

OCTOBER 1<sup>ST</sup>, 2020 – DAY 1



**"You just gotta keep  
going and fighting  
for everything, and  
one day you'll get to  
where you want."**

**-Naomi Osaka**

1. Most congenitally missing teeth: primary max lateral, max centrals, permanent mand 1<sup>st</sup>, permanent mand 2<sup>nd</sup>
2. Which of the following drugs would not cause xerostomia? Pilocarpine
3. Pathology question about a boy who had biopsy and it turned to be neuroma – multiple endocrine neoplasia (MEN)
4. How is articaine metabolized? Plasma cholinesterase
5. Patient is having an asthma attack, what position should you place him in? Upright
6. Patient has a posterior crossbite where the upper molar is too lingual, where should the bands go? Lingual of upper and buccal of lower
7. Instrument is separated 1 mm out of apex, after informing patient, what should you do now? Apicoectomy, fill to separated instrument, put CaOH and monitor for a few months, or reverse fill
8. What percentage of electrons forms x-rays? 1, 50, 75, 99
9. What mandibular permanent teeth most likely has 2 canals? Lateral incisors, canines, 1<sup>st</sup> premolar, 2<sup>nd</sup> premolar
10. What gland causes hair thinning? Thyroid, adrenal, parathyroid
11. Case question about how a 14-y/o girl got done with ortho and hates her teeth. She really wants veneers, asks how you would approach – discuss with mom and patient how irreversible veneers are, discuss with patient only about how irreversible veneers are
12. What is the main reason anterior composites are replaced? Discoloration
13. Not an advantage of direct and indirect veneers – easy to repair, esthetics, conservation of tooth structure
14. How long should you wait after bleaching to place a composite for bond strength? 8 hours, 24 hours, 2 days, 7 days
15. When should you start giving fluoride? At birth, 6 months, 3 years
16. What is true about amalgam and marginal leakage? Decreases with time
17. Vasoconstriction in lidocaine acts on what receptors? A1, A2, B1, B2, B3
18. How does penicillin and tetracycline work, tetracycline... increases metabolism of penicillin?
19. 12-y/o boy with a class 3, what DECREASES with age? SNA, SNB, ANB
20. X-ray of amelogenesis imperfecta – open contacts + no enamel
21. X-ray of dentinogenesis imperfecta – obliterated pulps
22. X-ray of taurodontism
23. X-ray showing impacted #17 resorbing #18, what is the cause of this? Dentigerous cyst, radicular cyst
24. Which of the following has a high probability of recurring after simple enucleation? Dentigerous cyst, OKC
25. What is true about infected dentin and affected dentin – infected dentin has bacteria, infected dentin is closest to pulp (inner most layer), only affected dentin should be removed during cavity preparation

26. Self-etch vs. etch & rinse system – self-etch leaves the smear layer, both systems remove the smear layer
27. Patient is an alcoholic, which test result would you want to obtain? INR
28. Which of the following is true about cherubism? Bilateral enlarged jaw
29. Photo of a skull and it asked what disease is associated with it? Paget's disease
30. Cytology is best for what? Candidiasis
31. Swelling that overlies an extraction wound and cracks on palpating? Ecchymosis, cellulitis
32. Which is most likely to get a root amputation? Max 1, max 2, mand 1, mand 2
33. Weird question about root sensitivity, which of the following is LEAST likely to be effective? Reinforced OHI, iontophoresis?
34. What aspect of the tooth is most likely to become perforated on maxillary incisors? Mesial, distal, lingual, buccal
35. All of the following drugs have ion movement as their MOA except which one? Propanolol, hydrothiazide, lidocaine, nefidipine, digoxin
36. What surface does not exist in a class V preparation? Axial, pupal, occlusal, distal
37. Patient has a root horizontal fracture with class 3 mobility. He also has swelling and 102-degree fever, what's the treatment? (RCT contraindicated + no EXT as option) splint and immobilize or antibiotics and reappoint
38. Upper palate does NOT have supplies from? PSA, Facial artery, lingual artery
39. Congenitally missing teeth not seen in – hyperparathyroidism, low birth weight, Downs syndrome, ectodermal hypoplasia
40. NUG and chronic periodontal patients have what in common? Rapid progression of disease, reaction of local factors, antibiotics
41. Dentist suspects a patient to have hemangioma in mandible, what is true? Occlusal radiographs are the gold standard for hemangioma, radiographs taken after dye is given will tell if there's veins?
42. Amelogenesis imperfecta occurs during which stage of development? Apposition, calcification, initiation
43. What is a pain neurotransmitter? Serotonin, dopamine, epinephrine, acetylcholine
44. Patient exhibits retrognathic mandible and cleft palate, what condition? Pierre Robin, Treacher Collins
45. How are materials recommended by dentist? In vitro studies, clinical trials
46. Beading for the major connector is used for what?
47. What inhibits polymerization in resin? Zinc oxide, eugenol (NO ZINC OXIDE EUGENOL AS AN OPTION ☺)
48. What is the MOA? Decrease GABA or increase GABA
49. Future indicator of caries? Socioeconomic status, fluoride exposure, past caries, patient education
50. Patients on antihypertensives have poor compliance due to what? CNS stimulation, liver dysfunction, baldness, night blindness, sexual dysfunction
51. Porcelain on a metal crown exhibits the most strength during which force? Flexural, tensile, compressive, shear (could be compressive)

52. Which is the LEAST helpful in determining periradicular prognosis to pulpal pathosis? Lingering to thermal conduct, pain on percussion, **pain on palpation**, periradicular pathology
53. What can cause LEAKAGE to rubber dam? Holes too far, holes too close, **holes too large**, holes too small
54. If you have an alveolar fracture during EXT, what should you do? Mobilize parts (idk)
55. What cement is the most insoluble? Resin, **GI**, ZOE
56. You just cemented a metal onlay 1 hour ago, patient complains that he feels a shooting shock, what is it from? Hyperocclusion, **Galvanic shock**
57. Fordyce granules can be best described as what? Sweat glands, **sebaceous glands**
58. Pockets are reduced most when tissue is -- **edematous** (asked twice, different wording)
59. Patient had flabby tissue and you need to take an impression – passive fit
60. Red lesion on the tongue (center) and patient stated that he also had it present on his hard palate, what is the diagnosis? Kaposi sarcoma, **candidiasis**, gonorrhea, syphilis
61. When should you biopsy? **After 10-14 days and it does not disappear**
62. What is most concentrated in crevicular fluid? **Tetracyclines**
63. What factor is the most important? **Value**
64. Localized aggressive periodontitis is associated with? **Vertical bone loss in first molars**
65. Sealants are attached how? Deep occlusal pits by sealants
66. What gives the tooth most of its color? Enamel, **dentin**, cementum, pulp
67. Trigeminal neuralgia is associated with what? **Trigger points**
68. What is true about cleidocranial dysplasia? **Retained primary teeth**
69. What is not associated with a cleft palate? **Micrognathia**
70. What is the antibiotic of choice for odontogenic infections? **Penicillin**
71. How should you treat internal resorption? **NSRCT**
72. What is the pH that causes demineralization? **5.5**
73. What affects pKa? **Onset**
74. When can an adult child make decision for their elderly parent? **When they have health power of attorney**, when patient does not feel like making decisions
75. What bacteria is found in deep periodontal pockets? **Facultative anaerobes**, facultative aerobes, gram positive bacteria
76. What does the apex locator not tell you? Decreases WL x-rays, length of root, **root perforations**
77. What pocket responds best to scaling and root planning? 3-4, **4-6**, 7-9
78. What children have the most F in DMFT? Blacks, **whites**, Hispanics
79. Which fluoride is known to stain teeth? **Stannous fluoride**
80. What property of diphenhydramine causes xerostomia? **Antihistamine**
81. Which of the following is not helpful in differentiating a maxillary retrognathic and mandibular prognathic in class 3 patient? Photos, **mounted cast**, cephalometric, exam
82. What is the first symptom of x-ray overdose? **Erythema**
83. Patient had a 2-y/o MOD amalgam that hurts when he eats bread. What is the cause? **Vertical root fracture**
84. Patient is on IV bisphosphonates. What can you do? EXT, **endo with coronectomy + sealant**, hyperbaric oxygen + EXT

85. Most likely reason for sensitivity after class V was placed? **Exposed dentin**
86. Definition of parulis – sinus tract
87. Which of the following is true about etchant? Removes inorganic structure, **removes the moisture out of the teeth**
88. Patient bruxes, which material would be the best for posterior restoration? **Amalgam**, microfilled resin, macrofilled resin
89. Which lingual groove has been known to cause perio problems? **Maxillary laterals**, canines, premolars, molars
90. Which would cause the least periodontal problems? Ill-fitting margins, rough proximal areas, damage to gingiva
91. Which can result from inadequate drain from periodontal abscess? **Abscess formation**
92. Root caries is detected by? Sensitivity to sweets, sensitivity to cold, **softness**
93. Why would you use a stent after tori removal? **Not sure, I said to prevent damage of soft tissue?**
94. When is a pedicle flap contraindicated? Insufficient donor tissue
95. How does a graft receive nutrients? Diffusion from below connective tissue
96. Patient had 3 mandibular incisors, one of which has 2 pulp chambers. What is the condition? **Fusion**, gemination
97. Contraindication for GTR? Class III furcations
98. Best prognosis for GTR? Class II furcations
99. What is not true about furcations? Wide set roots have better prognosis, **non-surgical scaling and root planning fixes most furcations**, definition of root amputation
100. Which of the following soothes the pulp? Zinc oxide eugenol
101. When is CaOH contraindicated? **In a mechanical exposure**, in a carious exposure that a tooth has been painful for a while, other two options had to do with carious exposure as well. Not sure about this one
102. Which of the following would need a gingivoplasty? Erosive lichen planus?
103. Plaster index is used for what? **Preserving the face-bow record**
104. What is the East/west Cryer used for? **Mandibular roots**
105. 'Flecks' of radiopacity seen in a 10-y/o girl near her maxillary canine – **AOT**
106. If you have a short clinical crown, which is the best feature? **Proximal grooves for resistance**, convergent F/L walls
107. What will not form after NSRCT? **Reparative dentin**
108. Implants should be placed – **2-3 mm apical to adjacent CEJ**
109. Panoramic showing ptergomaxillary fissure
110. Panoramic showing calcification of stylohyoid ligament, what is the condition? **Eagle syndrome**
111. Photo of a tongue that's pedunculated, which is the most likely diagnosis? **Papilloma**
112. Patient wears dentures and has red spots on his palate – **papillary hyperplasia**
113. According to CDC, what is the prevalence of periodontal disease? **45-55%**, 55-60%
114. What causes Turner's tooth? **Trauma and infection**
115. What muscle is pierced by IAN? **Buccinator**

116. Definition of pterygomandibular raphe – buccinator and superior constrictor muscle (asked twice)
117. Goal of periodontal maintenance – prevent recurrent disease, check on initial treatment
118. How far should you stand from patient? 1-2 ft, 3-6 ft, 7-10
119. Patient does not want to quit smoking, how should you respond? Something about bringing it up again at the future appointment
120. Who do you report drug problems with? FDA
121. 2-y/o child with caries, you would expect? Same amount of caries occlusal/interproximal, more caries interproximally, more caries occlusal,
122. Osteoradionecrosis is dependent on – dose of radiation
123. Controlled diabetics have the same perio as non-diabetics (less than, more)
124. Which of the following has the best prognosis? Adenoid carcinoma of palate, SCC of lower lip, melanoma of gingiva
125. Necrotic pulp, what can you do? Pulpectomy or NSRCT, Pulpotomy + pulpectomy + NSRCT
126. What section do they describe patient population? Materials and methods
127. What anti-viral drug is incorrect paired? Zidovudine with VZV
128. When designing a study, what's the most important part? Making sure participants are at no risk, having participants sign informed consent
129. Starting a treatment and not completing it on time without informing patient is – dentist's negligence
130. Where in the mouth would keratosis be considered a dysplasia? Floor of mouth, lateral border of tongue
131. During an extraction, the crown fractured off. What should you do? Achieve hemostasis and visualize
132. What allows for mandibular molars to grow? Resorption of anterior border of ramus
133. Which is the least helpful in a patient with low health literacy? Ask yes/no questions, offer additional education materials, highlight the important questions on consent sheets
134. Patient had a root canal on #19. Two years later, a PARL formed but is asymptomatic. What should you do? Initiate re-treatment, re-treat only if it becomes symptomatic
135. Which is not associated with shock? Bradycardia, diaphoresis, confusion, irritability
136. What should you give a diabetic that is unconscious? Oral glucose, IV insulin, IV dextrose
137. A patient is former drug addict. Which of the following should you avoid giving a patient if you are going to do IV sedation? Ketamine, fentanyl, propofol, midazolam... not sure, chose ketamine?
138. Patient had a motor accident 2 years ago. There is a PARL associated with lower anterior teeth. What should you do next? Pulp test all bottom teeth and only initiate RCT to the ones that are un-responsive, don't worry about it b/c it's cementoblastoma

139. Infection from the tip of the tongue drains where? Sublingual, **submental**, submandibular space
140. When should you wear utility gloves? **When cleaning instruments**, when taking instruments from the sterilizer
141. What are rectangular ortho wires used for? **Crown to root something**, did not have the option of final stages of treatment
142. Which patient would have the most severe dental issues? Anorexia, **bullemic**
143. HMO question – **I put capitation but it could be reasonable and customary fees**
144. What is related to congestive heart failure? Orthopnea
145. What is the best for moderate acute pain? **Acetaminophen + ibuprofen**, acetaminophen + codeine, acetaminophen + oxycodone, ibuprofen + hydrocodone
146. Best place for implants? **Anterior mandible**
147. Sinus tract is associated with – Chronic abscess
148. Case of a 5-y/o kid with caries on #A. Gives x-ray that shows deep caries but on the side, it says there is a fistula associated with buccal of #A. What is the treatment? **EXT & space maintainer**, pulpotomy + SS crown, pulpectomy + SS crown
149. Feeding tube will do what? **Decreases caries**
150. Which of the following drugs has to do with folic acid? **Methotrexate**
151. Opaque incisal edge of anterior crown – **insufficient tooth reduction**
152. Teen came in with bleeding gums and bruising – **leukemia**
153. Reversal for midazolam – **flumazenil**
154. Max amount of nitrous for kids – **50%**
155. Question about neuropaxia – **I put something about total loss, but it's wrong**
156. Which of the following is illegal for a dentist? **Prescribing class 2 for back pain**, having consensual relations with a patient
157. A patient has a swelling near upper lip, painless, what is the likely diagnosis? **Nasolabial cyst**
158. Sialoliths are most commonly found – Wharton's duct
159. Patient complaints of headache whenever he turns to his side, what is his diagnosis? **Maxillary sinusitis**
160. Something about external cervical internal resorption (yeah, I had to keep re-reading that) with pulpal involvement. Which of the following x-rays would help determining the extent? Occlusal, mesial-angulated, **CBCT**
161. Hypodontia would affect what? **Midface**, maxilla, mandible
162. Which INR would be okay to proceed with treatment? **2.5**, 3.5, 4.5
163. Which of the following explains why you should brush your tongue? **Reduce mouth odors**
164. Which of the following about diabetics is false? They are more prone to infections, they are more prone to prolonged bleeding, they are more prone to acute hypoglycemia, **they are more prone to large veins and small vein disorder?**
165. What should diabetics take before dental appointment? **Clear liquids + normal insulin dose**, clear liquids + half insulin dose, no insulin
166. A patient that just swallowed his dental crown will first exhibit which of the following except? Cyanosis, difficulty speaking, **slow pulse**, coughing

167. A patient became unconscious in your chair and nitroglycerin was administered. After 1 minute, the patient is still not conscious. What should you do? Wait b/c consciousness can take up to 30 minutes, **patient may not be experiencing syncope so check for hypoglycemia signs**
168. What muscle experiences spasms in non-working interference? **Lateral pterygoid**, medial pterygoid
169. You administer a mandibular block and the tongue starts to feel tingly, but the lip does not. What should you do next? Long buccal, mental nerve block, **another IAN block**
170. What is an effect of codeine? **Potentiates CNS depression**, enhances cough reflex, diarrhea, binds to kappa receptor
171. All of the following are placebo effects except – **potential addiction**
172. What is a side effect of acetaminophen – **liver hepatotoxicity**
173. Preload of implant is comparable to what force? Tensile, **compressive**
174. What is the purpose of primary intention? **Esthetics**, prevent granulation tissue from forming
175. 45-year old patient who has maxillary deficiency. What is the treatment of choice? Quad-helix, rapid palatal expander, **surgical repositioning of maxilla**
176. What is NOT from occlusal trauma? **Initial periodontitis**
177. Which element results in delayed hypersensitivity? Chromium, Cobalt, **Nickel**
178. Which of the following does not cause inflammatory processes? CRP, IL-6,
179. Referred pain in the ear is from – **ipsilateral mand molars**, ipsilateral max molars, contralateral mand molars, contralateral max molars
180. Which has the best prognosis for root amputation? **Divergent roots with furcation coronal**, divergent roots with furcation middle 1/3, convergent roots with furcation coronal, convergent roots with furcation middle 1/3
181. Advantage of a non-rigid splint? **For angled path of insertion**
182. What is not true of S. mutans? Can live on plaque, **can live on a denture tooth**, has to live on a non-shedding surface, can live in a child with no teeth
183. What disease has melanotic pigmentation? **Addison's disease**
184. Primary tooth that is intruded 6 mm, what should you do? **Ortho** (<3 mm → re-erupt, up to 6 mm → ortho, 7 mm → surgery)
185. Indication for apexification – **open apex and non-vital pulp**
186. What's a long-lasting anesthetic? **Bupivacaine** (asked twice)
187. Worst impression material for final prosthesis – irreversible hydrocolloid
188. Something about the eyes not being in the right axes – **strabismus**, exophthalmos, enophthalmos
189. What is true about periodontal maintenance interval – should change if patient's condition changes, **increasing perio maintenance intervals may be necessary if it will help with patient compliance**, increasing perio maintenance intervals has no effect on patient compliance
190. In the past 15 years, what has been increasing? Smooth surface, **root caries**
191. Tongue blade therapy is used for correction of what? **Skeletal anterior**, dental posterior, single tooth anterior, single tooth posterior



192. Pterygomandibular raphe – superior constriction and buccinator (asked twice)
193. Case of a child with has ADHD. Child presents with bruising and trauma to teeth. Question asked what is your LEGAL responsibility as a dentist? Asked the child how he got the bruises, ask the mom how he got the bruises, quietly ask your assistant to call CPS (child protective services), or **report to CPS what you saw**
194. Stupid question about what is the ethics principle in which dentists must ABIDE by ethics and professionalism? (I was super confused with this question) – veracity, **justice**, non-maleficence, beneficence, autonomy
195. Who publishes the MSDS? OSHA (manufacture not an option)
196. Most important in RPDs – support and rigidity
197. Which of the following would affect the bonding of resin? **Presence of sclerotic dentin**
198. What is an advantage of RMGI? **Ionic bond between enamel and dentin**
199. How is hyperbaric oxygen done? **Angiogenesis**, glycolysis,
200. What is not associated with bilateral swelling? Mumps, HIV infection, **sialolithiasis**
201. Type II hypersensitivity is an example of what? **Rh antigen in babies** (not sure about this one, but there were really weird options)
202. Rubella enteropathy is an example of what? **Acquired**, genetic, chromosomal (can't remember the exact question)
203. Dentist codes for two separate fillings, but insurance changes it to only one composite – **downcoding**
204. There's a universal code for a procedure, but dentist tries to separate the codes – downcoding, upcoding, bundling, **unbundling**
205. Graft from a different species – **xenograft**