

Sample Questions

Q1: Orthodontic uprighting of tilted teeth is an adjunctive orthodontic treatment indicated to manage:

- a. short clinical crown cases
- b. tilted abutment cases**
- c. extruded opposing tooth cases
- d. overerupted teeth cases

Q2: Physiologic movement of posterior teeth under vertically applied occlusal forces is in:

- a. distal direction
- b. mesial direction**
- c. lingual direction
- d. buccal direction

Q3: Patient presented with broken down tooth #35. Upon examination patient had very short clinical crown heights. Tooth #35 was endodontically treated and needs final restoration. To manage this case, the best treatment option is:

- a. extraction and implant treatment
- b. PFM crown cemented with zinc phosphate
- c. crown lengthening first to increase the crown height then PFM crown**
- d. three quarter crown

Q4: 35 years old patient presented with missing #36. Tooth was lost 10 years ago. Upon examination, the mesiodistal space was adequate for restoration but #26 was overerupted partially into the space of #36. The best treatment option for this case is:

- a. implant restoration or #36

- b. extraction of #26 and implant placement for #26 and #36
- c. extraction of #26 and FPD replacement of #26 and 36
- d. enameloplasty of #26 and implant replacement of #36 or FPD**

Q5: A patient presented to the clinic with missing #36. On examination, #37 is mesially tilted. Case was referred for orthodontic uprighting. During orthodontic treatment which of the following should be performed:

- a. only #35 should be banded
- b. third molar should be saved to provide enough anchorage
- c. occlusion should be checked and adjusted regularly on #37**
- d. removable appliance should be used

Q6: To manage severely tilted molar, which of the following is indicated:

- a. rigid connector should be used
- b. telescopic crown and coping should be used on the premolar abutment
- c. orthodontic extrusion should be performed
- d. a proximal half crown should be performed on the molar abutment**

Q7: In cases of pier abutment, rigid fixed partial denture is not indicated because:

- a. rigid partial denture can neutralize the effect of forces on retainers and abutments
- b. rigid fixed partial dentures can cause secondary caries because forces are concentrated on the terminal abutments which act as fulcrums
- c. rigid fixed partial dentures can cause secondary caries because forces are concentrated on the middle (pier) abutment which acts as fulcrum**
- d. rigid fixed partial denture can result in extrusion of pier abutment