- 1. A 49-year-old patient complains about pain in the oral cavity induced by eating. He suffers from CHD. Objective examination revealed dyspnea, limb edema. Oral cavity isn't sanitated. On the mucous membrane on the right, there is an ulcer with irregular edges covered with greyish-white necrotic deposit with low-grade inflammation around it. There is also halitosis. What is the most probable diagnosis?
- **A.** Trophic ulcer
- **B.** Traumatic ulcer
- C. Tuberculous ulcer
- D. Cancerous ulcer
- **E.** Ulcero-necrotic stomatitis
- **2.** A 48-year-old patient complains about itching gums. Objectively: gums are dense, of normal colour; cold water causes short-term toothache. X-ray picture shows osteosclerosis of interalveolar septa (fine granular bone texture), height of interalveolar septa and integrity of compact substance on their tops is unchanged. Which diagnosis is the most likely?
- **A.** Initial parodontosis
- **B.** Atrophic gingivitis
- C. Initial periodontitis
- **D.** I degree periodontitis
- **E.** I degree parodontosis
- **3.** A 34-year-old patient had got in a car accident. The patient stayed conscious. He complains of headache, dizziness, general weakness, nausea. 12 hours after the injury the patient got "raccoon eyes" (periorbital haematomas) within the circular muscles of eye. What fracture does the victim have?
- **A.** Fracture of skull base
- **B.** Le Fort II fracture of maxilla
- **C.** Fracture of nasal bones
- **D.** Bilateral fracture of zygomatic bones
- **E.** Fracture of frontal bones
- **4.** A victim got a perforating wound of the left cheek contaminated with radioactive materials on the battlefield. The wound was dressed with aseptic bandage from the individual first-aid pack and processed with anaesthetic and antibacterial medicaments. The dressing should be changed at the following station of medical evacuation:

- **A.** At each station of evacuation
- **B.** At the battalion aid station
- **C.** At the regimental aid station
- **D.** At the station of the separate medical battalion
- **E.** Only when the dressing is unsatisfactory
- **5.** A 47-year-old female patient complains of inability to eat hot and cold food, as well as of intense pain caused by sour, sweet and salty food. Objectively: there is a slight loss of enamel on the molars and incisors. Probing and cold test cause acute pain. What is the most likely diagnosis?
- **A.** Hyperesthesia of dental hard tissues
- **B.** Enamel erosion
- **C.** Enamel necrosis
- **D.** Enamel hypoplasia
- **E.** Pathological abrasion of dental hard tissues
- **6.** After removal of dental plaque an 18-year-old patient underwent preventive examination. It revealed painless chalky spots in the precervical region on the vestibular surface of the 22 and 41 teeth. Result of enamel resistance test is 7. What morphological changes are typical for this disease?
- A. Subsurface enamel demineralization
- **B.** Changes in the mantle dentine
- **C.** Damage of dentinoenamel junction
- **D.** Superficial enamel demineralization
- **E.** Degeneratic changes of odontoblasts
- **7.** A 49-year-old patient complains of constant mandibular pain irradiating to the ear, soft tissue edema, body temperature rise up to 39,0°C. Objectively: there is an edema in the submandibular region, the skin has not changed in colour. Alveolar mucosa around the 45, 46 teeth is hyperemic and edematic on the oral and vestibular side. Crowns of the 45, 46 teeth are completely destroyed, the teeth are mobile. Vincent's symptom is present. What is the most likely diagnosis?
- **A.** Acute mandibular osteomyelitis
- **B.** Abscess of submandibular region
- **C.** Exacerbation of chronic mandibular osteomyelitis
- **D.** Acute serous periostitis of mandible
- **E.** Acute purulent periostitis of mandible
- **8.** An 8-year-old boy complains of having toothache during eating. Objectively: approximal surface of the 55 tooth has a deep carious cavity communicating with the tooth cavity. Probing causes acute pain, there is bleeding, percussion is pai-

nless. What is the most likely diagnosis?

- **A.** Chronic fibrous pulpitis
- **B.** Chronic hypertrophic pulpitis
- **C.** Chronic gangrenous pulpitis
- **D.** Chronic granulating periodontitis
- **E.** Chronic fibrous periodontitis
- **9.** A 36-year-old patient complains of pain under the dental bridge. After its removal the patient has been found to have an ulcer 0,3x0,5 cm large on the alveolar process. The ulcer is slightly painful and soft, the surrounding mucosa is hyperaemic, submandibular lymph nodes are not enlarged. What is a provisional diagnosis?
- **A.** Decubital ulcer
- B. Trophic ulcer
- C. Sutton aphtha
- **D.** Cancerous ulcer
- E. Tuberculous ulcer
- 10. A 45-year-old female patient complains of worsened fixation and frequent breakages of her partial removable laminar denture for the lower jaw, which she has used for 5 years. Objectively: alveolar process in edentulous areas is considerably atrophied, the denture keeps balance. What is the most likely cause of worsened fixation and frequent breakages of the denture in this case?
- **A.** Atrophy of the alveolar process
- **B.** Wear of artificial teeth
- **C.** Improper keeping of the denture
- **D.** Using the denture during sleep
- **E.** Eating solid food
- **11.** A 42-year-old female patient complains of tooth mobility, difficult mastication. Objectively: face configuration is unchanged. The 35, 36, 38, 44, 46, 48 teeth are missing. The 31, 32, 41, 42 teeth have 1-2 grade mobility. What is the most efficient denture construction in this case?
- **A.** Whole-piece splint with vestibular clowlike hooks
- **B.** Whole-piece splint with Roach clasps and a multijoint clasp
- **C.** Mamlock splint
- **D.** Removable plastic splint
- E. Interdental splint
- 12. A 42-year-old patient complains of pain in the submaxillary and sublingual areas that is getting worse during eating, body temperature rise up to  $37,6^{\circ}C$ . He has been suffering from this for 2 months. Objectively: infiltration along the right

sublingual torus, hyperemia, soft tissue edema, acute pain during palpation. The duct of the right submandubular salivary gland excretes turbid saliva mixed with pus. What is the most likely diagnosis?

- **A.** Exacerbation of salivolithiasis
- **B.** Acute purulent lymphadenitis of submaxillary area
- C. Adenophlegmon of submaxillary area
- **D.** Abscess of maxillolingual groove
- E. Retention cyst of sublingual salivary gland
- **13.** A 4-year-old girl presents with body temperature rise, aggravation of general condition. The symptoms has been observed for 3 days. Objectively: general condition is grave, body temperature is 38,6°C, the girl is anxious and pale. She presents also with halitosis, hyperaemia and edema of gingival mucous membrane in the region of the 83, 84, 85 teeth on both sides from the alveolar process. The mentioned teeth are mobile, their percussion causes acute pain; the 84 tooth is filled. What is the most likely diagnosis?
- **A.** Acute odontogenous mandibular osteomyelitis beginning from the 84 tooth
- **B.** Acute sialoadenitis of submandibular salivary gland
- **C.** Exacerbation of chronic periodontitis of the 84 tooth
- **D.** Suppuration of the radiculodental mandibular cyst beginning from the 84 tooth
- **E.** Acute odontogenous mandibular periostitis beginning from the 84 tooth
- 14. A 48-year-old female patient had been delivered to a hospital with a cheek wound and severe headache, nausea, dizziness. It is known from the history that the patient got a trauma as a result of a fall. After examination she was diagnosed with a contused lacerated wound of cheek, closed craniocerebral injury, brain concussion. This trauma can be qualified as:
- A. Concominant trauma
- **B.** Isolated trauma
- **C.** Combined trauma
- **D.** Polytrauma
- E. Single
- **15.** A 26-year-old patient needs prosthetics. Objectively: crown of the 16 tooth is destroyed by 1/3. It is planned to restore its anatomical shape with a metal inlay. What is the first stage of making a cavity for the inlay?

- A. Removal of affected tissues
- **B.** Making additional cavities
- **C.** Making a bevel
- **D.** Making the cavity floor
- **E.** Making the cavity walls
- **16.** An 8-year-old boy complains of improper arrangement of teeth. Examination at an orthodontic clinic revealed broad, tight, low-attached upper lip frenulum. Broad frenulum and its low attachment may cause:
- A. Diastema
- **B.** Shortening of the upper dentition
- **C.** Elongation of the upper dentition
- **D.** Narrowing of the upper dentition
- E. Protrusion of the upper front teeth
- **17.** During extraction of the 47 tooth its distal root was broken halfway along its length. What tool should be chosen for extraction of the residual root fragments?
- **A.** Left angled elevator
- **B.** Broad-beaked forceps
- **C.** Close-beaked forceps
- **D.** Right angled elevator
- **E.** Straight elevator
- **18.** A 22-year-old student complains of gingival haemorrhage during tooth brushing. Objectively: hyperaemia and edema of marginal gingiva of the front teeth on both jaws, periodontal pockets are absent. X-ray reveals no pathological changes. What is the most likely diagnosis?
- **A.** Chronic catarrhal gingivitis
- **B.** Localized periodontitis
- **C.** Ulcerative gingivitis
- **D.** Hypertrophic gingivitis
- **E.** Generalized periodontitis
- 19. A 37-year-old male patient complains about pain of the 46 tooth during food intake, especially hot food, offensive breath when he sucks his tooth. Objectively: the face is symmetrical, masticatory surface of the 48 tooth has a deep carious cavity communicating with the dental cavity. X-ray picture shows widening of periodontal fissure at the root apex of the 46 tooth. What is the most likely diagnosis?
- **A.** Chronic gangrenous pulpitis
- **B.** Exacerbation of chronic periodontitis
- **C.** Exacerbation of chronic pulpitis
- **D.** Chronic fibrous periodontitis
- **E.** Chronic fibrous pulpitis

- **20.** A 24-year-old male complains of pain, bad breath, body temperature rise up to  $38,0^{\circ}C$ . Objectively: the patient is pale, adynamic. Regional lymph nodes are enlarged and painful. Gums are edematic, hyperaemic, ulcerated, covered with necrotic plaque. There is an excessive buildup of calculus. What additional study should be done in the first place?
- **A.** Complete blood count
- **B.** Blood sugar test
- **C.** Microscopy of gingival plaque
- **D.** Test for HIV infection
- **E.** X-ray of jaws
- 21. A 46-year-old patient complains of spontaneous pain in the 36 tooth. Its crown is decayed. The patient presented with edema of soft tissues adjacent to the mandible. Body temperature rose up to 39,0°C, the patient has chill. Examination of the oral cavity revealed a pronounced edema of the left mandibular alveolar process on the vestibular and oral side (acute periostitis); the 35, 36, 37 teeth are mobile, subgingival pockets contain purulent exudate; their percussion causes acute pain. Positive Vincent's symptom is present. What is the presumptive diagnosis?
- **A.** Acute odontogenic osteomyelitis of mandible from the 36 tooth
- **B.** Exacerbation of chronic periodontitis from the 36 tooth
- **C.** Acute purulent periostitis of mandible from the 36 tooth
- **D.** Exacerbation of generalized periodontitis
- **E.** Exacerbation of chronic mandibular osteomyelitis
- 22. An 11-year-old girl complains about gingival haemorrhage during tooth brushing and eating. She has been suffering from this for a year. Gum of both upper and lower jaws is edematic and congestively hyperemic. Hygienic state of oral cavity is unsatisfactory. Bite is edge-to-edge. Roentgenological examination of periodontium revealed no pathological changes. What is the provisional diagnosis?
- **A.** Chronic catarrhal gingivitis
- **B.** Acute catarrhal gingivitis
- **C.** Generalized periodontitis
- **D.** Localized periodontitis
- **E.** Hypertrophic gingivitis
- **23.** Preventive examination of a 4,5-year-

old child revealed some hidden cavities on the contact surfaces of the 54 and 55 teeth. After removal of the overhanging edges of the enamel the softened dentin could be easily removed within the mantle dentin. Select the optimal material for a permanent filling:

- **A.** Compomer material
- **B.** Composite material
- **C.** Silicate cement
- **D.** Silicophosphate cement
- **E.** Polycarboxylate cement
- **24.** A 54-year-old woman complains about wear of the 35 and 36 teeth and pain caused by thermal and chemical stimuli. Objectively: crowns of the 35 and 36 teeth are worn by 1/3 of their height (horizontal type), the 24, 25 26 teeth have fullcast crowns. What crowns should be made for the 35 and 36 teeth?
- A. Fullcast
- B. Combined Belkin's
- C. Metal stamped
- D. Plastic
- E. Metal-ceramic
- 25. An 18-year-old patient complains about body temperature rise, weakness, pain induced by eating and deglutition. Objectively: mucous membrane of the oral cavity is erythematic with multiple petechia. Pharynx is hyperaemic. Regional lymph nodes are enlarged, mobile, painless. In blood: leukocytosis, monocytosis, atypic mononuclear cells, ESR is 30 mm/h. What is the leading factor of disease development?
- **A.** Viral infection
- **B.** Bacterial infection
- **C.** Autoimmune disorders
- **D.** Immediate allergy
- E. Delayed allergy
- **26.** An 18-year-old student needs prosthetic metal-ceramic denture for the 11, 21 teeth. There are no contraindications for the use of such construction. What is the most appropriate material for taking impressions?
- A. Sielast
- **B.** Stomalgin
- C. Orthocor
- **D.** Stens
- E. Repin
- **27.** A soldier was delivered to the regiment medical station with dislocation asphyxia caused by a gunshot wound. What actions

should be taken for asphyxia suppression?

- **A.** Pul the tongue forwards and sew it through
- **B.** Intubation of trachea
- **C.** Tracheostoma establishment
- **D.** Artificial airway
- E. Artificial pulmonary ventilation
- 28. A week ago an 18-year-old girl complained of pain in the 22 tooth which was treated and filled several years ago. Over the past two days the pain got worse. Objectively: the 22 tooth is filled, percussion is painful, mucous membrane is hyperaemic and edematic. Spot-film roentgenograph of the 22 tooth shows an ill-defined pariapical bone rarefaction 0,4x0,5 cm large. What is the most likely diagnosis?
- **A.** Exacerbation of chronic periodontitis of the 22 tooth
- **B.** Suppuration of the radicular cyst
- C. Acute odontogenic osteomyelitis
- **D.** Acute purulent periodontitis of the 22 tooth
- **E.** Acute maxillary periostitis
- **29.** A 22-year-old patient complains of a painful swelling in the right parotid gland. A week earlier the patient got a cheek abrasion which healed under the purulent crust. Over the past two days the patient had observed progressing pain and fever up to  $38,6^{\circ}C$ . Objectively: there is a soft tissue edema in the right parotid region, the skin is slightly strained but has not changed in colour. There is a dense painful infiltration 2,5x3,5 cm large, the skin over it exhibits limited mobility. The mouth can be fully opened, the mucous membrane around the orifice of the salivary duct is unchanged, the saliva is transparent. What is the most likely diagnosis?
- **A.** Acute lymphadenitis
- **B.** Exacerbation of chronic parotitis
- **C.** Abscess of the parotid-masticatory region
- **D.** Acute non-epidemic parotitis
- **E.** Epidemic parotitis
- **30.** A 33-year-old female patient has been admitted to the maxillofacial department with complaints of pain and edema of the right submandibular region, body temperature rise up to  $39,5^{\circ}C$ . Objectively: the patient has asymmetric face because of soft tissue edema of the right submandibular region, palpation reveals a dense infiltration, the skin over it is hyperemic, does not make a fold. The 46

tooth has a deep carious cavity. What is the most likely diagnosis?

- **A.** Submandibular phlegmon on the right
- **B.** Acute submandibular sialoadenitis
- **C.** Acute purulent periostitis of mandible
- **D.** Acute purulent submandibular lymphadenitis
- **E.** Acute right-sided osteomyelitis of mandible
- **31.** Analysis of the contents of periodontal pockets revealed a significant contamination with *Candida* yeast fungi. Which of the following drugs should be used for instillations?
- A. Clotrimazole
- **B.** Trichopol
- **C.** Dioxydin
- **D.** Diclofenac sodium
- E. Tinidazole
- **32.** A 25-year-old patient consulted a doctor about massive gingival haemorrhages, dry mouth, mobility and shifting of teeth, purulent discharges from the gums, bad breath. According to the patient, these presentations turned up about 2 months ago. Before the diagnosis can be made, the following tests should be done in the first place:
- **A.** Blood sugar test
- **B.** Immunological studies
- **C.** Allergological tests
- **D.** Acute-phase reactants tests
- E. Serologic studies
- **33.** A 59-year-old patient has a bilateral fracture of mandible in the region of the 44, 34 teeth, other masticatory teeth are missing, toothless fragments are not displaced but mobile. Which orthosis should be used for the immobilization of bone fragments?
- **A.** Vankevich splint with orthodontic elastics
- **B.** Rudko's apparatus
- **C.** Limberg's splint
- **D.** Petrosov's apparatus
- E. Zbarzh apparatus
- **34.** A 20-year-old patient has asymmetric face due to an upper lip edema on the left. The skin over it is bluish, there are positive symptoms of "compression" and "filling in". What is the most likely diagnosis?

- A. Cavernous hemangioma
- **B.** Branched hemangioma
- **C.** Capillary hemangioma
- **D.** Lymphangioma
- E. Lentigo
- **35.** A 3-year-old girl complains of pain and swelling in the region of the decayed 51, 52 teeth, body temperature rise up to  $37, 5 37, 9^{\circ}C$ . Objectively: the face is asymmetric because of a swelling in the upper lip region and right infraorbital region. The crown of the 51 tooth is completely decayed. Mucous membrane in the region of the 52, 51, 1 teeth is edematic, mucogingival fold is smoothed, palpation provokes pain, mobility of I-II grade of the 51, 52 teeth is also present. What is the most likely diagnosis?
- **A.** Acute purulent odontogenic maxillary periostitis
- **B.** Acute albuminous odontogenic maxillary periostitis
- **C.** Acute odontogenic maxillary osteomyelitis
- **D.** Odontogenic abscess of infraorbital region
- **E.** Exacerbation of chronic periodontitis of the 51 tooth
- **36.** A 31-year-old male patient complains of dryness and burning of tongue back that appeared for about a week ago and get worse when he eats irritating food. The patient has a history of recent pneumonia. He had been treated in the in-patient hospital for 2 weeks, the treatment program included antibiotics. Now he doesn't take any drugs. Objectively: mucous membrane of the oral cavity is hyperemic, dry, glossy. Tongue back and palate have greyish-white plicae that can be easily removed. Threads of saliva trail behind the spatula. What is the most likely diagnosis?
- **A.** Acute pseudomembranous candidiasis
- **B.** Chronic hyperplastic candidiasis
- **C.** Acute atrophic candidiasis
- **D.** Medicamental stomatitis
- **E.** Chronic atrophic candidiasis
- **37.** During the examinations and everyday orthopaedic manipulations a dentist uses a dental mirror. What is the way of dental mirrors sterilization?

- **A.** In the triple solution for 30 minutes
- **B.** In the 0,5% ethyl chloride solution for 20 minutes
- **C.** In the 6% hydrogen peroxide solution for 6 hours
- **D.** In the dry heat sterilizer at  $180^{\circ}C$  for 10 minutes
- **E.** In the 0,01% chloramine solution for 10 minutes
- **38.** A 65-year-old patient complains about partially missing teeth on his upper jaw, difficult mastication, rhinolalia. Objectively: the 18, 16, 15, 11, 23, 28, 35, 38, 48, 47 teeth are missing; there is postoperative midline defect of hard palate. It was decided to make a clasp dental prosthesis with obturating part. The obturating part should be placed on the following element of the clasp dental prosthesis:
- **A.** On the arch
- **B.** On the saddle
- C. On the artificial teeth
- **D.** On the base
- E. On the clasps
- **39.** Examination of an 11-year-old boy revealed thickened, somewhat cyanotic, dense gingival margin overlapping the crowns of all teeth by 1/2 of their height. Fedorov-Volodkina oral hygiene index is 2,6, PMA index is 20%. X-ray picture shows no pathological changes of periodontium. The child has a 2-year history of neuropsychiatric treatment for epilepsy. Make a provisional diagnosis:
- **A.** Chronic hypertrophic gingivitis
- **B.** Chronic catarrhal gingivitis
- **C.** Localized periodontitis
- **D.** Acute catarrhal gingivitis
- E. Generalized periodontitis
- **40.** A 39-year-old patient complains of a cosmetic defect, hypersensitivity of the 12, 11, 22 teeth. Objectively: vestibular surface of these teeth has oval defects with smooth shiny walls. Probing causes no pain, there is a pain reaction to cold stimuli. The defects can be stained with 5% tincture of iodine. What is the most likely diagnosis?
- A. Enamel erosion
- **B.** Superficial caries
- **C.** Wedge-shaped defect
- **D.** Systemic hypoplasia
- **E.** Fluorosis, erosive form
- **41.** A 70-year-old patient complains of pain in the lower jaw region on the right. He has been using complete removable

dentures for the upper and lower jaw for 12 years. He is smoker. Objectively: the right retromolar region exhibits a 1,5x1,2 cm large proliferation of mucous membrane in form of cauliflower, here and there there are dense fissure-like ulcers. The surrounding mucous membrane is cyanotic, infiltrated. When the teeth are closed, the mentioned formation contacts with the posterior edges of the dentures. What is the provisional diagnosis:

- A. Cancer of the mucous membrane
- **B.** Leukoplakia
- C. Decubital ulcer
- **D.** Hypertrophic gingivitis
- E. Papillomatosis
- **42.** A 40-year-old patient complains of discoloration of the vermilion border of the lower lip that he noticed about 4 months ago. Objectively: in the center of the vermilion border of the lower lip there is an irregular homogeneous grayish-white area 1x1,5 cm large that doesn't rise above the vermilion border and has distinct outlines. Palpation of this area is painless, the surrounding tissues are not changed. The film cannot be removed when scraped. The 31, 32, 41, 42 teeth are missing. What is the most likely diagnosis?
- **A.** Leukoplakia
- **B.** Lupus erythematosus
- **C.** Lichen ruber planus
- **D.** Candidous cheilitis
- **E.** Premalignant circumscribed hyperkeratosis
- **43.** A 35-year-old patient complains about itch, burning and edema of lips. He has been suffering from this for a week. Objectively: reddening of vermilion border and skin, especially in the region of mouth corners, there are also vesicles, crusts, small cracks along with erythematous affection of vermilion border. What is the most likely diagnosis?
- **A.** Acute eczematous cheilitis
- **B.** Multiform exudative erythema
- **C.** Acute herpetic cheilitis
- **D.** Allergic contact cheilitis
- **E.** Exudative form of exfoliative cheilitis
- **44.** A 45-year-old man complains about liquid outpouring from his nose, inability to blow his nose, inflated cheeks. Objectively: there is a perforating defect (1x1,5 cm) of alveolar process at a level of the extracted 26th tooth in the lateral part

of his upper jaw. Air inhalation through the nose with held nostrils is accompanied by generation of bubbles in the area of perforation. What denture construction should be recommended?

- **A.** Minor saddle denture with clasp fixation
- **B.** Clasp denture with obturating part
- **C.** Common partial removable denture
- **D.** Common dental bridge
- **E.** Protective palatal bars
- **45.** Preventive examination of an 8-year-old boy revealed some lusterless chalk-like spots on the vestibular surface of the 11 and 21 teeth, which are localised in the precervical region. Subjective complaints are absent. What is the most likely diagnosis?
- **A.** Acute initial caries
- **B.** White-spotted fluorosis
- C. Local enamel hypoplasia
- **D.** Acute superficial caries
- **E.** Chronic initial caries
- **46.** A 44-year-old male patient complains of fatigue and headache, limb numbness, dry mouth, burning and pain in the tongue. Objectively: skin and oral mucosa are pale. There are painful cracks in the corners of mouth. Dorsum of tongue is smooth, glossy, with bright red striae. In blood: Hb- 70 g/l, RBCs 1,5 · 10<sup>12</sup>/l, color index 1,6, leukopenia, thrombocytopenia, lymphocytosis. What is the most likely diagnosis?
- A. Addison-Biermer anemia
- **B.** Chronic posthaemorrhagic anemia
- **C.** Late chlorosis
- **D.** Iron deficiency anemia
- **E.** Aplastic anemia
- **47.** A 25-year-old patient presents with fluorosis of vestibular surfaces of the upper incisors. Which of the following constructions will provide the maximum aesthetic result?
- **A.** Veneers
- **B.** Plastic crown
- **C.** Ceramic crown
- **D.** Combined Kurylenko crown
- **E.** Metal-plastic crown
- **48.** A 27-year-old patient complains about acute pain in the region of the 34 tooth that is getting worse when biting down on food. Roentgenographical survey revealed an ill-defined zone of bone tissue destruction in the periapical region

of root of the 34 tooth. What is the most likely diagnosis?

- **A.** Exacerbation of chronic granulating periodontitis
- **B.** Acute purulent pulpitis complicated by periodontitis
- **C.** Exacarbation of chronic pulpitis
- **D.** Exacerbation of chronic granulomatous periodontitis
- **E.** Acute serous periodontitis
- **49.** A 48-year-old patient complains of subfebrile temperature and a growing ulcer on the gingival mucosa around the molars; looseness of teeth in the affected area, cough. Objectively: gingival mucosa in the region of the lower left molars has two superficial, extremely painful ulcers with undermined edges. The ulcers floor is yellowish, granular, covered with yellowish, and sometimes pink granulations. The ulcers are surrounded by the tubercles. Dental cervices are exposed, there is a pathological tooth mobility. Regional lymph nodes are enlarged and make dense matted together groups. What is the most likely diagnosis?
- A. Tuberculosis
- **B.** Syphilis
- C. Acute aphthous stomatitis
- **D.** Infectious mononucleosis
- E. Decubital ulcer
- **50.** A 56-year-old man complains of pain in the left parotidomasticatory region, progressing face asymmetry that was noticed a month ago. Objectively: left-sided paresis of mimic muscles. To the fore of earflap there is an ill-defined infiltration, the skin above it is tense and cyanotic; left lymph nodes are enlarged. Opening of mouth is limited down to 2,5 cm. The left parotid duct doesn't excrete saliva. What is the most likely diagnosis?
- A. Adenocarcinoma
- **B.** Mixed tumour
- **C.** Cyst of the gland
- **D.** Glandular tuberculosis
- **E.** Chronic lymphadenitis
- **51.** A 4-year-old girl complains of spontaneous acute toothache in the upper jaw on the right increasing during eating. The pain arose two days ago. Objectively: there is a deep carious cavity filled with softened dentin in the 55 tooth. There is no intercommunication with the tooth cavity. Probing of the cavity floor is slightly painful. Percussion is painful. What is the presumptive diagnosis?

- **A.** Acute pulpitis complicated by periodontitis
- **B.** Acute purulent pulpitis
- **C.** Acute generalized (serous) pulpitis
- **D.** Exacerbation of chronic gangrenous pulpitis
- **E.** Acute purulent periodontitis
- **52.** A 35-year-old man complains of short-term pain caused by thermal stimuli in the 46 and 47 teeth. Objectively: masticatory surfaces of the 46, 47 teeth are intact, approximal surfaces could not be examined because of a very close arrangement of teeth. What methods of study can be used in this case if you suspect the presence of hidden cavities?
- **A.** X-ray
- **B.** Vital staining
- **C.** Fluorescent study
- **D.** Measuring electrical resistance
- **E.** Electro-odontometry
- **53.** A 52-year-old man undergoes treatment of the 36 tooth for chronic periodontitis. Radiography revealed convoluted medial root canals; an irregular-shaped focus of destruction of bone tissue 0,2x0,2 cm large in the region of the medial root apex. Which of the following drugs is optimal for intracanal electrophoresis?
- A. 10% solution of potassium iodide
- **B.** 1% solution of decamethoxin
- C. 1% solution of novocaine
- **D.** 3% solution of copper sulphate
- **E.** 0,1% solution of trypsin
- **54.** A 44-year-old patient consulted a surgeon about constant acute pain in the upper jaw region on the left that is getting worse during teeth joining. The pain was noted 3 days ago. Objectively: the face is symmetrical, mouth opening is unlimited. The crown for the 26 tooth is half-destroyed. Probing of the carious cavity is painless. Percussion of the 26 tooth provokes acute pain. Mucous membrane of the alveolar process is edematic, hyperaemic at the level of the 26 tooth. The 26 tooth had been treated before. What is your provisional diagnosis?

- **A.** Exacerbation of chronic periodontitis of the 26 tooth
- **B.** Acute purulent periodontitis of the 26 tooth
- **C.** Acute pulpitis of the 26 tooth
- **D.** Acute purulent periostitis of upper jaw of the 26 tooth on the left
- E. Periodontitis of the 26, 27, 28 teeth
- **55.** A 22-year-old medical student complains of the changed colour of his central upper incisor on the right. Two years ago the tooth was gray. Objectively: the 2 tooth is filled, changed in colour, stable, percussion is painless. The patient has closed bite. What is the absolute contraindication to making porcelain crowns for this patient?
- **A.** Closed bite
- **B.** Defects of the anterior teeth that cannot be restored by fillings
- **C.** Enamel hypoplasia with a change of tooth shape and colour
- **D.** Abnormal tooth colour
- **E.** Defects of pulpless teeth that can not be restored by inlays
- **56.** A 18-year-old patient complains of acute spontaneous toothache irradiating to the right eye and temporal region. Objectively: there is a deep carious cavity in the 27 tooth within circumpulpar dentin. Dentin is light, softened. Probing of the cavity floor and cold test cause acute pain. What is the most likely diagnosis?
- **A.** Acute diffuse pulpitis
- **B.** Acute purulent periodontitis
- **C.** Exacerbation of chronic pulpitis
- **D.** Acute serous periodontitis
- **E.** Acute purulent pulpitis
- **57.** A 43-year-old patient was found to have no crown of the 13 tooth. The root protrudes above the gum by 0,5-1 mm. The apical part is filled. History: coronal part of the tooth broke off three weeks ago. Prior to this the tooth had been treated for chronic periodontitis. Percussion is painless. The root edges are made by hard moist mucous membrane of pale pink colour. Specify the dentist's tactics:
- **A.** Fabricate a crown-root inlay and metal-ceramic crown
- **B.** Remove the tooth root
- **C.** Fabricate a simple pivot crown
- **D.** Restore the tooth by means of an anchor and photopolymer material
- **E.** Fabricate a pivot Richmond crown

- **58.** A 40-year-old patient with mandible fracture consulted a doctor 3 weeks after immobilization of fragments because of pain and body temperature rise. Objectively: a slight swelling in the mental region, mucous membrane of alveolar process in the area of the 21|12 teeth is hyperaemic, edematic, palpatory painful. Overtooth splint on 54321|12345 teeth is in satisfactory condition, no occlusion abnormalities were detected. The patient was diagnosed with acute purulent periostitis of mandible. What surgical action is indicated?
- **A.** Lancing of abscess to the bone
- **B.** Intraoral novocaine block
- **C.** Removal and replacement of the overtooth splint by a new one
- **D.** Trepanation of the 21 and 12 teeth
- **E.** Surveillance of patient
- **59.** A 32-year-old patient complains of acute spontaneous attacks of pain in the 14 tooth. The pain lasts for 10-20 minutes and occurs every 2-3 hours. Carious cavity in the 14 tooth is filled with softened dentin. Probing of the cavity floor is painful at one point. Cold stimulus causes pain. What is the most likely diagnosis?
- A. Acute localized pulpitis
- **B.** Acute deep caries
- **C.** Hyperemia of the pulp
- **D.** Exacerbation of chronic pulpitis
- **E.** Acute diffuse pulpitis
- **60.** A 32-year-old patient complains of the long-term dull toothache caused by hot food. The toothache appeared a month ago. Objectively: the 26 tooth has changed in colour, on the masticatory surface there is a deep carious cavity communicating with the tooth cavity. Superficial probing of pulp is painless, deep probing is painful. Electro-odontodiagnostics results: 85  $\mu A$ . What is the most likely diagnosis?
- **A.** Chronic gangrenous pulpitis
- **B.** Chronic hypertrophic pulpitis
- **C.** Chronic fibrous pulpitis
- **D.** Chronic fibrous periodontitis
- **E.** Chronic concrementous pulpitis
- **61.** A 27-year-old patient complains of the long-term pain in the 22 tooth caused by cold and hot food, as well as of spontaneous pain lasting for 30 minutes and occurring 3-4 times per day, getting worse at night. Pain arose 3 days ago after preparation of the tooth for the acrylic crown. Objectively: the 22 tooth is intact,

the thermal test causes acute long-lasting pain, percussion is painless. What is the optimal treatment tactics?

- **A.** Vital pulp extirpation
- **B.** Application of fluorine lacquer
- C. Biological treatment of pulpitis
- **D.** Devital pulp extirpation
- **E.** Vital pulp amputation
- **62.** A 5-year-old child has been diagnosed with congenital complete nonclosure of soft and hard palate. What type of anaesthesia is indicated for uranostaphyloplasty?
- A. Nasotracheal narcosis
- **B.** Mask narcosis
- C. Intravenous narcosis
- **D.** Orotracheal narcosis
- **E.** Endotracheal narcosis through tracheostome
- **63.** A 24-year-old patient complains of aching pain in the 11 tooth that is getting worse on biting. Two days ago the tooth was filled for pulpitis. Objectively: the 11 tooth is filled. The thermal test causes no pain, vertical percussion is slightly painful. X-ray picture of the 11 tooth shows that the endodontic filling is 1 mm above the root apex. Which of the following methods will be most effective for eliminating this complication?
- **A.** Fluctuorization
- **B.** Ultrahigh frequency therapy
- **C.** Relaxing incision
- **D.** Submucous injection of 1% solution of hydrocortisone
- **E.** Analgetics
- **64.** It is planned to make a metal-ceramic crown supported by stump inlay for the 23 tooth. Objectively: the crown of the 23 tooth is decayed down to the gingival edge. Root canal is filled to the top. The dentist made a wax stump model with a pin, cast it in metal, fitted it to the tooth, fixed it by means of visphat-cement and got a working plaster impression. At what stage did he make an error?
- **A.** Impression taking
- **B.** Wax construction making
- **C.** Casting
- **D.** Stump fitting
- E. Stump fixing
- **65.** A 23-year-old military servant needs orthopaedic treatment at a specialized hospital. He was diagnosed with false joint of mandible in its frontal part. The teeth

are intact, stable, in threes on each side. Orthopaedic treatment by means of a bridge denture will be possible only if the jaw defect is no more than:

- **A.** 1 cm
- **B.** 2 cm
- **C.** 3 cm
- **D.** 3,5 cm
- **E.** 4 cm
- **66.** According to the mother, a 5-year-old child complains about pain during swallowing, weakness, body temperature rise upt to  $39,5^{\circ}C$ , swelling of submental lymph nodes. Objectively: the child's condition is grave, body temperature is  $38,8^{\circ}C$ . Mucous membrane of oral cavity is brightly hyperaemic and edematic with haemorrhages and ulcerations. Pharynx is brightly hyperemic, lacunae are enlarged and have necrosis areas. Regional, cervical, occipital lymph nodes are painful, enlarged and dense. What is the most likely diagnosis?
- A. Infectious mononucleosis
- **B.** Acute herpetic stomatitis
- **C.** Necrotizing ulcerative gingivostomatitis
- **D.** Herpetic angina
- E. Lacunar tonsillitis
- 67. A patient is 48 year old, according to the results of clinicoroentgenological examination it is indicated to remove the 26 tooth because of acute condition of chronic granulomatous periodontitis. What kind of conduction anesthesia is indicated for this operation?
- **A.** Tuberal and palatinal
- **B.** Torus
- **C.** Infraorbital and incisive
- **D.** Plexus
- **E.** Infraorbital and palatinal
- **68.** Examination of an 8-year-old child revealed irregular white spots on the vestibular surface in the precervical region of the of 11 and 12 teeth. The spots are smooth and stainable. What is the most likely diagnosis?
- **A.** Focal demineralization
- **B.** Enamel hypoplasia
- **C.** Superficial caries
- **D.** Enamel erosion
- E. Fournier's teeth
- **69.** A 45-year-old patient complains of missing teeth in the lower jaw on the right. Objectively: the 46, 45, 38, 48 teeth are missing. The 47 tooth is mobile (1)

- grade mobility), the crown of the 44 tooth is destroyed by 1/2. What orthopedic construction should be recommended for restoration of masticatory efficiency and prevention of periodontal overload of the 47, 44 teeth?
- **A.** Arch denture with clasp fixation for the 47, 44, 34 teeth
- **B.** Soldered bridge supported by the 48, 44 teeth
- **C.** Metal-ceramic bridge supported by the 47.46 teeth
- **D.** Bridge supported by the 47 tooth
- **E.** Small saddle denture with clasp fixation for the 47, 44 teeth
- **70.** A 57-year-old patient complains of tooth mobility, inability to eat. Objectively: the lower 35, 36, 37, 38, 44, 45, 46 and 48 teeth are missing; the 31, 32, 33, 34, 41, 42, 43, 47 teeth exhibit II grade mobility, their clinical crowns are low, tooth equator is not pronounced. What is the optimal denture construction in this case?
- A. Removable whole-piece splint
- **B.** Removable partial denture
- C. Kurliandsky splint bar
- D. Removable Bynin splint
- **E.** Removable splint with vestibulo-oral clasp
- **71.** A patient working as a bricklayer complains of itching, burning, soreness of lips that show up only in the summer period. He has been ill for 3 years. Objectively: vermilion border of the lower lip is hyperemic, edematic, covered with blisters and painful erosions 2 mm in diameter, crusts, cracks. What is the most likely diagnosis?
- **A.** Actinic cheilitis, exudative form
- **B.** Contact allergic cheilitis
- C. Meteorological cheilitis
- **D.** Eczematous cheilitis, exudative form
- **E.** Exfoliative cheilitis, exudative form
- 72. A 60-year-old patient complains of pain in the masticatory muscles and temporomandibular joints. The pain occurs when she uses complete removable dentures fabricated a month ago. Objectively: the lower third of the face is elongated, the lips can be closed with difficulty, smiling causes exposure of the denture base, the articulation is impaired. A mistake must have been made at the following stage of denture fabrication:

- **A.** Determination and fixation of the central occlusion
- **B.** Taking anatomic impressions
- C. Taking functional impressions
- **D.** Testing the denture construction
- **E.** Fitting the dentures and their correction
- 73. A patient consulted a dentist about a cosmetic defect in the cervical region of the upper and lower canines. Various stimuli cause no pain. Objectively: there are V-shaped defects on the vestibular surface in the cervical area of the upper and lower canines. Their surface is smooth, shiny, hard. The reaction to probing and cold stimuli is absent. What treatment should be administered?
- **A.** Filling of the defects
- **B.** Metal crowns
- **C.** Applications with 10% solution of calcium gluconate
- **D.** Application of fluorine lacquer
- **E.** Medical intervention is not necessary
- **74.** A 57-year-old patient complains about dryness and burning of the lateral surface of her tongue. These sensations disappear during eating. She noted such sensations three months ago. She has a history of gastritis with reduced secretory function. Objectively: mucous membrane of tongue and oral cavity has no peculiarities. The back of tongue has thin white coating. Regional lymph nodes are unpalpable. Oral cavity is sanitized. What is the most likely diagnosis?
- **A.** Glossodynia
- **B.** Lingual nerve neuritis
- **C.** Candidiasis
- **D.** Desquamative glossitis
- **E.** Hunter-Moeller glossitis
- **75.** A 65-year-old patient needs complete removable dentures for both jaws. At the stage of "testing the denture construction"the doctor checks the pronunciation of sounds "S"and "Z". Which method of normalization of speech functions should be applied in this case?
- **A.** Phonetic tests
- **B.** Graphic
- **C.** Myogymnastics
- **D.** Spectrographic
- **E.** Acoustic
- **76.** An 18-year-old man complains of the 14, 13, 12, 23, 24 teeth being sensitive to sweet and sour food. Examination revealed some isolated ill-defined chalky spots in the precervical region. What is

the most informative method of study that allows to confirm the diagnosis?

- A. Vital staining
- **B.** X-ray
- **C.** Probing
- **D.** Electro-odontometry
- **E.** Thermometry
- 77. Parents of a 12-year-old child complain of white patches on the upper front teeth, which appeared six months ago. Objectively: chalk-like patches on the vestibular surfaces in the precervical region of the 13, 12, 11, 21, 22, 23 teeth. Their enamel is dull, pliable and rough on probing. There is a history of short-term pain caused by chemical stimuli. What is your provisional diagnosis?
- **A.** Acute initial caries
- **B.** Chronic initial caries
- **C.** Acute superficial caries
- **D.** Systemic enamel hypoplasia
- **E.** Dental fluorosis
- **78.** A 32-year-old female patient needs dental prosthetics. After the objective examination it was decided to use ceramic-metal crown. What impression material should be used for taking impressions for this construction?
- A. Stomaflex
- B. Plaster
- **C.** Stomalgin
- D. Stens
- **E.** Orthocor
- **79.** A 55-year-old patient has a painless, tuberous, cyanotic pedunculated formation 2x1x1,5 cm large that appeared on the site of the extracted 46 tooth. Opening of mouth is not limited. Intra-oral X-ray picture of alveolar process in the region of the removed 46 tooth shows a focus of bone tissue destruction. What is the most likely diagnosis?
- **A.** Giant-cell epulis
- **B.** Hard odontoma of mandible
- **C.** Hypertrophic gingivitis
- **D.** Papilloma of mucous membrane in the area of the extracted 46th tooth
- **E.** Ameloblastoma of mandible
- **80.** A 52-year-old patient presented to the prosthetic dentistry clinic complaining of missing upper jaw teeth and difficult mastication. The patient has an indication for a partial laminar denture for the upper jaw with retaining clamps on the 14, 23 teeth. What kind of denture stabili-

zation will enable such positioning of the clasps?

- **A.** Transversal
- **B.** Sagittal
- **C.** Diagonal
- **D.** Sagitally-transversal
- **E.** Diagonally-sagittal
- **81.** A 56-year-old patient presents to a dental clinic. He has an indication for the extraction of the 22 tooth. Examination revealed periosteal abscess in the projection of the 21, 22, 23 teeth, flattening of the mucogingival junction. What kind of peripheral conduction anaesthesia is most advisable?
- **A.** Extraoral infraorbital anaesthesia + incisor anaesthesia
- **B.** Intraoral infraorbital anaesthesia + incisor anaesthesia
- **C.** Intraoral infraorbital anaesthesia + palatinal anaesthesia
- **D.** Plexus anaesthesia in the projection of the 22 tooth + incisor anaesthesia
- **E.** Plexus anaesthesia in the projection of the 22 tooth + palatinal anaesthesia
- **82.** A 33-year-old patient complains about pain, gingival haemorrhage, halitosis, body temperature rise up to 37,8°C. Objectively: gums are apparently hyperaemic, edematic, bleed easily, parodontal pouches are 3-4 mm deep, and contain purulent exudate. Orthopantomogram shows diffuse osteoporosis of alveolar process, resorption of interdental septa down to 1/3 of their height. What is the most likely diagnosis?
- **A.** Exacerbation of chronic generalized I degree periodontitis
- **B.** Chronic generalized I degree periodontitis
- **C.** Exacerbation of chronic generalized II degree periodontitis
- **D.** Chronic generalized II degree periodontitis
- **E.** Exacerbation of chronic catarrhal gingivitis
- **83.** A 43-year-old patient consulted a maxillofacial surgeon about a cosmetic defect in the right half of his nose. It is known from the history that 7 months ago he got a gunshot wound. Objectively: there is a perforating defect 1,5 x2 cm large in the right half of the nose. The skin around the defect has not changed in colour. It was decided to use the "Indian" method of rhinoplasty. What tissue

should be taken for the defect correction?

- A. Forehead flap
- **B.** Cheek flap
- **C.** Infraorbital flap
- **D.** Shoulder flap
- E. Scapulohumeral flap
- **84.** A 21-year-old patient complains of constant progressing throbbing pain in the 27 tooth. Objectively: a large carious cavity is filled with softened dentin, the tooth cavity is closed. Probing of the cavity floor is painless, percussion causes acute pain, there is grade II tooth mobility. Palpation of the mucous membrane in the projection of the root apex of the 27 tooth causes pain. Radiological changes are absent. What is the most likely diagnosis?
- **A.** Acute purulent periodontitis
- **B.** Exacerbation of chronic periodontitis
- **C.** Acute diffuse pulpitis
- **D.** Acute serous periodontitis
- **E.** Acute purulent pulpitis
- **85.** A 25-year-old patient got a trauma in the chin region. On the basis of X-ray he was diagnosed with bilateral mental fracture of mandible. Specify the direction of displacement of the minor fragment:
- A. Downward and backward
- **B.** Upward and forward
- **C.** Upward and backward
- **D.** Downward and forward
- **E.** There is no displacement
- **86.** 2 days ago a 12-year-old patient prsented with body temperature rise up to  $38,0^{\circ}C$ , on the second day he developed a bilateral edema in the parotid region. The skin over the edema was tense, of normal color. Palpation revealed soft, enlarged, painful parotid salivary glands. Salivation from the parotid ducts was abnormal, the duct orifices were hyperaemic. Palpation caused pain in the angle of mandible, at the top of mastoid bone, in front of the antilobium. What is the most likely diagnosis?
- **A.** Mumps
- **B.** Herzenberg pseudoparotitis
- **C.** Acute bacterial parotitis
- **D.** Purulent-necrotic parotitis
- E. Sjogren's syndrome
- **87.** A 38-year-old patient with chronic generalized periodontitis has been referred to orthopedic treatment. Objectively: dentitions are without gaps, the 12,

- 11, 21, 22 teeth are pulpless and exhibit I grade mobility. The other teeth are stable. What is the most aesthetic splint for the anterior teeth?
- **A.** Mamlok splint
- **B.** Ring adhesion splint
- **C.** Soldered combined crowns
- **D.** Cap splint
- E. Brace
- **88.** A 42-year-old patient has been hospitalized with Le Fort II fracture of maxilla. Select an appliance for the treatment of this patient:
- A. Zbarzh
- B. Kulagin
- C. Rudko
- **D.** Penn-Brown
- **E.** Yadrova
- **89.** An 8-year-old child presents with an edema of the submandibular region, the mouth can be opened by 1,5 cm, further opening is difficult, body temperature is  $37,6^{\circ}C$ , mucogingival fold is vestibularly flattened, hyperaemic and swollen. The 84 and 85 teeth have fillings, their percussion is painless. The 84 tooth exhibits I degree mobility. What is the most likely diagnosis?
- A. Acute odontogenic periostitis
- **B.** Acute odontogenic osteomyelitis
- **C.** Chronic odontogenic periostitis
- **D.** Chronic odontogenic osteomyelitis
- **E.** Exacerbation of chronic periodontitis
- **90.** A 43-year-old patient complains about mobility of lower jaw teeth. Objectively: the dentition is intact. Tooth mobility is of I-II grade. It is planned to immobilize teeth by means of a removable splint common for the whole dentition. What stabilization will be provided by means of this splint?
- A. Circle
- **B.** Frontal
- **C.** Frontal-lateral
- **D.** Sagittal
- E. Transversal
- **91.** A patient needs a clasp denture for the lower jaw. Objectively: dental formula is 31, 32, 33, 34, 41, 42, 43, 44. The 44 totoh is inclined toward the cheek. What type of Ney's clasp should be used?

- A. Fourth
- **B.** First
- C. Second
- **D.** Third
- E. Fifth
- **92.** A 17-year-old man complains of a cosmetic defect in form of light spots on the teeth. In the area of his residence the fluoride concentration in drinking water is at the rate of 1 mg/l. Objectively: vestibular surface of the 11,12, 21, 22, and tubercles of the 16, 26, 36 and 46 teeth have chalky spots with shiny surface that have been present since the time of eruption. What is the most likely diagnosis?
- **A.** Systemic hypoplasia
- **B.** Multiple caries
- **C.** Endemic fluorosis
- **D.** Enamel erosion
- **E.** Amelogenesis imperfecta
- **93.** A 65-year-old patient complains about unsatisfactory fixation of complete removable lamellar denture of his upper jaw. The denture was fabricated 6 years ago. Objectively: balancing and poor fixation of complete removable denture is present. What is the reason of such condition?
- **A.** Atrophy of osseous base of the prosthetic bed tissues
- **B.** Wear of artificial teeth
- **C.** Bad hygiene of removable denture
- **D.** Discoloration of basic plastic
- **E.** Loss of certain antagonists
- 94. A patient complains of heaviness in the left section of his head, pain in the 26 tooth. Objectively: the crown of the 26 tooth is destroyed by 2/3 by caries, the tooth percussion is weakly positive. X-ray picture of paranasal sinuses shows definite unilateral dome-shaped veiling of the upper left maxillary sinus. On the X-ray picture of the 26 tooth the periodontal fissure at the root apex is missing. What is the most likely diagnosis?
- **A.** Radicular cyst ingrown into the maxillary sinus
- **B.** Řhinoantritis
- **C.** Odontogenic sinusitis
- **D.** Cyst of the maxillary sinus mucosa
- **E.** Malignant maxillary tumour
- **95.** Preventive examination of a 5-yearold child revealed half-open mouth, difficult closing of lips, primary occlusion, 4 mm sagittal gap, homonymous canines and second molars. The upper dental arch

is V-shaped, the lower one is trapezoid. Both dental arches in primary occlusion should have the following shape:

- A. Semicircle
- **B.** Semiellipse
- **C.** Parabola
- **D.** Quadrangle
- E. Triangle
- **96.** A 46-year-old patient complains about pain and bleeding from the carious cavity of her 27 tooth during eating. Previously she had spontaneous pain. Examination of the 27 tooth revealed a deep carious cavity on the masticatory surface consisting of red tissue, probing induced pain and haemorrhage. What treatment method should be chosen?
- **A.** Vital extirpation
- **B.** Devital extirpation
- C. Devital amputation
- **D.** Vital amputation
- **E.** Biological method
- 97. A 25-year-old student complains of a carious cavity in the 22 tooth. The fillings fell out 2 months ago. The tooth had been treated before for pulpitis. Objectively: there is a deep carious cavity with the rests of filling on the medial surface of the 22 tooth. The crown of the 22 tooth is dirty pink. X-ray shows a root canal filled with the filling material by 1/2 of the root length; in the region of the root apex there is a well-defined focus of destruction of bone tissue 0,3x0,3 cm large. What is the most likely diagnosis?
- **A.** Chronic granulomatous periodontitis
- **B.** Residual pulpitis
- **C.** Radicular cyst
- **D.** Chronic fibrous periodontitis
- **E.** Chronic granulating periodontitis
- **98.** A 35-year-old patient consulted a dentist about extraction of the 14 tooth because of exacerbation of chronic periodontitis following ineffective therapeutic treatment. What tools should be applied for extraction?
- **A.** S-shaped forceps
- **B.** Crown bayonet-shaped forceps
- C. S-shaped forceps curved right
- **D.** Straight forceps
- E. Root bayonet-shaped forceps
- **99.** A 32-year-old patient complains of mouth soreness, body temperature rise up to  $38,5^{\circ}C$ , indisposition. Such condition has occurred periodically for several years

after the patient had had a cold. Objectively: lips are covered with haemorrhagic crusts, hyperaemic mucous membrane of lips and cheeks has erosions covered with fibrinous films. Hypersalivation is present. What is the most likely diagnosis?

- **A.** Multiform exudative erythema
- **B.** Pemphigus vulgaris
- **C.** Herpes recidivicus
- **D.** Herpetiform Duhring's dermatitis
- E. Stevens-Johnson syndrome
- **100.** A 25-year-old man consulted a dentist about extraction of the 18 tooth, it's crown is destroyed by 1/2. The tooth was treated more than once. During tooth extraction the maxillary tuber was accidentally torn off. What actions should be taken?
- **A.** To remove the fragment and stitch up the wound
- **B.** To try to restore the fragment to its place
- **C.** To restore the fragment to its place and fix it there
- **D.** To remove the fragment
- **E.** To remove the fragment and tampon the wound
- **101.** A 10-year-old child complains of gingival pain and haemorrhage which appeared two days ago after a cold. Objectively: the gingiva is edematic, hyperaemic, bleeds easily, painful on palpation. The tips of gingival papillae are dome-shaped. What is the most likely diagnosis?
- **A.** Acute catarrhal gingivitis
- **B.** Chronic catarrhal gingivitis
- **C.** Hypertrophic gingivitis
- **D.** Ulcerative gingivitis
- **E.** Generalized periodontitis
- 102. A 53-year-old patient consulted a dentist about pain and an ulcer that turned up in the region of hard palate under his partial removable denture. He hasn't used the denture for three weeks, but the ulcer does not heal or reduce in size. Examination reveals a 2x1,5 cm large ulcer in the region of the alveolar process and hard palate at the level of the missing 14 tooth. The ulcer has everted rolled edges and necrotic floor, it is dense and painful. Gingival and palatal tissues around the ulcer are infiltrated. What is the most likely diagnosis?

- **A.** Maxillary carcinoma
- **B.** Maxillary syphilis
- **C.** Maxillary tuberculosis
- **D.** Maxillary actinomycosis
- E. Decubital ulcer
- 103. A 13-year-old girl complains about frequent falling out of a filling in the 21 tooth. It is known from the anamnesis that 2 years ago she underwent treatment on account of a dental trauma. Objectively: a transverse defect of 1/3 of the crown in the 21 tooth. Percussion is painless. Tooth colour is unchanged. X-ray picture shows that root canal is filled by 1 mm from the apex, filling material closely fits the walls of root canal. What stomatological tactics should be chosen?
- **A.** The defect should be restored with photopolymer
- **B.** The root canal should be refilled
- C. The root apex should be resected
- **D.** The tooth should be extracted
- **E.** The tooth should be crowned with an artificial crown
- 104. A 34-year-old male patient complains of acute spasmodic pain in the region of his upper jaw on the left that is getting worse as affected by cold stimuli. Toothache irradiates to the ear and temple. He had acute toothache of the 37 tooth one year ago, but he didn't consult a dentist. Pain recurred three days ago. Objectively: the 37 tooth has a carious cavity communicating with the dental cavity. Probing of the opened carious cavity is extremely painful. X-ray picture shows widening of periodontal fissure at the root apex of the 37 tooth. What is the most likely diagnosis?
- **A.** Exacerbation of chronic pulpitis
- **B.** Exacerbation of chronic granulating periodontitis
- **C.** Exacerbation of chronic fibrous periodontitis
- **D.** Acute diffuse pulpitis
- **E.** Acute purulent pulpitis
- **105.** During tooth extraction a 32-year-old patient presented with sudden weakness, pale skin, cold sweat, weak pulse, a significant AP drop (diastolic pressure 40 mm Hg). What complication developed in the patient?

- A. Collapse
- **B.** Syncope
- **C.** Traumatic shock
- **D.** Anaphylactic shock
- E. Attack of stenocardia
- **106.** A patient complains about pain in the 45 tooth induced by cold, sour and sweet food stimuli. The pain abates when the stimulus action is stopped. Objectively: there is a carious cavity on the masticatory surface within mantle dentin filled with food rests and softened dentin, overhanging enamel edeges are chalky. What is the diagnosis?
- **A.** Acute median caries
- **B.** Chronic median caries
- **C.** Acute superficial caries
- **D.** Acute deep caries
- **E.** Chronic deep caries
- **107.** A 79-year-old female patient consulted a prosthodontist about denture replacement. The patient has a history of a stroke. Objectively: acute irregular atrophy of the alveolar processes of both jaws is present; mucous membrane of the oral cavity is dry and nonmobile. The previous dentures cannot be fixed. What is the most appropriate prosthetic construction?
- **A.** Dentures with elastic lining
- **B.** Dentures with extended borders
- **C.** Dentures with metal bases
- **D.** Dentures with shortened borders
- **E.** Implant-supported dentures
- **108.** A 56-year-old patient consulted a dental surgeon about the root extraction of the 17 toot. What kind of anaesthesia should be applied?
- **A.** Palatinal, tuberal anaesthesia
- **B.** Palatinal, infraorbital anaesthesia
- **C.** Infiltration, inscisor anaesthesia
- **D.** Mandibular anaesthesia
- E. Torus anaesthesia
- **109.** A 23-year-old female patient complains of a pronounced limitation of mouth opening, throat pain irradiating to the ear. Objectively: body temperature is 37,9°C. The face is symmetrical, the colour of skin has not changed. Palpation of the jaw causes acute pain, mouth opens by 1 cm. The patient had been given anasthesia by Berchet-Dubov. After it oral examination revealed an edema and hyperemia of the mucous membrane of the pterygomaxillary fold, there was an infiltration painful on palpation. What is

the most likely diagnosis?

- A. Abscess of pterygomaxillary space
- **B.** Abscess of alveololingual groove
- C. Parapharyngeal space phlegmon
- **D.** Peritonsillar space abscess
- **E.** Submandibular phlegmon
- 110. Parents of an 8-year-old child complain about a painful formation in the child's oral cavity that obstructs food intake. The same complaints were registered two years ago. Mucous membrane of lateral tongue surface is hyperemic and edematic. There is an oval erosion over 0,7 cm large covered with yellow greyish deposit. Erosion edges are hyperemic and painful on palpation. The child has a history of chronic cholecystocholangitis. What is the most likely diagnosis?
- **A.** Chronic recurrent aphthous stomatitis
- **B.** Erythema multiforme
- **C.** Behcet's syndrome
- **D.** Stevens-Johnson syndrome
- E. Traumatic erosion
- 111. A 12-year-old child complains of body temperature rise up to  $39,8^{\circ}C$ , weakness, headache and pain in throat getting worse when swallowing. Objectively: mucous membrane of gums is edematic, hyperemic. Tonsils are bright red, hypertrophic, covered with yellow-gray deposit which does not extend beyond the lymphoid tissue and can be easily removed. Submandibular, occipital lymph nodes are significantly enlarged, slightly painful on palpation. Hepatosplenomegaly is present. Identify the causative agent of this disease:
- A. Epstein-Barr virus
- **B.** Bordet-Gengou bacillus
- **C.** Coxsackie virus
- **D.** Herpes virus
- E. Loeffler's Bacillus
- about mobility of his metal-ceramic dental bridge supported by the 33, 37 teeth. The bridge has been in use for 9 months. Objectively: X-ray picture shows alveolar process atrophy by 2/3 in the area of the 33, and by 1/2 of root length in the area of the 37; there are pathological pockets, gingivitis. What is the cause of pathological mobility of supporting teeth?

- **A.** Functional shifting of supporting teeth under stress
- **B.** Injuring of circle ligament by crown edges
- **C.** Devitalization of supporting teeth
- **D.** Massive grinding off of hard tissues
- **E.** Garland modelling in the precervical region
- 113. An orthodontist monitors a 4-yearold child with mouth breath. The child has a history of adenotomy. Objectively: primary dentition occlusion; the upper incisors overlap the lower ones by 1/3; distal surfaces of the second temporary molars are situated in the same vertical plane. What preventive device will help the child to give up the habit of mouth breath?
- A. Standard Schonherr's vestibular screen
- B. Vesibular and oral Kraus' screen
- **C.** Frankel's function regulator
- **D.** Andresen-Haupl activator
- E. Rudolph's appliance
- 114. A 5-year-old boy complains of a carious cavity, periodic toothache, gum swelling. Objectively: masticatory surface of the 74 tooth has a deep cavity not communicating with the tooth cavity, cold stimuli, probing and percussion are painless, mucous membrane is pale pink, there is a caicatrix from a fistula. X-ray picture shows an ill-defined focus of bone tissue destruction in the region of the roots bifurcation. What is the most likely diagnosis?
- **A.** Chronic granulating periodontitis
- **B.** Exacerbation of chronic fibrous periodontitis
- **C.** Chronic fibrous periodontitis
- **D.** Exacerbation of chronic granulating periodontitis
- **E.** Chronic granulomatous periodontitis
- 115. A 13-year-old girl complains of toothache increasing while biting. Objectively: the 36 tooth has a deep carious cavity not communicating with the tooth cavity, the response to thermal stimuli is painless, percussion is sharply painful, mucous membrane is intact. X-ray picture shows no changes. What is the most likely diagnosis?
- **A.** Acute serous periodontitis
- **B.** Acute purulent periodontitis
- **C.** Acute serous pulpitis
- **D.** Acute purulent pulpitis
- E. Exacerbation of chronic periodontitis
- 116. A 12-year-old patient complains

of gingival haemorrhage, tooth mobility. He has has these presentations since the age of 4. Objectively: gingiva around all the teeth is hyperaemic, edematic, bleeds during instrumental examination. The teeth roots are exposed by 1/3 and covered with whitish plaque. The teeth are mobile. Dentogingival pockets are 4-5 mm deep. External examination revealed dryness and thickening of the outer layer of skin on the palms, anterior third of the forearms, soles; there are skin cracks. What is the most likely diagnosis?

- A. Papillon-Lefevre syndrome
- **B.** Hand-Schuller-Christian disease
- C. Niemann-Pick disease
- **D.** Letterer-Siewe disease
- E. Cyclic neutropenia
- 117. A 47-year-old patient came to an orthopaedic stomatology center with complaints about missing tooth in the frontal part of his upper jaw, cosmetic defect. Objectively: the occlusion is orthogenic, the 11 tooth is missing. Anamnesis data: the patient had myocardial infarction 3 months ago. What denture should be applied for the time being?
- A. Partial removable lamellar denture
- **B.** Bridge denture suported by the 21 and 12 teeth
- **C.** Bridge denture suported by the 21 tooth
- **D.** Clasp denture
- E. Implant
- 118. Parents of a 6-year-old child applied to a pedodontist for preventive examination of their child. The oral cavity is sanitized. According to the parents, the child has recently cut the 36 and the 46 tooth. What method of caries prevention should be applied within 1,5-2 years after cutting of the mentioned teeth?
- **A.** Fissure hermetization
- **B.** Fissure silvering
- **C.** Coating the teeth with fluorine lacquer Ftorlak
- **D.** Remodentum solution applications
- **E.** Gargling with sodium fluoride
- 119. A 70-year-old patient is awaiting complete removable dentures for both upper and lower jaws. Teeth placement will be made by Vasilyev's method. What teeth in the upper denture must not touch glass?

- A. Lateral incisors and second molars
- **B.** Central incisors and first molars
- **C.** First and second premolars
- **D.** Canines and first molars
- **E.** Second premolars and first molars
- **120.** A 20-year-old pregnant woman complains of gingival enlargement, bleeding and pain during eating and tooth brushing. Objectively: gingival papillae on the upper and lower jaw are hyperaemic, haemorrhagic, painfu, cover the crowns of teeth by 1/2. Scalloped contours of marginal gingiva are abnormal. What is the most likely diagnosis?
- **A.** Hypertrophic gingivitis, edematous form
- **B.** Acute catarrhal gingivitis
- **C.** Chronic catarrhal gingivitis
- **D.** Generalized periodontitis
- E. Hypertrophic gingivitis, fibrous form
- **121.** A 55-year-old patient consulted a dentist about a roundish tumour-like formation of about 1 cm in diameter located within the vermilion border of his lower lip. Objectively: the tumour-like formation protrudes about 5 mm above the vermilion border, it is dense and grayish-red. The surface of the formation is covered with thin scales that can hardly be removed. What is the most likely diagnosis?
- **A.** Verrucous precancer of the vermilion border of lip
- **B.** Abrasive precancerous Manganotti's cheilitis
- **C.** Precancerous limited hyperkeratosis of the vermilion border of lip
- **D.** Bowen's disease
- **E.** Erythroplasia of Queyrat
- **122.** A 50-year-old patient has a defect of the lower dental arch. It is planned to make an implant-supported bridge for its restoration. X-ray picture shows that the height of the bone mass from projection of mandibular canal up to the top of alveolar crest is 2 cm. What type of implant should be applied?
- A. Threaded
- **B.** Endodontic-endoosseous
- **C.** Plate-form
- **D.** Subperiosteal
- E. Conical
- **123.** External examination of a 7-year-old child revealed: thickening of nose bridge, semi-open mouth, dry lips. Mouth corners are peeling. Anamnesis data: the child

sleeps with open mouth. Examination of oral cavity revealed no changes. What dispensary group will this child fall into?

- **A.** The second
- **B.** The first
- C. The third
- **D.** The fourth
- E. -
- **124.** A 10-year-old child undergoes sanitation of the oral cavity. The girl was found to have chalky spots on the vestibular surfaces in the precervical region of the 21 and 12 teeth. Enamel surface is dull, smooth. Pain reaction to the temperature stimuli is absent. What additional method of examination is expected to confirm the diagnosis?
- A. Vital staining
- **B.** Orthopantomography
- C. Intraoral roentgenography
- **D.** Electroodontodiagnostics
- **E.** Ultraviolet stomatoscopy
- **125.** Objective examination of a 10-year-old child revealed that the whole lower lip was slightly hyperemic, infiltrated, dry, covered with small scales. Architectonics of lips is changed. The child complains of dryness and a feeling of tense lips, especially in autumn and winter. The child had a bad habit of lip sucking. What is the most likely diagnosis?
- **A.** Meteorological cheilitis
- **B.** Allergic cheilitis
- **C.** Atopic cheilitis
- **D.** Exfoliative cheilitis
- **E.** Microbial cheilitis
- **126.** A patient has got a traumatic fracture of mandible in the area of the missing 34, 35 teeth with a slight displacement and a defect of alveolar part in the area of the 34, 35 teeth. Other teeth on both lower and upper jaws are intact. What splint would be optimal in this case?
- **A.** Tigerstedt's splint with a spreading curve
- **B.** Plain splint cramp
- **C.** Port's splint
- **D.** Vasilyev's splint
- E. Vankevich splint
- **127.** A 30-year-old patient needs to have his 26 tooth extracted because of exacerbation of chronic periodontitis. Objectively: the crown of the 26 tooth is decayed by 1/3. What forceps can be used for this tooth extraction?

- **A.** S-shaped forceps with a projecting tip on the left beak
- **B.** S-shaped forceps with a projecting tip on the right beak
- **C.** Straight forceps
- **D.** Straight elevator
- **E.** S-shaped forceps without projecting tips
- **128.** A 25-year-old male patient has bilateral fracture of the lower jaw. A fragment in the region of the 44, 43, 42, 41, 31, 32, 33, 34 teeth is displaced downward and backward. What appliance should be used for the fragment reposition?
- **A.** Post's appliance
- **B.** One-jaw bite-guard splint
- C. Kurlyandsky's appliance with levers
- **D.** Weber's appliance
- **E.** Shur's appliance
- **129.** A 49-year-old patient consulted a dental surgeon about the oral cavity sanation. He has an indication for the extraction of the 16 tooth. History: the tooth hasn't been treated before, decayed within the last 4 years. Objectively: the 16 tooth's crown is destroyed by over 2/3, the mucosa exhibits no pathological changes. Which tool is required for the tooth extraction?
- A. Bayonet root forceps
- **B.** S-shaped forceps (right)
- **C.** Straight elevator
- **D.** S-shaped closed-beak forceps
- **E.** Crown bayonet forceps
- **130.** A 9-year-old child complains of pain caused by sweet and sour food in an upper tooth on the left. Objectively: the 26 tooth has a carious cavity on the masticatory surface within the enamel limits. What is the optimal material to fill the 26 tooth?
- **A.** Composite
- **B.** Glass ionomer
- **C.** Silicophosphate cement
- **D.** Silicate cement
- **E.** Zinc phosphate cement
- 131. A patient complains about spontaneous pain in the area of his 15 tooth he has been feeling for 2 days. Thermal stimuli make the pain worse, its attacks last up to 30 minutes. Objectively: there is a deep carious cavity in the 15 tooth consisting of light softened dentin, floor probing is painful in one point, reaction to the thermal stimuli is positive, percussion is painless. Make a diagnosis:

- A. Acute local pulpitis
- **B.** Acute diffuse pulpitis
- C. Pulp hyperemia
- **D.** Acute deep caries
- **E.** Acute condition of chronic pulpitis
- 132. A 6-year-old child presents with weakness, pain in throat when swallowing, body temperature rise up to  $38,0^{\circ}C$ . Examination of the the oral cavity revealed massive hyperaemia of the mucous membrane of the soft palate, palatine arches, tonsils, uvula; there were also single vesicles and erosions extremely painful when touched. Regional lymph nodes are enlarged, painful on palpation. What is the most likely diagnosis?
- A. Herpangina
- **B.** Chickenpox
- **C.** Mycotic angina
- **D.** Infectious mononucleosis
- E. Diphtheria
- 133. A 35-year-old patient complains of progressing throbbing pain in the 26 tooth. Objectively: the 26 tooth has a carious cavity filled with softened dentine, tooth cavity is closed, probing of the cavity floor is painless, percussion causes acute pain. There is I grade tooth mobility. Roentgenological changes are absent. What is the most likely diagnosis?
- A. Acute purulent periodontitis
- **B.** Acute purulent pulpitis
- **C.** Acute serous periodontitis
- **D.** Exacerbation of chronic periodontitis
- **E.** Acute diffuse pulpitis
- **134.** A patient complains of burning, itch and lower lip enlargement. He has been suffering from this for a long time. Objectively: the patient's face is asymmetric due to the flattening of nasolabial fold. His lower lip is edematic, of normal colour, painless on palpation. The patient has plicated tongue. What is your provisional diagnosis?
- **A.** Melkersson-Rosenthal syndrome
- **B.** Quincke's edema
- **C.** Lymphangioma
- **D.** Hemangioma
- E. Granulomatous Miescher's cheilitis
- **135.** A 50-year-old woman complains about a neoplasm on her lower lip on the side of oral cavity that appeared a month ago and has been slowly growing since that. Objectively: there is a roundish, elastic, painless neoplasm inside the lower

- lip. Mucous membrane hasn't changed its colour. Make a diagnosis:
- A. Retention cyst of lower lip
- **B.** Lip abscess
- C. Lip papilloma
- **D.** Lip fibroma
- **E.** Lip lipoma
- **136.** A 35-year-old patient complains of a neoplasm on the tip of the tongue which he hurts with his teeth. The neoplasm sometimes increases, and sometimes decreases in size. Objectively: on the tip of tongue there is a roundish neoplasm 0,5 cm in diameter with distinct borders and broad base. The neoplasm is the same colour as the mucosa of tongue. What is the most likely diagnosis?
- A. Papilloma of tongue
- **B.** Abscess of tongue
- C. Lipoma of tongue
- **D.** Hemangiofibroma of tongue
- E. Fibroma of tongue
- 137. A 35-year-old female patient consulted a dentist about a painless, slowly growing neoplasm in the region of the 11 and 12 teeth. Examination revealed that the tumour was light-pink, flat, adjacent to the teeth, had a pedicle. The tumour was up to 1,5 cm large, with smooth surface and dense consistency. It was diagnosed as an epulis in the region of the 11 and 12 teeth. What form of epulis are these clinical findings typical for?
- **A.** Fibrous
- **B.** Angiomatous
- **C.** Giant-cell
- **D.** Pregnancy epulis
- E. -
- **138.** As a result of a car accident a 45-year-old patient got an injury of his upper jaw. Examination revealed elongated and flattened face, profuse nasal haemorrhage, liquorrhea from the nose and ears. These clinical presentations are typical for the following fracture of upper jaw:
- **A.** Subbasal (Le Fort III)
- **B.** Subnasal (Le Fort I)
- **C.** Suborbital (Le Fort II)
- **D.** Bilateral fracture of zygomatic bones
- **139.** A 7-year-old child has protruding chin, the lower lip overlaps the upper one. There are diastemas and tremas between the lower incisors, the lower incisors overlap the upper incisors by 2/3 of

the crown height. First permanent molars demonstrate Angle's class III relation. Sagittal gap is 3 mm. The correct doctor's tactics will be to:

A. Use Bruckl's appliance

**B.** Recommend a complex of myogymnastic exercises

**C.** Use Angle's apparatus

**D.** Use Bynin appliance

E. Use Schwartz appliance

- **140.** A 5-year-old child was found to have missing upper molars. Lower incisors are in contact with the mucous membrane of palate. Specify the doctor's tactics:
- **A.** Fabricate a removable laminar denture **B.** Examine the child every six months
- **B.** Examine the child every six months until the eruption of permanent teeth
- **C.** Examine the child once a year until the eruption of permanent teeth
- **D.** Fabricate an orthodontic appliance for the treatment of closed bite
- E. Medical intervention is not needed
- **141.** A child is 7 years old. He has early transitional dentition. There is overcrowding of the lower front teeth: the 42 and 32 teeth erupted orally with a complete lack of space. Make a plan of treatment:
- **A.** Serial consecutive extraction by Hotz method
- **B.** Extraction of the 42 and 32 teeth
- C. Extraction of the 41 and 31 teeth
- **D.** Extraction of the 83 and 73 teeth
- **E.** Extraction of the 84 and 74 teeth
- 142. A 14-year-old girl complains of indistinct pronunciation that showed up at the age of 14 after the acute respiratory viral disease. Examination revealed normal face and normal teeth alignment, occlusal disharmony was not found. Palpation didn't reveal cleft palate. Uvula doesn't move during pronunciation of sounds, its palpation does not cause gag reflex. What is the reason for indistinct pronunciation of sounds?
- **A.** Paresis of the soft palate and uvula muscles
- **B.** Adenoid vegetations
- **C.** Palatal slit
- **D.** Hypertrophy of lingual tonsil
- **E.** Deformation of the bite
- **143.** A 35-year-old patient complains of a swelling in the sublingual region which impairs speech and causes discomfort during eating. The swelling turned up

about a week ago. Objectively: there is a roundish bulge up to 3 cm in diameter in the right sublingual region. Mucous membrane over it is not hyperaemic, there is fluctuation symptom in the center. Which disease do these symptoms correspond with?

- **A.** Retention cyst of the right sublingual salivary gland
- **B.** Retention cyst of the right submandibular salivary gland
- **C.** Acute sialoadenitis of submandibular salivary gland
- **D.** Chronic sialoadenitis of sublingual salivary gland
- E. Sjogren's disease
- **144.** During orthopaedic treatment a 47-year-old patient was given anaesthesia (with *Ultracain DS forte*). 20 minutes after the injection the patient presented with hyperaemia of skin, headache, dizziness, increased heart rate. The patient had previously undergone dental treatment with the use of this anaesthetic. What complication developed in this patient?
- **A.** AP rise
- **B.** Anaphylactic shock
- C. Syncope
- **D.** Čollapse
- E. Attack of stenocardia
- **145.** A 35-year-old patient seeks prosthetic dentistry. Objectively: 18, 14, 13, 12, 11, 21, 22, 23, 24, 28. The crowns confining the defect are high and stable. To restore the integrity of the dentition it is planned to fabricate a one-piece clasp denture. What kind of mechanical fixator should be used?
- **A.** Bar fixation
- **B.** Supporting-retaining clasps
- **C.** Retaining clasps
- **D.** Telescopic fixation
- **E.** Dentoalveolar clasps

**146.** A 42-year-old woman prsented to a prosthetic dentistry clinic seeking dental prosthetics. Objectively: dental formula is

The bite is deep, clinical crowns are low, survey line is not marked. The patient suffers from epileptiform attacks. What prosthesis is indicated?

- **A.** Partial removable lamellar prosthesis with metal base
- B. Dental bridges
- **C.** Partial removable lamellar plastic prosthesis with retaining clasps
- **D.** Partial removable lamellar prosthesis with supporting-retaining clasps
- E. Clasp denture
- **147.** A 22-year-old patient presented to a prosthetic dentistry clinic because of missing of the 21 tooth, the 11 and 22 teeth are intact. The 21 tooth was extracted 2 months ago. What construction is most suitable in this case?
- **A.** Two-stage implantation
- **B.** One-stage implantation with simultaneous fabrication of metal-ceramic crown
- C. Partial removable denture
- **D.** Stamped-soldered denture supported by the 11 and 22 teeth
- **E.** Metal-plastic denture supported by the 11 and 22 teeth
- **148.** A 48-year-old patient has undergone unilateral resection of the upper jaw. He needs a resection prosthesis. Objectively: the 21, 22, 23, 24, 25, 26 teeth are stable, hard palate is broad, flat. What connection of clasps with the base will reduce the instability of the resection prosthesis?
- A. Articular
- **B.** Stable
- C. Elastic
- **D.** Fixed
- **E.** Does not matter
- **149.** At a dentist's appointment a 12-yearold child inhaled a cotton turunda: he developed noisy respiration with a whistling sound, sudden dyspnea, pallor along with pronounced cyanosis, sweating. What kind of urgent condition developed in this patient?
- **A.** Obstructive asphyxia
- **B.** Dislocation asphyxia
- C. Valvular asphyxia
- **D.** Anaphylactic shock
- E. Collapse
- **150.** A 39-year-old patient complains of experiencing pain in the region of the 21 tooth for 2 days. It is known from the history that the indicated tooth had been treated before for caries. Objectively: the 21 tooth is covered with metal-ceramic crown, mucous membrane in apex projection is edematic and hyperaemic. Percussion of the tooth is extremely pai-

- nful. X-ray picture shows improperly filled root canal. It is planned to remove the 21 tooth crown. What kind of anaesthesia should be given?
- A. Field block anaesthesia
- **B.** Infiltration anaesthesia
- C. Intraligamentous anaesthesia
- **D.** Application anaesthesia
- E. Intraosseous anaesthesia
- **151.** An 8-year-old child has a deep carious cavity communicating with tooth cavity on the distal-approximal masticatory surface of the 75 tooth. Probing causes pain. Percussion is painless. Cold water causes slowly abating pain. The tooth decayed several months ago and wasn't treated. What treatment method would be efficient in this case?
- **A.** Devital amputation
- **B.** Biological method
- **C.** Vital extirpation
- **D.** Vital amputation
- E. Devital extirpation
- 152. An 8-year-old child complains about pain in the 21 tooth that is getting worse during biting down. A month ago a part of tooth crown broke off as a result of a fall. The child didn't consult a dentist. Objectively: in the region of medial angle of the 21 tooth there is a crown defect that makes up 1/3 of the crown's height. Tooth cavity is open, probing and thermal stimulus cause no pain. Percussion is acutely painful. Gum around the 21 tooth is edematic and hyperaemic. What is the provisional diagnosis?
- **A.** Acute condition of chronic periodontitis
- **B.** Acute condition of chronic pulpitis
- **C.** Acute serous periodontitis
- **D.** Acute purulent periodontitis
- **E.** Pulpitis complicated by periodontitis
- **153.** A 12-year-old patient complains about an aesthetic defect. Objectively: the lower third of face is shortened, upper frontal teeth overbite the lower teeth by 3/3 of height, exhibit oral inclination, lateral parts all along exhibit cusp-to-cusp relationship between the antagonists; Angle's class II malocclusion (joining of the upper permanent molars) is also present. Malocclusion is observed in the following planes:

- **A.** In sagittal and vertical
- **B.** In transversal
- **C.** In transversal and vertical
- **D.** In vertical
- E. In sagittal
- 52-year-old female **154.** Α patient complains of dry mouth, taste impairment, burning and pricking sensations in the tongue that disappear during eating but intensify at the end of the day. For the first time such problems arose 2 years ago after a psychic trauma. She has a history of anacid gastritis. Objectively: the general condition is satisfactory, the patient is restless, tearful. Oral mucosa is pale pink, dry; filiform papillae on the dorsum of tongue are reduced. Pharyngeal reflex is dramatically reduced. There is segmetal disturbance of facial skin sensation. What is the most likely diagnosis?
- A. Glossodynia
- **B.** Moller-Hunter glossitis
- **C.** Ganglionitis of sublingual ganglions
- **D.** Chronic atrophic candidous glossitis
- E. Desquamative glossitis
- **155.** A 40-year-old patient complains about difficult mastication as a result of lower jaw displacement. He has a history of mental fracture 2 months ago. Objectively: the 35, 36, 38 ... 45, 46 teeth are missing. Remaining teeth are intact. The 43, 44, 47, 48 teeth have no contact with antagonists and their oral deviation makes up 1 cm. What is the optimal construction of lower jaw denture?
- A. Denture with double dentition
- **B.** Metal-ceramic dental bridge
- **C.** Soldered splint on rings
- **D.** Removable lamellar denture
- E. Adhesive denture
- **156.** The department of maxillofacial surgery admitted a patient who needs repair of a post-traumatic defect of nose wing up to 3,0 cm in diameter. The trauma occured six months ago. What kind of grafting is indicated in this clinical situation?
- **A.** Grafting with chondrocutaneous flap of the auricle
- **B.** Grafting with local tissues of nasolabial or cheek regions
- **C.** Grafting with pedicle flap of frontal and buccal regions
- **D.** Grafting with tubed pedicle (Filatov's) flap
- **E.** Free grafting with dermal flap

- **157.** During taking of impressions at a dentist's appointment a patient presented with the following symptoms: paroxysmal cough, cyanosis, vomiting, clapping sound during inspiration. Make the diagnosis:
- **A.** Aspiration of a foreign body
- **B.** Attack of bronchial asthma
- C. Acute bronchitis
- **D.** Tracheitis
- **E.** Hypersensitive gag reflex
- **158.** At a dentist's appointment a patient complained of weakness, nausea, blackout, and then he lost consciousness. Make a diagnosis:
- A. Syncope
- B. Shock
- C. Collapse
- D. Coma
- E. Insult
- **159.** During the preparation of a tooth a patient had an epileptic seizure. The seizure was arrested. What mistake did the orthopaedist make?
- **A.** Didn't collect complete history data
- **B.** Did not apply one of the types of local anesthesia
- **C.** Violated the rules of preparation
- **D.** Skipped psychological preparation of the patient
- **E.** Didn't apply general anaesthesia
- **160.** A 32-year-old patient needs to be provided with metal-ceramic crowns for the 12, 11, 21 and 22 teeth. During the dental visit he is given infiltration anaesthesia with *Ultracain DS* anaesthetic. What elements enter into its composition?
- **A.** 4% articaine with adrenaline
- **B.** 2% mepivacaine with adrenaline
- C. 4% articaine without a vasoconstrictor agent
- **D.** 3% mepivacaine without a vasoconstrictor agent
- **E.** 2% articaine with epinephrine
- **161.** A 9-year-old boy has been diagnosed with a complete dislocation of the 21 tooth. The child got injured 20 hours ago. He has diabetes. Select a treatment tactics:

**A.** The tooth cannot be preserved or reimplanted

**B.** Reimplantation, fixation of the tooth and further follow-up

**C.** Root apex resection, reimplantation, fixation of the tooth

**D.** Filling of the root canal with amalgam, reimplantation

**E.** Filling of the root canal with paste containing calcium, reimplantation, fixation of the tooth

**162.** Parents of a 7,5-year old child brought him to the dentist for oral cavity sanitation. Objectively: DEF (for primary teeth) + DMF (for permanent teeth) index = 4, Green-Vermillion index = 2,5. Fissures of the first permanent molars are open, intact, non-pigmented. What method of primary prevention of dental caries may be appropriate in this case?

**A.** Non-invasive hermetization

**B.** Invasive hermetization

**C.** Application of fluoride varnish

**D.** Application of antibacterial varnish

**E.** Application of calcium gels

**163.** A 35-year-old patient complains of a significant enlargement of the upper lip and eyelids, which developed within a few minutes (during cleaning the house with a detergent). Objectively: there is an edema of the upper part of face, upper lip and eyelids. Palpation is painless. What disease are these symptoms typical for?

A. Angioneurotic Quincke's edema

**B.** Macrocheilitis

C. Lymphedema

**D.** Melkersson-Rosenthal syndrome

**E.** Glandular cheilitis

**164.** A 25-year-old HIV-infected patient presented to a clinic of prosthetic dentistry seeking prosthetic services. What aseptic and antiseptic precautions should be taken?

**A.** According to the scheme

**B.** The impressions should be desinfected by means of a quartz lamp

**C.** The patient should be refused appointment

**D.** No special precautions are required

**E.** The orthopaedist should work in gloves and a mask

**165.** A 20-year-old patient got an injury. Objectively: the patient's chin and lower jaw up to the 34 and 45 teeth are missing. The 45, 46, 47, 48, 34, 35, 36, 37 teeth are stable. At what stage of medical evacuati-

on the patient will get special medical aid?

A. Specialized army surgical hospital

**B.** Battalion aid station

C. Regimental aid station

**D.** Separate medical detachment

**E.** Separate medical battalion

**166.** A 3-year-old child got an injury of the upper teeth as a result of a fall. Objectively: crowns of the 51 and 61 teeth are deep in the surrounding tissues with only their cutting edge visible, the gingival margin is hyperaemia, edematic. What is the treatment tactics?

A. Tooth extraction

**B.** Monitoring

C. Reposition

**D.** Endodontic treatment

**E.** Anti-inflammatory therapy

**167.** A 25-year-old patient complains of a light brown spot in the upper front tooth. Objectively: the 23 tooth has a single light brown spot in the precervical region. Probing shows smooth surface. The tooth is nonresponsive to cold and probing. What is the most likely diagnosis?

A. Chronic initial caries

**B.** Fluorosis

**C.** Local enamel hypoplasia

**D.** Acute initial caries

E. Chronic superficial caries

**168.** A 45-year-old patient complains of a rapidly growing formation on his lower lip. Examination of the red border of lips revealed a greyish-red nodule with a hollow in the centre which is filled with corneous masses that can be easily removed. The nodule is painless, mobile. What is your provisional diagnosis?

**A.** Keratoacanthoma

**B.** Papilloma

**C.** Nodulous verrucous precancer of vermilion border

**D.** Basal cell carcinoma

**E.** Circumscribed precancerous hyperkeratosis of vermilion border

**169.** A 35-year-old man complains about pain in the region of the 38 tooth, painful deglutition, difficult mouth opening. What anaesthesia method will be optimal during operation on account of pericoronaritis?

- **A.** Conduction Bersche-Dubov's anesthesia
- **B.** Infiltration anaesthesia
- C. General anaesthesia
- **D.** Stem anaesthesia
- **E.** Application anaesthesia
- 170. A 42-year-old patient complains about gingival pain, progressing gingival haemorrhage, increasing tooth mobility, halitosis. Objectively: gums are evidently hyperaemic, extremely edematic, they bleed easily on palpation. Tooth roots are exposed, parodontal pouches are 4-6 mm deep, and contain purulent exudate, there is also supragingival and subgingival dental calculus. II-III grade tooth mobility is present. Orthopantomogram shows resorption of interdental septa down to 1/2 of their height. What is the most likely diagnosis?
- **A.** Exacerbation of generalized II degree periodontitis
- **B.** Exacerbation of generalized I degree periodontitis
- **C.** Exacerbation of generalized III degree periodontitis
- **D.** Chronic generalized II degree periodontitis
- **E.** Chronic generalized III degree periodontitis
- 171. A female patient applied to the oral surgery department and underwent radical maxillary sinusotomy with plastic repair of fistula through the alveolar socket of the extrated 27 tooth. Infiltration and all the peripheral block anaesthesias of the left upper jaw were performed with 6,0 ml of 2% lidocaine solution. 3 minutes later the patient registered double vision in her left eye, inability to close it. Which of the performed anaesthesias is the reason for the above-mentioned presentations?
- **A.** Infraorbital
- **B.** Tuberal
- **C.** Palatinal
- **D.** Incisor
- E. Infiltration
- 172. A boy is 10 years old. His face is symmetric and proportional. He presents with mouth breath. Examination of the oral cavity revealed saddle-like shape of dental arches and high arched palate. Upper first molar relationship (Angle's key to occlusion) remains intact. What is the most likely diagnosis?

- A. Narrowing of dental arches
- **B.** Distal occlusion
- **C.** Mesial occlusion
- **D.** Widening of dental arches
- **E.** Elongation of dental arches
- 173. A 51-year-old lecturer presented to the orthopaedic department and complained about painfullness and mobility of his frontal teeth of the lower jaw. Cervices of the 42, 41, 31, 32 teeth are exposed, III grade mobility with deep pathological pockets is present. When would it be reasonable to fix dentures after dental extraction?
- **A.** On the day of dental extraction
- **B.** In 16-30 days
- C. In 2-3 months
- **D.** In 4-6 months
- **E.** In 5-6 days
- **174.** A 5-year-old child complains of spontaneous pain in an upper jaw tooth on the right that is getting worse at night and during eating cold food. Objectively: the 65 tooth has a deep cavity communicating with the tooth cavity. Probing is painful, percussion is painless. Cold water causes long-standing pain. What is your provisional diagnosis?
- A. Exacerbation of chronic pulpitis
- **B.** Acute periodontitis
- **C.** Exacerbation of chronic periodontitis
- **D.** Acute serous pulpitis
- **E.** Acute purulent pulpitis
- 175. A 30-year-old patient complains about body temperature rise up to  $39,0^{\circ}C$ , a roundish infiltrate on his upper lip, general weakness. He has been presenting with these symptoms for 3 days. Objectively: a roundish infiltrate in the region of the upper lip 2,5 cm in diameter, the skin over the infiltrate is red with a necrotic core in the centre. The upper lip is hyperemic and edematic. What is the most likely diagnosis?
- **A.** Furuncle of the upper lip
- **B.** Carbuncle of the upper lip
- **C.** Retention cyst of the upper lip
- **D.** Acute periostitis of the upper jaw
- **E.** Acute glandular abscess
- 176. A patient complains about paroxysmal upper jaw toothache on the left that is getting worse at night. Toothache intensifies also under stimulation and irradiates to the left eye and temple. Similar attacks were noted three months ago, the patient didn't undergo

any treatment. Objectively: the 25 tooth has a deep carious cavity communicating with the tooth cavity. Probing causes acute pain at the point of communication, vertical percussion is slightly painful, horizontal one is painless. Mucous membrane in the projection of root apex of the 25 tooth is unchanged, its palpation is painless. Thermal probe causes acute pain, the pain attack is longlasting. Electroodontodiagnosis is 60 microampere. X-ray picture shows a slight widening of periodontal fissure at the root apex of the 25 tooth. What is the most likely diagnosis?

**A.** Exacerbation of chronic pulpitis

**B.** Acute generalized pulpitis

**C.** Acute purulent pulpitis

**D.** Acute purulent periodontitis

**E.** Exacerbation of chronic periodontitis

**177.** A 48-year-old woman complains of aching dull pain in the region of the left TMJ, that is getting worse during eating solid food. The pain appeared about 2,5 years ago. Objectively: mouth opening is limited, there is sideward deviation of jaw during mouth opening, TMJ is clicking. Examination of the oral cavity revealed secondary partial adentia. X-ray picture shows sclerosis of the cortical plate of articulat head and narrowing of cartilage space. What is the most likely diagnosis?

**A.** Arthrosis of the TMJ

**B.** Chronic arthritis of the TMJ

**C.** Acute arthritis of the TMJ

**D.** Painful dysfunction of the TMJ

**E.** Exacerbation of chronic arthritis of the TMJ

**178.** An oral surgeon attended a 3day-old child staying in the newborn pathology department. Objectively: bilateral hypogenesis of zygomatic bones orbits, antimongoloid slant palpebral fissures, nonclosure of inferior eyelids, hypogenesis of mandible (bird face), deformity of auricles with a preauricular fistula on the right. What congenital disease does the child have?

**A.** Mandibulofacial dysostosis

**B.** Oculocerebrorenal syndrome

**C.** Oculoauriculovertebral dysplasia

**D.** Oculomandibulofacial syndrome

**E.** Oculodentodigital syndrome

**179.** A pregnant 24-year-old woman complains about emergence of several new carious cavities, falling out of old fillings. Objective examination revealed: index of decayed, missing and filled teeth (DMF) = 16, Feodorov-Volodkina hygiene index is 3,3. Choose the optimal material for carious cavity filling in this case:

**A.** Glass ionomer cement

**B.** Silver amalgam

**C.** Chemical-cure composite

**D.** Light-cure composite

**E.** Silicophosphate cement

**180.** A patient with a missile wound of face was delivered to the station of dental aid group that was organized by order of medical corps commander. What kind of aid can be rendered by the dental aid group?

**A.** Secondary care

**B.** Professional care

**C.** Consultancy

**D.** Dental health service

**E.** Dental orthopaedic service

**181.** A 62-year-old patient has a median fracture of mandible along with formation of a false joint. Objectively: dental formula is 33, 34, 35, 36, 27, 47, 46, 45, 44, 43. The teeth are intact, stable, with high crowns. Fragment mobility is insignificant, there is no displacement. X-ray picture shows a bone defect 0,8 cm large. What prosthesis is indicated?

**A.** Bridge-like prosthesis with a pivot point **B.** Lamellar prosthesis without a pivot

**C.** Lamellar prosthesis with Gavrilow's pivot point

**D.** Lamellar prosthesis with Oxman's pivot point **E.** Lamellar prosthesis with Weinstein's

pivot point

**182.** After supercooling a 42-year-old patient presented with headache in the left frontal region and left upper jaw. Objectively: the face is symmetric, breathing through the left nasal meatus is obstructed, seropurulent discharges are present. Palpation is slightly painful in the infraorbital region as well as along the mucogingival fold in projection of the 24, 25 teeth. Percussion of these teeth is painless. The 24 tooth is filled. Mucuous membrane of alveolar process has no visible changes. X-ray picture shows reduced pneumatization of the left upper jaw sinus. What is the provisional diagnosis?

- **A.** Exacerbation of chronic odontogenic maxillary sinusitis
- **B.** Acute periodontitis of the 24 tooth
- **C.** Exacerbation of chronic periodontitis of the 24 tooth
- **D.** Acute rhinogenous maxillitis
- **E.** Acute albuminous periostitis of the left upper jaw
- 183. An 8,5-year-old child is apparently healthy. The child complains of pain in an upper tooth on the left caused by a traumatic injury sustained three hours ago. Objectively: the crown part of the 21 tooth is destroyed by 1/2, the pulp is red and significantly exposed, probing causes acute pain and bleeding. Percussion of the 21 tooth is extremely painful. Choose the most efficient treatment method of the 21 tooth:
- **A.** Vital amputation
- **B.** Vital extirpation
- C. Devital amputation
- **D.** Devital extirpation
- E. Bioassay technique
- **184.** A 23-year-old patient complains of root exposition, gingival haemorrhage during tooth brushing, gum itch. Objectively: there is supragingival and subgingival dental calculus. Gums are hyperaemic, edematic, pockets are 3,5 mm deep. X-ray picture shows resorption of interalveolar septa by 1/3. What is the most likely diagnosis?
- **A.** Chronic generalized I degree periodontitis
- **B.** Chronic generalized II degree periodontitis
- **C.** Exacerbation of generalized I degree periodontitis
- **D.** Exacerbation of generalized II degree periodontitis
- **E.** II degree periodontitis
- **185.** A 14-year-old child complains about acute spontaneous pain in an upper jaw tooth on the right. The pain has been lasting for 3 days, it is throbbing, irradiating to the temple, getting worse at night. Objectively: surface of the 15 tooth exhibits a carious cavity within parapulpar dentine. Dentine is softened, of greyish colour. Probing of the whole cavity floor is painful, percussion of the 15 tooth is painless. What is the most likely diagnosis?

- **A.** Acute purulent pulpitis
- **B.** Acute diffuse pulpitis
- **C.** Acute focal pulpitis
- **D.** Acute periodontitis
- **E.** Exacerbation of chronic periodontitis
- **186.** A 9-year-old boy presents with face asymmetry due to the chin displacement to the left. When the third Il'ina-Marcosian diagnostic test is performed, face asymmetry disappears. What is the most likely clinical form of this occlusal abnormality?
- **A.** Habitual displacement of mandible
- **B.** Ankylosis of the temporomandibular joint
- **C.** Unilateral hypoplasia of mandible
- **D.** Bilateral narrowing of the maxillary dental arch
- **E.** Unilateral narrowing of the maxillary dental arch
- 187. A 65-year-old male patient complains of crepitation and clicking in both temporomandibular joints, pain induced by displacement of the lower jaw to the right, ear noise, dry mouth, glossalgia. He has been using complete removable prosthesis of the lower jaw for 6 months. The patient denies having rheumatosis. Objectively: the lower third of face is shortened, mental fold is strongly pronounced, mouth corners are lowered, there are angular fissures and cracks. Palpation reveals crepitatnt rale observed during TMJ moving. What is the most likely diagnosis?
- **A.** Costen's syndrome
- **B.** Temporomandibular arthritis
- C. Temporomandibular arthrosis
- **D.** Temporomandibular dislocation
- E. Temporomandibular osteoarthritis
- **188.** A 52-year-old patient complains of teeth mobility, gingival haemorrhage. The 44, 45, 34, 35 teeth exhibit I grade mobility, the 43, 42, 41, 31, 32, 33 teeth exhibit II grade mobility. There is gingival edema, peridontal pockets are 5-6 mm deep. X-ray picture shows destruction of bone tissue by 1/2 of root length. The patient has been diagnosed with generalized periodontitis of median severity. What orthopaedic construction is most efficient in this situation?

- A. Elbrecht splint
- **B.** Plastic mouthguard
- **C.** Murray's splint
- **D.** Mamlock splint
- **E.** Temporary Novotny splint
- **189.** It is planned to lance an abscess of hard palate (it is localized close to the 23, 24, 25 teeth) and to extract the causative 24 tooth that had caused abscess development. What type of anaesthesia is indicated for this operation?
- **A.** Infraorbital, palatinal and incisor
- **B.** Tuberal, infraorbital and incisor
- C. Tuberal, infraorbital and palatinal
- **D.** Tuberal and incisor
- **E.** Tuberal and palatinal
- **190.** A 23-year-old patient complains about unpleasant sensations in the region of the 12 tooth, X-ray picture shows a well-defined low-density area up to 8-10 mm in diameter around the root apex of the 12 tooth. What method of surgery will be the most efficient?
- A. Root apex resection
- **B.** Root amputation
- **C.** Hemisection
- **D.** Tooth removal
- **E.** Cystotomy
- 191. Examination of a 6-year-old boy revealed enlarged lymph nodes in both submandibular and cervical regions. Objectively: the 75, 84 and 85 teeth are decayed, there are presentations of commissural cheilitis. According to the boy's mother, he has been quickly getting tired, sweating from the least physical exercise, complaining about weakness throughout the last 2-3 months. He also gave up training in a sports class. What plan of additional examination should be adopted?
- **A.** Complete blood count, haematologist consultation
- **B.** Biochemical blood test, endocrinologist consultation
- **C.** Puncture biopsy, oncologist consultation **D.** Magnetic resonance tomography, immunologist consultation
- **E.** Pulmonary roentgenography, pulmonologist consultation
- **192.** A 12-year-old girl undergoes treatment at the maxillofacial department for nonodontogenic abscess of the left submandibular region. Postoperative wound in the stage of granulation and epithelialization. What medications speed up

these processes?

- **A.** Vishnevsky ointment, methyluracil ointment, solcoseryl gel
- **B.** Laevosin, luronitum, trypsin ointments
- **C.** Levomecol, laevosin ointments etc.
- **D.** Trypisin, chymotrypsin, terrilytin etc.
- **E.** 0,5-1% dioxydin solution, 0,1-0,2% chlorhexidine solution
- 193. While conducting experiments in chemistry lesson a 14 year-old child got a traumatic shock of face. Objectively: the skin dehydrated in the affected region. It is covered with thick dry crust with clear boundaries and peripheral hyperaemia, the crust is recessed into the skin. What is the most likely traumatic agent?
- A. Acid
- **B.** Alkaline
- C. Radiation
- **D.** Thermal
- E. Saline
- **194.** A 7-year-old child has to undergo plastic surgery of the upper lip frenulum. What operation should be performed to lengthen the frenulum of the upper lip?
- A. Dieffenbach grafting
- **B.** Thiersch grafting with local flaps
- **C.** Relaxing incisions of the mucosa
- **D.** Grafting with a pedicle flap
- **E.** Szymanowsky grafting with local flaps
- **195.** The 47, 46, 45, 35, 36, 37, 38 teeth of a 57-year-old patient are missing. It is planned to make a clasp denture. The 48 tooth inclines to the lingual side and forwards. On the lingual side of the 48 tooth the border line is diagonal, on the buccal side it runs on a level with gingival edge. What type of Ney's clasp should be applied?
- A. V type clasp
- **B.** I type clasp
- **C.** IV type clasp (reverse back-action)
- **D.** I-II type clasp
- E. II type clasp
- **196.** A patient complains about worsened fixation and frequent breakages of partial removable lamellar denture for the lower jaw that has been in use for 5 years. Objectively: alveolar part in edentulous regions is significantly atrophied, the denture balances. What is the most probable cause of worsened fixation and frequent breakages of the denture?

- **A.** Alveolar process atrophy
- **B.** Improper care of denture
- **C.** Denture using during sleep
- **D.** Consumption of solid food
- **E.** Wear of artificial teeth
- 197. A 15-year-old patient has got a trauma. He complains of mandibular pain getting worse during swallowing, chewing, especially mouth opening. Objectively: face configuration isabnormal, there is a large haematoma in the region of the right mandibular angle. Palpation of this region is painful. The mouth is half open, lower lip frenulum is shifted to the right of the central line. Pressing upon the chin causes pain in the part of mandible on the right. What is the provisional diagnosis?
- **A.** Fracture of mandibular angle on the right
- **B.** Bilateral fracture of mandibular branches
- **C.** Posterior unilateral dislocation of mandible
- **D.** Anterior unilateral dislocation of mandible
- **E.** Bilateral fracture of articular processes
- **198.** A 12-year-old boy has been injured. In the region of the 44 and 45 teeth there is pathological displacement of the alveolar process and the body of the mandible, rupture of the mucous membrane of the alveolar process. What additional tests should be done to specify the diagnosis?

- **A.** Radiography of mandible in the frontal and lateral projections
- **B.** Radiography of skull in axillary projection
- C. Radiography of skull in the frontal projection and of mandible in Parma projection
- **D.** Tomogram of mandible
- **E.** Radiography of skull in the axillary projection
- **199.** A 73-year-old patient consults a dental orthopaedist about total edentia. Objectively: there is insignificant regular atrophy of the alveolar process of mandible, the process is covered with mucous membrane of moderate elasticity. According to Keller's classification, such manifestations are characteristic for the following type of edentulous jaw:
- **A.** First
- B. Third
- C. Fifth
- **D.** Second
- E. Fourth
- **200.** Intraoral examination of a 5-year-old child revealed primary occlusion, tremas and diastemas, worn tubercles and cutting surfaces of teeth. The distal surfaces of the second lower molars are anterior to the distal surfaces of the second upper molars. This stage of primary occlusion is called:
- A. Aging
- **B.** Stable occlusion
- C. Formation
- D. Eruption
- **E.** There is no correct answer