral and Maxillofacial Surgery, 2nd ed, page 50
224. **Answer: a**  
It is a chronic orofacial pain, unaccompanied by mucosal lesions or other evident clinical signs upon examination.
225. **Answer: e**  
**Reference source:** Dental Secrets by Stephen T. Sonis, page 256  
Hypercementosis increases the difficulty of tooth removal.  
Dental Secrets by Stephen T. Sonis, page 113  
If hypercementosis is present, the periodontal ligament space is visible around the added cementum; that is, the cementum is contained within and is surrounded by the periodontal ligament space
226. **Answer: d**  
Eagle syndrome is a rare condition where a elongated temporal styloid process (more than 30 mm) is in conflict with the adjacent anatomical structures, it can present with unilateral sore throat, dysphagia, tinnitus, unilateral facial and neck pain, and otalgia
227. **Answer: c**  
It is characterized by wide and elongated rete ridges that appear to push into underlying CT (bulbous rete ridges)
228. **Answer: b**
229. **Answer: a**
230. **Answer: d**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 439  
Chronic hyperplastic candidosis/candidiasis (CHC; syn. candidal leukoplakia) is a variant of oral candidosis that typically presents as a white patch on the commissures of the oral mucosa. The major etiologic agent of the disease is the oral fungal pathogen *Candida* predominantly belonging to *Candida albicans*, although other systemic co-factors, such as vitamin deficiency and generalized immune suppression, may play a contributory role. Clinically, the lesions are symptomless and regress after appropriate antifungal therapy and correction of underlying nutritional or other deficiencies. If the lesions are untreated, a minor proportion may demonstrate dysplasia and develop into carcinomas. This review outlines the demographic features, etiopathogenesis,

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- immunological features, histopathology, and the role of *Candida* in the disease process. In the final part of the review, newer molecular biological aspects of the disease are considered together with the management protocols that are currently available, and directions for future research.
231. **Answer: b**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 514
232. **Answer: d**  
(It is best known as the cause of infectious mononucleosis (glandular fever). It is also associated with particular forms of cancer, such as Hodgkin's lymphoma, Burkitt's lymphoma, nasopharyngeal carcinoma, and conditions associated with human immunodeficiency virus (HIV), such as hairy leukoplakia and central nervous system lymphomas. There is evidence that infection with the virus is associated with a higher risk of certain autoimmune diseases, especially dermatomyositis, systemic lupus erythematosus, rheumatoid arthritis, Sjögren's syndrome, and multiple sclerosis)
233. **Answer: a**
234. **Answer: c**  
**Reference:** Burket's Oral Medicine, 10th ed, page 214
235. **Answer: d**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page-73
236. **Answer: a**
237. **Answer: a**
238. **Answer: a**  
**Reference:** Shafer's Textbook of Oral Pathology, 5th ed, page 90
239. **Answer: d**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 761
240. **Answer: c**  
**Reference:** Oxford Handbook of Clinical Dentistry, 4th ed, page 414  
Neelima anil malik's Textbook of Oral and Maxillofacial Surgery 2nd ed, page 524
241. **Answer: e**  
**Reference:** Shafer's Textbook of Oral Pathology, 4th ed, page 10
242. **Answer: c**  
**Reference:** Shafer's Textbook of Oral Pathology, 4th ed, page 10
243. **Answer: c**
244. **Answer: b**
245. **Answer: c**
246. **Answer: d**
247. **Answer: e**  
**Reference:** Shafer's Textbook of Oral Pathology 4th ed, page 10  
[http://en.wikipedia.org/wiki/Van\\_der\\_Woude\\_syndrome](http://en.wikipedia.org/wiki/Van_der_Woude_syndrome)
248. **Answer: b**  
**Reference:** Shafer's Textbook of Oral Pathology



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249. **Answer: c**  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page-70
250. **Answer: a**  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 1109
251. **Answer: a**  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page 452
252. **Answer: c**
253. **Answer: c**
254. **Answer: b**  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 998, 999
255. **Answer: d**  
Mucus retention cyst otherwise called ranula.
256. **Answer: b**  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page-442
257. **Answer: a**  
*Reference:* Goaz White's Oral Radiology Principles and Interpretation, page 530
258. **Answer: c**  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page-434
259. **Answer: b**  
*Reference:* <http://www.silicosisclaims.com/about.html>  
Silicosis, or silica disease, is especially common among the workers whose occupations expose them to extremely high levels of crystalline silica dust for long durations. Some of the common occupations or types of workers at risk of silica disease due to crystalline silica dust exposure include glass workers
260. **Answer: a**  
*Reference:* Oxford Handbook of Clinical Dentistry, 4th ed, page-761
261. **Answer: a**  
*Reference:* Shafer's Textbook of Oral Pathology, page 678
262. **Answer: d**  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 93
263. **Answer: c**  
*Reference:* Dhingra's Ear, Nose and Throat, page 327
264. **Answer: c**  
*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 234
265. **Answer: d**  
*Reference:* Shafer's Textbook of Oral Pathology, page 344

302. Answer: b

303. Answer: b

*Reference:* White and Pharoah's Oral Radiology 5th ed, page 31

304. Answer: b

305. Answer: d

306. Answer: d

307. Answer: b

308. Answer: e

*Reference:* Dhingra's Ear Nose and Throat, page 327

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

309. Answer: c

310. Answer: a

311. Answer: a

312. Answer: c

313. Answer: c

*Reference:* Shafer's Textbook of Oral Pathology, 5th ed, page 982

314. Answer: d

315. Answer: b

316. Answer: c

*Reference:* <http://en.wikipedia.org/wiki/Hyperparathyroidism>

(Hyperparathyroidism, serum phosphate levels are abnormally low as a result of decreased renal tubular phosphate reabsorption)

317. Answer: d

Virus is present in the patient's body all his life is influenza virus that is caused by herpes simplex virus.

318. Answer: b

319. Answer: c

Stage I A disease > T1NOMO,

Stage I B disease > T2NOMO

320. Answer: b

*Reference:* Vinod Kapoor's Oral Surgery 2<sup>nd</sup> ed, page 381

321. Answer: e

322. Answer: a

323. Answer: a

*Reference:* Shafer's Textbook of Oral Pathology, 6<sup>th</sup> ed, page 268

324. Answer: a

*Reference:* Shafer's Textbook of Oral Pathology, 6<sup>th</sup> ed, page 234

325. Answer: c

*Reference:* Shafer's Textbook of Oral Pathology, 6<sup>th</sup> ed, page 530

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326. Answer: b

327. Answer: a

Nasoalveolar – Nasolabial cyst

Globalomaxillary – variant of OKC, inverted pear-shaped RL area between roots of upper 2,3

Primordial cyst – OKC

328. Answer: d

329. Answer: a

Salivary gland – palatine sal. Gl – in the lateral part of posterior parts

330. Answer: d

331. Answer: c

332. Answer: a

333. Answer: c

Gardener by profession may get skin cancer, malignant melanoma,

Gardener syndrome is associated with thyroid cancer.

334. Answer: a

335. Answer: a

336. Answer: b

337. Answer: a

338. Answer: a

339. Answer: a

340. Answer: b

341. Answer: c

342. Answer: a

343. Answer: c

• **Epstein Bar V.** cause infectious mononucleosis, Burkett's lymphoma, nasopharyngeal carcinoma, oral hairy leukoplakia (AIDS patients)

**Human papilloma V.** causes cervical, vulvar, penile cancers, squamous cell carcinoma

**Herpes simplex I** causes herpes labialis (cold sores), keratoconjunctivitis, finger infections (whitlow), encephalitis, gingivostomatitis and genital infections

**Herpes simplex II** cause genital infections, neonatal infections (acquired during vaginal delivery)

344. Answer: b

345. Answer: a

346. Answer: b

347. Answer: a

348. Answer: d

349. Answer: a