

## قائمة الاسئلة 06:14 12-05-2025

## قويم الأسنان-الخامس-طب وجراحة الفم والاسنان- كلية طب وجراحة الفم والاسنان-درجة الامتحان(50)

. فؤاد المترب

- 1) Prolonged digit sucking can produce effects on
  - 1) Maxilla only
  - 2) Mandible only
  - 3) + Maxilla and mandible
  - 4) None of the above
- 2) Mouth breathing results in
  - 1) Mandibular prognathism
  - 2) Maxillary retrognathism
  - 3) + Bilateral buccal crossbites
  - 4) Anterior crossbite
- 3) The effects of bad oral habits depending on
  - 1) Number of times/ day habit is practiced
  - 2) Amount of time spent on habit
  - 3) Amount of force applied to the teeth during sucking
  - 4) + All of the above
- 4) Early loss of primary incisors was found to be associated with
  - 1) + Malposition of their permanent successors
  - 2) Vertical craniofacial growth
  - 3) Horizontal craniofacial growth
  - 4) All of the above
- 5) In skeletal deep bites the patient may exhibit gummy smile if there is
  - 1) Anti-clockwise rotation of maxilla
  - 2) + Clockwise rotation of maxilla
  - 3) Anti-clockwise rotation of mandible
  - 4) All of the above
- 6) Traumatic deep bite is usually seen in
  - 1) Class I malocclusion
  - 2) + Class II division 2 malocclusion
  - 3) Class III true malocclusion
  - 4) Class III pseudomalocclusion
- 7) A distance between maxilla and mandible when muscles are relaxed and with no contacts between dental arches
  - 1) Maximal intercuspation
  - 2) + Rest position
  - 3) Central occlusion
  - 4) Excess space
- 8) Which radiographic method is most commonly used to localize impacted canines
  - 1) Periapical radiograph
  - 2) Bitewing radiograph
  - 3) Panoramic radiograph
  - 4) + Cone Beam Computed Tomography (CBCT)
- 9) The main treatment aspect in class II division 2 malocclusion is
  - 1) Correction of incisal relationship
  - 2) Relief of crowding and local irregularities
  - 3) Correction of buccal segment relationship



- 4) + All of the above
- 10) The leeway space is more in
  - 1) Maxilla than in mandible
  - 2) + Mandible than in maxilla
  - 3) Upper arch than in lower arch
  - 4) None of the above
- 11) Extraoral forces using headgear in treatment of class II division 1 is most effective in
  - 1) Correction of mandibular prognathism
  - 2) Restriction of maxillary retrognathism
  - 3) + Correction of maxillary prognathism
  - 4) Combination of the above
- 12) The most common reason for anterior open bite in a child in late mixed dentition or early permanent dentition is
  - 1) Lip insufficiency
  - 2) Lip sucking
  - 3) + prolonged thumb sucking.
  - 4) None of the above
- 13) What is not characteristic of the Angle's Class II/2 relationship?
  - 1) Deep bite
  - 2) + All upper incisors are proclined
  - 3) Distal bite
  - 4) Upper incisors are retroclined
- 14) Forward movement of mandible during jaw closure thus it is called
  - 1) + Pseudo class III malocclusion
  - 2) True class III malocclusion
  - 3) Skeletal Class III malocclusion
  - 4) Dental Class II malocclusion
- 15) What causes a secondary crowding
  - 1) Abnormal swallowing
  - 2) Application of a not suitable orthodontic appliance
  - 3) The infraocclusion of the first molars
  - 4) + The early loss of the deciduous teeth during mechanism of second dentition
- 16) If teeth are crowded, arch alignment can be achieved by
  - 1) Enlargement of the arch form
  - 2) Reduction in tooth size
  - 3) Reduction in tooth number
  - 4) + All of the above
- 17) Treatment of Class III malocclusion mainly depends on
  - 1) Adequate knowledge of normal growth pattern
  - 2) Cephalometric analysis
  - 3) Treatment planning
  - 4) + All of the above
- 18) Characteristics of the skeletal open bite malocclusion
  - 1) No vertical maxillary excess.
  - 2) + Increased lower anterior facial height.
  - 3) Normal craniofacial pattern.
  - 4) All of the above
- 19) What is the primary goal of serial extraction in orthodontics
  - 1) Improve posterior occlusion

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- 2) Reduce the duration of fixed appliance treatment
- 3) + Alleviate dental crowding at an early stage
- 4) Enhance maxillary growth
- 20) Orthodontic camouflage treatment in skeletal Class II division 1 means
  - 1) Growth modification by functional appliance
  - 2) Orthognathic surgery
  - 3) + only orthodontics Treatment
  - 4) combination orthodontic, surgical
- 21) A Class I malocclusion is normally associated with
  - 1) Sleeping habits
  - 2) Growth discrepancy
  - 3) + Tooth size jaw size discrepancy
  - 4) Trauma.
- 22) Increased SNB angle indicates
  - 1) Mandibular retrognathism
  - 2) + Mandibular prognathism
  - 3) Maxillary prognathism
  - 4) Alle of the above
- 23) Asymmetric anterior open bite with normal posterior occlusion is characteristic of .
  - 1) + finger sucking
  - 2) mouth breathing
  - 3) abnormal swallowing.
  - 4) sleep apnea
- 24) Facial convexity evaluate the relationship between the
  - 1) + forehead, maxilla, and mandible
  - 2) inclination of the lower face relativ to forehead
  - 3) Lib posture and prominence
  - 4) lips to the incisors
- 25) Orthopedic appliances used to treat class III malocclusion in adults are
  - 1) Chin-cup appliance
  - 2) Anterior face mask with RME
  - 3) High pull headgear
  - 4) + None of the above
- 26) For which of the following malocclusions is serial extraction most appropriate?
  - 1) + Angle Class I
  - 2) Angle Class II
  - 3) Angle Class III
  - 4) All of the above
- 27) Which diagnostic tool is essential before initiating serial extraction
  - 1) CBCT
  - 2) Lateral cephalogram
  - 3) + Panoramic radiograph and space analysis
  - 4) Bitewing radiographs
- 28) If there is bilateral constriction of maxilla
  - 1) Proclination of upper jaw is indicated
  - 2) Proclination of lower jaw is indicated
  - 3) + Expansion of upper arch is indicated
  - 4) All of the above
- 29) Management of thumb sucking habit includes



- 1) A. Psychologic approach-behaviour modification
- 2) B. Reminder therapy
- 3) C. Appliance therapy
- 4) + D. All of the above
- 30) What does not occur in Angle's Class II/1 anomaly
  - 1) Tipping of the upper incisors labially
  - 2) The anteroposition of the maxilla
  - 3) + The anteroposition of the mandible
  - 4) Increased overjet
- 31) Extraction of which tooth may help prevent impaction of the maxillary canine
  - 1) Maxillary central incisor
  - 2) Maxillary lateral incisor
  - 3) + Primary canine
  - 4) First premolar
- 32) Clinical characteristics of the anterior functional cross-bite
  - 1) In CR & CO Class III molar relationship
  - 2) + In CR Class I molar relationship & CO Class III molar relationship
  - 3) In CR straight or concave profile
  - 4) None of the above
- 33) What is characteristic of of True class III
  - 1) Concave profile
  - 2) Acute nasolabial angle
  - 3) Prominent chin
  - 4) + All of the above
- 34) Vertical facial growth increases the tendency to
  - 1) deep bite
  - 2) cross bite
  - 3) + open bite
  - 4) None of the above
- 35) Spacing is a condition where there is malalignment of teeth caused by
  - 1) + Space available > Space required
  - 2) Space required > Space available
  - 3) Space required = Space available
  - 4) All of the above
- 36) Slow maxillary expansion is done by-
  - 1) + Coffin spring
  - 2) Double cantilever spring
  - 3) T spring
  - 4) None of them
- 37) In class III skeletal pattern
  - 1) Angle SNA is more than angle SNB
  - 2) + Angle SNA is less than angle SNB
  - 3) Angle SNA is forward than angle SNB
  - 4) None of them
- 38) Skeletal expansion means
  - 1) Dento alveolar expansion
  - 2) + Splitting of mid palatal suture
  - 3) Only dental expansion
  - 4) All of the above



- Anterior dental crossbite can be best treated by
  - 1) Tongue blades
  - 2) Catlan's appliance
  - 3) 'Z' spring with posterior bite plane
  - 4) + Any of the above
- 40) Rapid maxillary expansion (RME) appliances are classical examples for
  - 1) + Orthopedic Expansion
  - 2) Orthodontic Expansion
  - 3) Passive Expansion
  - 4) All of the above
- 41) Branches of orthodontics are
  - 1) Preventive orthodontics
  - 2) Interceptive orthodontics
  - 3) Corrective orthodontics
  - 4) + All of the above
- 42) Preventive orthodontics is undertaken
  - 1) + Before development of a malocclusion
  - 2) After the malocclusion has already manifested
  - 3) After the eruption of 3rd molars
  - 4) All of the above
- 43) Midline shift present in both centric and rest position indicates
  - 1) + True skeletal cross bite
  - 2) True skeletal deep bite
  - 3) True skeletal open bite
  - 4) Pseudo class III malocclusion
- 44) What is the most common location for an impacted maxillary canine
  - 1) Buccal to the dental arch
  - 2) Lingual to the dental arch
  - 3) + Palatal to the dental arch
  - 4) Within the nasal cavity
- 45) Loss of any correction achieved by orthodontic treatment is reffered to as
  - 1) Retention
  - 2) + Relapse
  - 3) Orthodontic correction
  - 4) Orthodontic migration
- 46) True skeletal cross bite malocclusion occurs in which plane:
  - 1) + Transverse plane
  - 2) Sagittal plane
  - 3) Vertical plane
  - 4) None of the above
- 47) Space can be obtained
  - 1) A. By only 1 method
  - 2) + B. By many methods
  - 3) C. Only by extractions
  - 4) D. None of the above
- 48) What is the most likely cause of maxillary canine impaction
  - 1) Premature loss of primary molars
  - 2) Supernumerary teeth
  - 3) + Crowding or ectopic eruption path



- 4) Poor oral hygiene
- 49) Which clinical sign may indicate a palatally impacted canine
  - 1) Bulging of the buccal cortex
  - 2) Early eruption of lateral incisors
  - 3) + Absence of a canine bulge in the buccal sulcus after age 10
  - 4) Midline diastema
- 50) The presence of a gummy smile can be evidence of
  - 1) + Excess vertical growth of the face
  - 2) Normal upper lip length
  - 3) Periodontal disease
  - 4) None of the above