

## قائمة الاسئلة 2025-05-17 قائمة الاسئلة 2025-05

## دوات بحث في تقويم الأسنان 2 المستوى الثاني- ماجستير تقويم الأسنان السريري

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- 1) What is a compensating extraction in the context of First Permanent Molar Extraction management?
  - 1) Extraction of the contralateral second Permanent Molar
  - 2) + Extraction of the opposing First Permanent Molar
  - 3) Extraction of the adjacent second molar
- 2) Compensating extraction is adopted to prevent supra eruption of the tooth opposing first permanent molar with bad prognosis
  - 1) + True.
  - 2) False.
- 3) Early extraction of the first permanent molar would eventually lead to
  - 1) + spontaneous space closure
  - 2) the need for a space maintainer
  - 3) orthodontic space closure
- 4) The most desirable time for extraction of the first permanent molar in the maxilla is:
  - 1) After the eruption of the second permanent molar
  - 2) Between 12 and 14 years of age
  - 3) + when the second permanent molar is still developing and furcation development starts
  - 4) Before the eruption of the second permanent molar and before the crown is superior to the cementoenamel junction of the first permanent molar
- 5) Which of the following is considered a favorable factor for spontaneous space closure, especially in the mandible?
  - 1) + Presence of a third molar
  - 2) Distal angulation of the second permanent molar
  - 3) Vertical eruption path of the second permanent molar
- 6) According to the article, what angulation of the second permanent molar is advantageous for spontaneous space closure after the extraction of first permanent molar?
  - 1) Distal angulation
  - 2) + Mesial angulation
  - 3) vertical angulation
- 7) What did Teo et al. recommend regarding the timing of first permanent molar extraction
  - 1) Extract as early as possible
  - 2) Extract between ages 8-10
  - 3) + Postpone extraction until all three favorable conditions are met
- 8) What are the adverse effects of anterior deep bite?
  - 1) periodontal health issues
  - 2) TMJ problems
  - 3) esthetic concerns
  - 4) + All are correct
- 9) conventional incisor intrusion techniques lead to undesirable outcomes that include:
  - 1) + Posterior tooth extrusion or anterior proclination
  - 2) Only posterior tooth intrusion
  - 3) Anterior retroclination
- 10) Miniscrews (MS) are a choice of intrusion that leads to less intrusion because
  - 1) + the force is applied closer to the center of resistance
  - 2) the forces applied are continous
  - 3) the shorter treatment duration



- 11) miniscrews used for intrusion are usually placed
  - 1) Between central and lateral incisors
  - 2) between canines and lateral incisors
  - 3) + both are correct
- 12) What factors increase the risk of miniscrew failure?
  - 1) + Inadequate inter-radicular bone
  - 2) excessive force application
  - 3) longer treatment time
- 13) Proximity to periodontal ligaments is a cause of miniscrew failure.
  - 1) + True.
  - 2) False.
- 14) Root resorption is a risk associated with incisor intrusion
  - 1) + True.
  - 2) False.
- 15) periodontally compromised patients often experience aesthetic and functional problems that include
  - 1) tooth elongation
  - 2) tilting and flaring of teeth
  - 3) diastema
  - 4) + All are correct
- orthodontic treatment of reduced but healthy periodontal tissue may lead to bone and attachment loss
  - 1) True.
  - 2) + False.
- 17) Controlling periodontal inflammation is vital before starting orthodontic tooth movement.
  - 1) + True.
  - 2) False.
- 18) Which orthodontic tooth movement may improve periodontal intrabony defects?
  - 1) Intrusion
  - 2) Rotation
  - 3) + Extrusion or tilting
- 19) During tooth movemenet, guided tissue regeneration helps
  - 1) block epithelial tissue downgrowth
  - 2) promote bone growth
  - 3) regenerate periodontal ligament
  - 4) + All are correct
- What are the recommendations of recent studies on the timing of orthodontic treatment in relation to periodontal surgery?
  - 1) Delay orthodontic treatment for 1 year after periodontal surgery
  - 2) + Start orthodontic treatment soon after periodontal surgery
  - 3) The timing has no impact on treatment outcomes
- 21) Class III malocclusion relatively more common
  - 1) Europeans
  - 2) Africans
  - 3) + Asians
- 22) Tooth movement in Class III malocclusion patients is limited by morphology of the alveolar bone
  - 1) + True.
  - 2) False.
- 23) Tooth movement beyond the limits of the alveolar bone cause
  - 1) Temporomandibular disorders
  - 2) Increased overbite



- 3) + Root resorption, gingival recession, dehiscence, and fenestration
- Orthodontically induced white spot lesions opaque white areas of enamel demineralization that may appear along the shape of the bracket base
  - 1) + True.
  - 2) False.
- 25) after bracket removal, minor white spot lesions can re-mineralize
  - 1) + True
  - 2) False.