

# **BDS FINAL PROFESSIONAL EXAMINATION 2007**

## **Prosthodontics (MCQs)**

### **Model Paper**

#### **SECTION I**

#### **COMPLETE DENTURES**

##### **ANATOMICAL LANDMARKS**

1. **There are many landmarks in the oral cavity which helps in designing complete dentures. One of the important landmarks is fovea palatini. What is its relation to the vibrating line:**
- Behind the vibrating line
  - In front of vibrating line
  - On the vibrating line
  - Has no relation to vibrating line
  - sometimes this landmark does not exists

**Key: b**

2. **A patient presents for provision of complete dentures. Examination reveals an unfavorable ridge slope. What is the most likely reason:**
- He is a recent extraction case
  - He has been edentulous for a long time
  - He has had posterior teeth removed much before the anterior teeth
  - Unfavourable ridges are never seen
  - Submerged tooth may be present

**Key: a**

3. **The lower denture bearing area has different compressibility. Which in your opinion is the most compressible tissue in the lower arch;**
- Buccal shelf
  - Premylohoid region
  - Labial sulcus
  - Retromolar pad
  - Alveolar ridge

**Key: d**

##### **PRE-PROSTHETIC SURGERY**

4. **Surgical removal of a maxillary torus is indicated when?**
- The torus impinges on the soft palate
  - The torus is undercut
  - The torus extends so far posteriorly that it interferes with the posterior palatal seal
  - When it is psychologically disturbing to the patient who suffers from cancerphobia
  - All of the above

**Key: e**

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#### **DENTURE SUPPORT**

5. **How will the alveolar ridge respond to a mandibular complete denture base that terminates short of retromolar pad:**
- Marked ridge resorption will occur
  - The apposition of bone on the ridge will occur
  - The alveolar ridge will not be affected at all
  - Soreness of the soft tissue
  - Fracture of the ridge may occur
- Key: a**
6. **The primary denture support area for a mandibular complete denture is:**
- The vestibule
  - The buccal shelf
  - The palatopharyngeal fold
  - The franium
  - All of the above
- Key: b**

#### **IMPRESSION TECHNIQUES**

7. **There are many impression techniques which are used in recording impressions of the edentulous areas. Which impression technique will be used in a patient with a sharp mandibular ridge?**
- Minimum pressure impression technique
  - Selective pressure impression technique
  - Excessive pressure impression technique
  - All of the above of impression techniques
- Key: a**

#### **JAW REGISTRATION**

8. **The position of the upper occlusal rim in the articulator is adjusted by:**
- Arbitrary means
  - By using a facebow
  - By adjusting the intercondylar distance
  - By adjusting the incisal pin
  - Visually
- Key: b**
9. **A loss in vertical dimension in complete denture will cause the mandible to move:**
- Backward in relation to upper jaw
  - Forward in relation to upper jaw
  - No change in the position of the jaws
  - Loss of vertical dimension is very rare
  - In eccentric movements
- Key: b**

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- 10. While recording the rest position of the mandible, the patient's:**
- a. Head should be upright and unsupported
  - b. Head should be supported by the head rest
  - c. Patient should be lying in repose position
  - d. The neck should be extended
  - e. Head can be in any position
- Key: a**

### **SETUP OF TEETH**

- 11. The correct bucco-lingual placement of the teeth plays an important role in phonation. What should be the relationship of teeth and tongue in pronouncing "t" and "d" sounds:**
- a. The tongue will protrude forwards
  - b. Contact of the tip of the tongue with the anterior palate and lingual surfaces of the maxillary anterior teeth
  - c. The lips will contact with each other only
  - d. Constricted palate form
  - e. No relationship is present
- Key: b**

### **OCCCLUSION**

- 12. Balanced occlusion in complete denture is essential:**
- a. For the patient to masticate properly
  - b. For the dentures to have adequate retention
  - c. To ensure even pressure in all parts of the arch, which maintains the stability of the dentures when the mandible is in centric and eccentric position.
  - d. Balanced occlusion is not essential in complete dentures
  - e. For aesthetic purposes
- Key: c**

### **POST INSERTION COMPLAINTS**

- 13. A patient is referred to the prosthodontist with complaint of a newly made denture which is loose and causes soreness even after repeated adjustments. What is the most important protocol to follow in such a case?**
- a. To check the occlusion
  - b. To take another impression denture immediately
  - c. To relieve the denture at the sore spots
  - d. To ask the patient to use denture fixatives
  - e. To tolerate the denture
- Key: a**

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14. **A complete denture wearer, reports complaining of discomfort with his dentures. On examination it is observed that the posterior teeth are set edge to edge, without horizontal overjet, the possible discomfort may be:**
- Gagging
  - Cheek biting
  - Reduced taste
  - Speech aberrations
  - Lip biting
- Key: b**
15. **After the provision of complete denture the first review appointment for evaluating the new dentures should be carried out after:**
- 03 hours after delivery
  - 12 hours after delivery
  - 24 hours after delivery
  - 36 hours after delivery
  - 48 hours after delivery
- Key: c**

**MUSCLE BALANCE**

16. **The oral muscular forces have a definitive effect, on the position of the mandible. What position will the mandible be braced during typical empty mouth swallowing?**
- The intercuspal position
  - The retruded contact position
  - The protruded contact position
  - Centric relation
  - Eccentric relation
- Key: a**
17. **An overextended disto buccal corner of a mandibular denture will push against which muscle during function:**
- Zygomaticus
  - Orbicularis
  - Temporalis
  - Masseter
  - Buccinator
- Key: d**
18. **Mandibular movement pattern of complete denture patients and those with natural teeth are:**
- Same
  - Mandibular movement in complete denture patients are completely different
  - Mandibular movement is slow in complete denture patients
  - Mandibular movement is frequent in complete denture patients
  - Mandibular movements are irregular in complete denture patients
- Key: a**

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19. **Patients with complete dentures are advised to chew food on both sides of the mouth, but with food of tougher consistency, the patient preference for chewing changes and use:**
- Molar region for chewing
  - Premolar region for chewing
  - It makes no difference since chewing tough foods is not possible with complete denture
  - Anterior region for chewing
  - Patient avoids tough food
- Key: b**

### **DENTURE HYGIENE**

20. **On a review appointment it is observed that there is deposition of calculus on one side of the denture. this indicates that:**
- The patient is not cleaning his denture on that side
  - The occlusion is not correct and patient the eats on one side only
  - The patient salivates too much
  - The patient continuously wears his dentures
  - No denture hygiene instructions were given to the patient
- Key: b**

### **SECTION II**

### **REMOVALBLE PARTIAL DENTURE**

### **PARTIAL DENTURE CLASSIFICATION**

21. **Kennedy classification is determined by:**
- The most anterior tooth missing
  - The first tooth to be lost
  - The largest tooth in the space
  - The most posterior tooth missing
  - The presence of wisdom tooth
- Key: d**

### **SURVEYING**

22. **Tripoding is the method used:**
- For giving clasp assemblies at 3 points
  - For recording the relation of the cast to the surveyor
  - To determine the areas on the tooth where the gingivally approaching clasp, occlusal rest of the reciprocal arm are going to be placed
  - To have reproducible position of the cast on the surveyor
  - To identify guide planes
- Key: d**

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**IMPRESSIONS**

23. **What is the most suitable material for making impression of a partial dentate patient would be:**
- a. Irreversible hydrocolloids
  - b. Reversible hydrocolloid
  - c. Elastomers
  - d. Plaster of Paris
  - e. Impression waxes
- Key: c**

**RETAINERS**

24. **What are the functions of an indirect retainer:**
- a. to prevent horizontal dislodgement of the distal extension base of a removable partial denture
  - b. to connect the parts of the prosthesis located on one side of the arch with those on the opposite side
  - c. to prevent vertical dislodgement of the distal extension base of a removable partial denture
  - d. to link the major connector and other parts of the prosthesis together
  - e. it has no function
- Key: c**
25. **A wrought wire clasp when used as a retainer:**
- a. is less flexible than a cast clasp
  - b. is not as tough as a cast clasp
  - c. has a tensile strength that is at least 25% greater than that of the cast alloy from which it was made
  - d. is not as adjustable as a cast clasp
  - e. is never used as a retainer
- Key: c**
26. **In the mesial rest, guide plane and i-bar design, reciprocation is achieved by:**
- a. flexible plating
  - b. minor connectors
  - c. major connectors
  - d. guide planes not extended around the vertical line of abutments
  - e. retentive clasp arms
- Key: b**
27. **All of the following are advantages of the gingivally approaching clasps as compared to occlusally approaching clasp, except :**
- a. Less distortion of coronal contours
  - b. Less tooth contact
  - c. Cleaner
  - d. Less bothersome to vestibular tissues
  - e. Esthetically superior in most cases
- Key: d**
28. **The reciprocal arm of the clasp assembly should:**
- a. Always be on the lingual side
  - b. Always be active, i.e. apply force to the tooth
  - c. Be active when half of the denture has been inserted
  - d. Always be passive
  - e. Reciprocation is not necessary
- Key: d**

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PARTIAL DENTURE SUPPORT

29. **All of the following are considered to be basic rules for occlusal rest design when fabricating a removable partial denture except:**
- The rest should minimise the tilting action of the appliance
  - The rest must be placed so that it will prevent movement of the appliance in a cervical direction
  - The rest should transmit stress down the long axis of the abutment
  - The rest must have sharp angles to permit maximum retention
  - Occlusal rest is not essential

**Key: d**

30. **For the preparation of rest seat:**
- Marginal ridge should be reduced by 2.5mm
  - Marginal ridge should be reduced by 1.5mm
  - The outline to have greater width than length
  - The outline to have greater length than width
  - No preparation is required

**Key: b**

PARTIAL DENTURE CONNECTORS

31. **A device that relieves the abutment teeth, to which a fixed or removable partial denture is attached, of all or part of the forces generated by occlusal function is called a:**

- Pontic
- Stress breaker
- Major connector
- Minor connector
- Retainer

**Key: b**

32. **When designing palatal major connectors, relief should be given for:**

- Palatal torus
- Ridge area
- Elevated mid suture line
- Rugae area
- Gingival areas

**Key: a**

33. **Labial bar is indicated when:**

- There is a diastema
- There is Labial inclination of teeth
- There is Lingual inclination of teeth
- There are Periodontally weak teeth
- The lips are incompetent

**Key: c**

34. **The superior border of lingual bar should lie:**

- Deep in the lingual sulcus
- At least 4 mm below the gingival margin
- At the cingulum of anterior teeth
- At least 7 mm below the gingival margin
- In the floor of the mouth

**Key: b**

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35. **One of the steps of preparation of the master cast before casting is beading. What is the purpose of beading of the maxillary cast:**
- To transfer the major connector design with a visible outline
  - To give strength to the casting
  - To provide intimate tissue contact
  - To provide for undercuts
  - To strengthen the cast
- Key: c**

**SECTION III**

**MAXILLO FACIAL PROSTHETICS**

36. **A black gutta percha is a thermo plastic impression material which is used for recording impressions for;**
- Complete dentures
  - Partial dentures
  - Intra-oral defects
  - Over dentures
  - Immediate dentures
- Key: c**

**DENTAL MATERIALS**

37. **Which is an appropriate procedure for disinfection of alginate impression?**
- Complete immersion in bleach in a plastic bag for 1 hour
  - Spraying for 30 seconds with an iodophor and then wiping dry
  - Placing in an autoclave on low temperature for 3 minutes
  - Spraying with gluteraldehyde and sealing in a bag for 10 minutes
  - Place under running water
- Key: d**
38. **Which of the following elastomeric impression materials has the longest working and setting time?**
- Polyether
  - Polysulfide
  - Condensation silicones
  - Addition silicone
  - soft acrylics
- Key: b**

**IMMEDIATE DENTURES**

39. **A patient with class iii mobility of upper and lower teeth is suggested immediate complete dentures. When both maxillary and mandibular immediate complete dentures are proposed then what is the recommended protocol:**
- They should be constructed together
  - Make the maxillary first followed by the mandibular
  - Construct the mandibular first
  - Immediate dentures should not be made routinely as they get loose later
  - Wait for complete healing of the tissues
- Key: a**

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**OVER DENTURES**

40. **While selecting overdenture abutment preference is given to:**
- a. Posterior abutments
  - b. Anterior abutments
  - c. There is no reason for any preferences
  - d. Overdenture is not a good alternative treatment
  - e. Submerged roots
- Key: b**

**SINGLE COMPLETE DENTURE**

41. **A patient is seen with all maxillary teeth removed and lower arch intact. However, the lower molars are supra erupted, so that the occlusion plane is not level, what should be done in such a case?**
- a. The occlusal plane of the natural teeth must be made level
  - b. The artificial teeth must be set to contact only the highest parts of natural teeth
  - c. The teeth should be prepared so that cross arch balancing contacts are possible
  - d. Onlays to alter the shape and height of the occlusal surfaces of the teeth
  - e. All the above
- Key: e**

**IMPLANT**

42. **For implant placement, ideal amount of bone under soft tissue is:**
- a. 8 mm vertical and 4 mm horizontal
  - b. 10 mm vertical and 6 mm horizontal
  - c. At least 12 mm vertical and 6 mm horizontal
  - d. At least 14 mm vertical and 8 mm horizontal
  - e. Depends from patient to patient
- Key: b**
43. **This distance between the implant and the superior aspect of the inferior alveolar canal should be:**
- a. 1 mm
  - b. 3 mm
  - c. 2 mm
  - d. 4 mm
  - e. 6 mm
- Key: c**

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### **TEMPOROMANDIBULAR JOINT**

44. **A complete denture wearer, reports to the dentist with symptoms of joint involvement, obscure pain and discomfort and clicking sounds. The dentures should be checked for:**
- a. Increased vertical dimension
  - b. Reduced vertical dimension
  - c. Improper centric relation
  - d. Overextended denture base
  - e. Looseness of the dentures
- Key: a**

### **COMBINATION SYNDROME**

45. **A patient is observed with complete loss of teeth in the maxillary arch and loss of the molars on both sides on the lower arch. What is the treatment option for such a clinical scenario?**
- a. Only the maxillary denture should be made
  - b. It is absolutely essential to make the lower denture along with the upper
  - c. It makes no difference whether the lower denture is made or not
  - d. In such a situation the lower teeth should also be extracted
  - e. Review the patient
- Key: b**