

**Federal State Budgetary Educational Institution North Ossetian State Medical
Academy of the Ministry of Health of the Russian Federation**

Department of Dentistry No. 1

APPROVED

By the Central Coordinating
Educational and Methodological Council
"May 23, 2023 No. 5

FOND OF ESTIMATED FUNDS

**in the Practical training in obtaining professional skills and professional
experience (in orthopedic dentistry)**

basic professional educational program of higher education –
specialty programs in the specialty 31.05.03 Dentistry, approved by the Ministry of
Health of the Russian Federation. 24.05.2023 г.

For students specialty 31.05.03 Dentistry

Reviewed and approved at the meeting of the
Department on May 19, 2023, Protocol No. 9
Head of the Department MD,


signature

Associate Professor
M. G. Dzgoeva

Vladikavkaz 2023г.

STRUCTURE OF EVALUATION MATERIALS

1. Title page
2. Structure of evaluation materials
3. Reviews of evaluation materials
4. Passport of evaluation materials
5. Set of evaluation materials:
 - questions for the module
 - questions for the test
 - exam questions
 - a bank of situational tasks/practical tasks/business games
 - standards of test tasks (with title page and table of contents)
 - examination tickets/test tickets

FEDERAL STATE BUDGETARY EDUCATIONAL INSTITUTION OF HIGHER
EDUCATION "NORTH OSSETIAN STATE MEDICAL ACADEMY" OF THE
MINISTRY OF HEALTH OF THE RUSSIAN FEDERATION

REVIEW
of evaluation materials

in the Practical training in obtaining professional skills and professional experience
(in orthopedic dentistry)

For 4 st year students in the specialty 31.05.03 Dentistry

The evaluation materials were compiled at the Department of Dentistry No. 1 on the basis of the work program of the discipline approved on 05/24/2023 and meet the requirements of the Federal State Educational Standard for the specialty 31.05.03 Dentistry, approved by the Ministry of Education and Science of the Russian Federation on 08/19/2020, No. 984.

Evaluation materials include a bank of test tasks, exam tickets (test tickets).

The bank of test tasks includes the following elements: test tasks, variants of test tasks, answer templates. All tasks correspond to the work program of the Practical training in obtaining professional skills and professional experience (in orthopedic dentistry) and cover all its sections. The complexity of the tasks varies. The number of tasks for each section of the discipline is sufficient to carry out knowledge control and eliminates the repeated repetition of the same question in different versions. The bank contains answers to all test tasks and tasks.

The number of examination tickets is 35, which is enough for the exam and excludes the repeated use of the same ticket during the exam in one academic group on the same day. Examination tickets are made on the forms of a single sample in a standard form, on paper of the same color and quality. The exam ticket includes 4 questions. The wording of the questions coincides with the wording of the list of questions submitted for the exam. The content of the questions of one ticket relates to various sections of the program, which allows you to more fully cover the material of the discipline.

The complexity of the questions in the examination tickets is evenly distributed.

There are no comments to the reviewed evaluation materials.

In general, evaluation materials on the discipline Practical training in obtaining professional skills and professional experience (in orthopedic dentistry) contribute to a qualitative assessment of the level of students' proficiency in general cultural and professional competencies.

Peer-reviewed evaluation materials can be recommended for use for intermediate certification at the Faculty of Dentistry for 4 st year students.

Reviewer:

Chairman of the Central Committee of Dental
Disciplines with the subcommittee on the
examination of evaluation tools, MD,
Associate Professor



G.V. Toboev

ПОДПИСЬ

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Reviewer:

The chief doctor of the dental
polyclinic of SOGU, PhD



D.Z. Choniashvili

ПОДПИСЬ

**Passport of the Department of assessment tools for the discipline
Practice to gain professional skills and experience in professional activities**

n /	a Name of the supervised section (topic) of the discipline / module	Code of the formed competence(stage)	Name of the evaluation tool
1	2	3	4
Type of control	Intermediate		
1	Errors and complications in the treatment of complete and partial tooth loss, defects of the crown part of the teeth, their classification.	PC2	Standards of test tasks, exam tickets
2	Methods of examination of patients with complete and partial tooth loss in the clinic of orthopedic dentistry.	PC2	Standards of test tasks, exam tickets
3	Methods for determining the functional state of the dentoalveolar system (clinical, functional (laboratory) and static).	PC5	Standards of test tasks, exam tickets
4	Features of examination and laboratory methods of research of patients with complete absence of teeth	PC6	Standards of test tasks, exam tickets
5	Treatment for complete loss of teeth. Classification of structures used.	PC6	Standards of test tasks, exam tickets
6	Treatment of partial tooth loss with removable structures	PC6	Standards of test tasks, exam tickets
7	Treatment of partial tooth loss with fixed structures	PC19	Standards of test tasks, exam tickets
8	Methods for determining the functional state of the dentoalveolar system (clinical, functional (laboratory) and static).	PC19	Standards Test task standards, exam tickets

Table of contents

#	Name of the supervised section (topic) of the discipline / module	Number of tests (total)	Code of the competencies being formed	page from __ to __
1	2	3	4	5
Type of control	Intermediate			
1.	Errors and complications in the treatment of complete and partial tooth loss, defects of the crown part of the teeth, their classification.	10	PK2	p. 8-9
2.	Methods of examination of patients with complete and partial tooth loss in the clinic of orthopedic dentistry.	10	PK2	p. 9-11
3.	Methods for determining the functional state of the dentoalveolar system (clinical, functional (laboratory) and static).	10	PK5	p. 11-12
4.	Features of examination and laboratory methods of research of patients with complete absence of teeth	10	PK6	p. 12-14
5.	Treatment for complete loss of teeth. Classification of structures used.	10	PK6	p. 14-16
6.	Treatment of partial tooth loss with removable structures	10	PK6	p. 16-17
7.	Treatment of partial tooth loss with fixed structures	10	PK19	p. 18-19
8.	Methods for determining the functional state of the dentoalveolar system (clinical, functional (laboratory) and static).	10	PC19	pages 19-21

Section 1

1

SELECTIVE GRINDING OF TEETH IN PERIODONTITIS IS PERFORMED WITHIN THE LIMITS OF

- A) enamels
- B) dentin
- C) cement
- D) fissures
- E) the equator

2

WITH PERIODONTITIS, THE POCKET IS DETERMINED BY

- A) Clinically
- B) histologically
- C) radiologically
- D) luminescent
- E) palpation

3

THE LACK OF A CONTACT POINT BETWEEN THE TEETH CAN LEAD TO PERIODONTITIS

- A) localized
- B) generalized
- B) juvenile
- D) rapidly progressing
- E) senile

4

SEVERE PERIODONTITIS IS DIFFERENTIATED WITH

- A) moderate periodontitis
- B) hypertrophic gingivitis
- B) catarrhal gingivitis
- D) periodontal disease
- E) fibromatosis

5

INFLAMMATION OF THE GUMS IS A CHARACTERISTIC SIGN

- A) periodontitis
- B) periodontal disease
- C) mumps
- D) gingival fibromatosis
- E) hyperemia

6

RESORPTION OF THE CORTICAL BONE AT THE TOPS OF THE INTERALVEOLAR SEPTA IS CHARACTERISTIC OF

- A) mild periodontitis
- B) periodontal cyst
- B) mild periodontal disease
- D) chronic abscessed catarrhal gingivitis
- E) fibromatosis

7

DIFFERENTIAL DIAGNOSIS OF PERIODONTAL DISEASE IS CARRIED OUT WITH

- A) chronic generalized periodontitis, in remission

- B) chronic generalized periodontitis, mild
- B) chronic catarrhal gingivitis
- D) medical periodontitis
- E) fibromatosis

8

CHARACTERISTIC TYPE OF REDUCTION IN THE HEIGHT OF THE INTERDENTAL SEPTA IN PARADONTOSIS

- A) horizontal uniform
- B) vertical
- B) horizontal uneven
- D) Mixed
- E) sagittal

9

WITH PERIODONTITIS, PATHOLOGICAL CHANGES ARE SUBJECT TO

- A) all periodontal structures
- B) bone tissue
- B) vascular system
- D) gums
- E) granulation tissue of the periodontal pocket

10

ACCORDING TO THE CLINICAL COURSE, PERIODONTITIS IS DISTINGUISHED

- A) acute, chronic, exacerbation, remission
- B) chronic
- B) Generalized
- D) chronic in the acute stage
- E) acute

Section 2

1

ACCORDING TO THE PREVALENCE OF THE PROCESS, PERIODONTITIS IS DISTINGUISHED

- A) focal, generalized
- B) generalized
- B) septic tank
- D) focal, generalized, abscessed
- E) focal

2

THE SCHILLER-PISAREV TEST IS USED TO DETERMINE

- A) the prevalence of inflammation
- B) the hygienic condition of the oral cavity
- B) capillary blood flow rates
- D) the amount of plaque
- E) the number of microorganisms

3

WHEN THE LATERAL TEETH ARE LOST, A TRAUMATIC NODE OCCURS IN THE FRONTAL PART OF THE DENTITION

- A) reflected
- B) direct
- B) oblique

- D) curved
- E) indirect

4

WITH PERIODONTITIS, TOOTH DISPLACEMENT IS POSSIBLE IN THE FOLLOWING DIRECTIONS:

- A) in all directions
- B) vestibulo-oral
- B) the media system
- D) vertical
- E) opposite to the vector of the applied force

5

WITH GENERALIZED PERIODONTITIS, POCKETS ARE DETECTED

- A) all teeth
- B) in several teeth at the site of separation of dentition rows
- B) on the side of traumatic occlusion
- D) in one tooth

6

IN PERIODONTITIS, THE DESTRUCTION OF BONE TISSUE IN THE

- A) the alveolar process of the jaw
- B) the body of the jaw
- B) the articular process
- D) the coronal process
- E) periodontal fissure

7

WITH THE FIRST DEGREE OF PATHOLOGICAL MOBILITY, THE TOOTH MOVES IN THE DIRECTION OF

- A) vestibular
- B) mesiodystal
- B) vertical
- D) vestibular and vertical
- E) vestibular, mesiodistal and vertical

8

AT THE SECOND DEGREE OF PATHOLOGICAL MOBILITY, THE TOOTH IS DISPLACED IN THE DIRECTION OF

- A) vestibulooral and mesiodystal
- B) vertical
- B) vestibular
- D) mesiodystal
- E) mesiodistal and vertical

9

WITH A MILD DEGREE OF PERIODONTITIS, AN X-RAY IS DETERMINED BY

- A) bone resorption up to 1/3 of the tooth root length
- B) reducing the height of the interdental septa by 1/4-1/3 of the root length
- B) reducing the height of the interdental septa by 1/2 of the root length
- D) resorption of more than 1/2 root length
- E) the absence of changes in bone tissue throughout the entire body.

10

WITH I MODERATE DEGREE OF PERIODONTITIS ON THE RADIOGRAPH IS DETERMINED BY

- A) reducing the height of the interdental septa to 1/2 the root length
- B) reducing the height of the interdental septa by 1/4-1/3 of the root length
- B) no bone changes throughout the entire body.
- D) resorption of more than 1/2 root length
- E) bone resorption up to 1/3 of the tooth root length

Section 3

1

WITH A SEVERE DEGREE OF PERIODONTITIS, THE X-RAY IS DETERMINED BY

- A) resorption of more than 1/2 root length
- B) reducing the height of the interdental septa by 1/4-1/3 of the root length
- B) reducing the height of the interdental septa by 1/2 of the root length
- D) the absence of changes in bone tissue throughout the entire body.
- E) bone resorption up to 1/3 of the tooth root length

2

ODONTOPARODONTOGRAM CONTAINS INFORMATION ABOUT

- A) the condition of periodontal bone tissue
- B) the condition of the oral mucosa
- B) the degree of tooth mobility
- D) the presence of periodontal inflammation
- E) condition of the gingival capillaries

3

BASIC PARAMETERS OF THE FUNCTIONAL VALUE OF THE TOOTH

- A) bone atrophy and tooth mobility
- B) tooth color and size
- B) gum inflammation and tooth color
- D) tooth mobility and dental deposits
- E) dental deposits and gum inflammation

4

PERIODONTAL DISEASE IS

- A) gum, periodontal, alveolar bone, root cement, enamel
- B) gum, periodontal, alveolar bone
- C) tooth, gum, periodontal area
- D) gum, periodontal, alveolar bone, root dentin
- E) gum, alveolar bone, bone

5

OCCLUSION IS A TYPE OF CLOSING OF THE DENTITION ROWS IN THE OCCLUSION POSITION

- A) central
- B) side left
- B) front panel
- D) distal
- E) side right

6

TO DETERMINE THE CENTRAL OCCLUSION, PLASTER MODELS ARE SENT TO THE CLINIC

- A) with wax bases and occlusal rollers

- B) installed in the occluder
- B) installed in the articulator
- D) with wax bases and artificial teeth
- E) with wax bases installed in the occluder

7

DEVICES THAT REPRODUCE THE MOVEMENTS OF THE LOWER JAW INCLUDE

- A) articulator
- B) The functionographer
- B) Gnathodynamometer
- D) Parallelometer
- E) estesiometer

8

ARTICULAR SIGN OF CENTRAL OCCLUSION: THE ORAL HEAD IS LOCATED IN RELATION TO THE ORAL TUBERCLE

- A) at the base of the ramp
- B) in the middle of the ramp
- B) at the top
- D) on any part of the slope
- E) in the distal part of the articular fossa

9

WITH THE MAXIMUM OPENING OF THE MOUTH, THE ARTICULAR HEADS OF THE LOWER JAW ARE SET RELATIVE TO THE SLOPE OF THE ARTICULAR TUBERCLE

- A) at the top
- B) at the base
- C) in the lower third
- D) in the middle
- E) in the upper third

10

VIEW OF THE RATIO OF UPPER AND LOWER JAW TEETH IN CENTRAL OCCLUSION

- A) bite
- B) Articulation
- C) occlusion
- D) interalveolar height
- E) height of the lower part of the face

Section4

1

THE FINAL LABORATORY STAGE OF MANUFACTURING A METAL-PLASTIC CROWN IS

- A) Polishing
- B) glazing
- C) stock up on the model
- D) Final firing
- E) final form adjustment

2

WHEN PREPARING A TOOTH FOR THE MANUFACTURE OF A STAMPED CROWN, FABRICS ARE SANDED FROM THE SIDE SURFACES

- A) according to the perimeter of the tooth neck

- B) on the thickness of the crown material
- C) only the equator
- D) Contact point
- E) according to the tip of the interdental gingival papilla

3

CREATING AN EXCESSIVE TAPER OF THE STUMP WHEN PREPARING FOR A METAL-CERAMIC CROWN CAUSES

- A) loosening of the prosthesis fixation
- B) periodontal injury
- C) difficult application of the prosthesis
- D) aesthetic defect in the neck of the tooth
- E) reduced chewing efficiency

4

WHEN MANUFACTURING A METAL-CERAMIC CROWN, THE WORKING IMPRESSION IS OBTAINED BY WEIGHT

- A) silicone
- B) alginate
- C) fluoro-rubber
- D) thermoplastic
- E) zinc hydroxide eugenol

5

WHEN MAKING AN ALL-CAST CROWN, ANATOMICALLY SHAPED WAX MODELING IS PERFORMED IN VOLUME (COMPARED TO A NATURAL TOOTH)

- A) equal to
- B) less by the thickness of the metal alloy
- B) greater by the thickness of the metal alloy
- D) less by the thickness of the compensation varnish
- E) more than the thickness of the compensation varnish

6

INTERMEDIATE PART OF THE BRIDGE PROSTHESIS IN THE AREA OF THE LATERAL TEETH IN RELATION TO THE GUM

- A) does not apply
- B) adjacent to it over the entire surface
- B) fits only on the slopes of the alveolar ridge
- D) touches the top of the alveolar ridge at two points
- E) touches the top of the alveolar ridge at one point

7

ALL THE SIDE WALLS OF THE SUPPORTING TEETH ARE PREPARED IN THE MANUFACTURE OF A SOLDERED BRIDGE PROSTHESIS

- A) in parallel with each other
- B) with a slope towards the dentition defect
- B) with a slope away from the dentition defect
- D) parallel to the adjacent tooth
- E) only parallel to the longitudinal axis of the tooth

8

MODELING OF THE BODY OF A METAL-CERAMIC BRIDGE PROSTHESIS IS CARRIED OUT

- A) simultaneously with modeling the support crowns

- B) before modeling the support crowns
- B) at the stage of stocking the support crowns on the model
- D) after the stage of storing support crowns in the clinic
- E) after the laboratory stage of manufacturing support crowns

9

SHAPE OF THE INTERMEDIATE PART OF THE BRIDGE PROSTHESIS IN THE AREA OF THE LATERAL TEETH IN RELATION TO THE GUM

- A) flushing system
- B) Tangent
- B) saddle shape
- D) can be any
- E) depends on the extent of the dentition defect

10

UNILATERAL DISTALLY UNRESTRICTED (TERMINAL) DENTITION DEFECT (ACCORDING TO THE KENNEDY CLASSIFICATION) BELONGS TO THE CLASS

- A) the second
- B) the first one
- B) a third party
- D) the fourth
- E) the fifth

Section 5

1

INDICATIONS FOR THE MANUFACTURE OF A BRIDGE PROSTHESIS ARE

- A) included dentition defect
- B) defect of the crown part of the tooth
- B) pathological erasability
- D) severe periodontitis
- E) terminal unilateral defect of the dentition

2

A TWO-LAYER IMPRESSION IS OBTAINED USING IMPRESSION MASSES

- A) Silicone
- B) alginate
- B) solid-crystal
- D) thermoplastics
- E) hydrocolloid

3

FOR THE PRODUCTION OF CROWNS BY THE METHOD OF EXTERNAL STAMPING, STAMPS CAST FROM

- A) low-melting alloy
- B) stainless steel
- B) chromium-cobalt alloy
- D) silver-palladium alloy
- E) Brass

4

CORRECTION OF THE STAMPED CROWN MADE OF GOLD ALLOY ALONG THE LENGTH IS CARRIED OUT USING

- A) metal shears

- B) diamond heads
- B) carborundum heads
- D) metal milling cutters
- E) crampon forceps

5

IN THE MANUFACTURE OF A METAL-CERAMIC CROWN, THE CERAMIC MASS IS APPLIED TO

- A) cast cap
- B) stamped cap
- B) platinum cap
- D) a stamp made of refractory material
- E) fire-resistant model

6

THE PORCELAIN CROWN IS STORED BY DETECTING PREMATURE CONTACTS BETWEEN THE CROWN AND THE WALLS OF THE TOOTH STUMP USING THE FOLLOWING METHODS:

- A) corrective silicone impression masses
- B) heated wax
- B) alginate impression masses
- D) liquid gypsum
- E) copy paper

7

VIOLATION OF THE TEMPERATURE REGIME OF POLYMERIZATION IN THE MANUFACTURE OF A PLASTIC CROWN CAUSES

- A) formation of gas porosity
- B) increasing the size of the crown
- B) reducing the size of the crown
- D) violation of integrity
- E) formation of granular porosity

8

FOR FACING METAL-PLASTIC CROWNS ARE USED

- A) synma M
- B) acryloxyde
- B) Ethacrylate
- D) protacril
- E) carbodent

9

IN THE MANUFACTURE OF A METAL-PLASTIC CROWN, THE CONNECTION OF PLASTIC WITH A CAST FRAME IS CARRIED OUT AT THE EXPENSE OF

- A) formation of retention points using " pearls "(balls)
- B) a chemical compound
- B) formation of an oxide film
- D) mutual diffusion of materials
- E) cutting out a "window" on the vestibular surface of the crown

10

CONTRAINDICTION TO THE MANUFACTURE OF AN ARTIFICIAL CROWN IS

- A) pathological tooth mobility of the third degree
- B) pathological erasability of hard tissues
- B) presence of hyperesthesia

- D) lower face height reduction
- E) the need for tooth shortening in the Popov-Hodon phenomenon

Section 6

01. Non-metal crowns that restore the coronal part of the tooth include :

- 1) plastic crowns
- 2) a metal-ceramic crown
- 3) stamped crown
- 4) porcelain crowns
- 5) composite crowns

02. Combined crowns include:

- 1) metal-ceramic crown
- 2) metal-plastic crown
- 3) a porcelain crown
- 4) all-metal crown

03. *Indications for the manufacture of crowns are:*

- 1) significant destruction of the crown part of the tooth, when it is impossible to restore it with fillings and inlays
- 2) changing the color of the tooth crown
- 3) irregular shape of the tooth crown
- 4) incorrect position of the tooth in the jaw
- 5) all of the above is true

04. Requirements for artificial grass

- 1) have close contact with the antagonist teeth in the central occlusion
- 2) cover the tooth neck tightly
- 3) restore contact with adjacent teeth
- 4) restore the anatomical shape of the tooth
- 5) Do not disturb the height of the lower part of the face.
- 6) do not violate the aesthetics
- 7) all of the above is true
- 8) true 1+2+4+6+4

05. By design, artificial crowns are:

- 1) complete;
- 2) equator lines.
- 3) half-crowns (three-quarter);
- 4) with a pin (according to Akhmetov);

- 5) stumps;
- 6) combined;
- 7) telescopic
- 8) metal-ceramic and metal-plastic materials
- 9) all of the above is true
- 10) true 1+2+3+4+5+6+7

06. Jacket crowns include

- 1) cermet industry
- 2) cast
- 3) stamped with facing
- 4) porcelain kitchen

07. When manufacturing solid-cast and/or cermet crowns, the working impression is removed

- 1) alginate masses
- 2) silicone masses
- 3) in plaster

08. The value of the IOPZ index at which treatment with crowns is indicated:

- 1) 0,2-0,3
- 2) 0,5-0,6
- 3) more than 0.7

09. a non-removable denture that reproduces the shape of a natural tooth is called _____

10. Surgical intervention on hard tissues performed with abrasive rotating instruments is called _____.

Section 7

01. When preparing the occlusal surface of the tooth for a stamped gold alloy crown, it is ground to a thickness of

- 1) 0.28-0.3 mm
- 2) 0.45-0.5 mm
- 3) 0.55-0.6 mm

02. When making a single stamped crown, casts are removed

- 1) from the jaw where the crown will be stored
- 2) from both jaws
- 3) from a fragment of the jaw with a prepared tooth

03. Gold alloys are used for the manufacture of stamped crowns

- 1) 375

- 2) 583
- 3) 750
- 4) 900

04. When manufacturing a stamped crown, wax modeling is performed

- 1) on a plaster stamp
- 2) on a plaster model
- 3) on a collapsible model
- 4) on a fire-resistant model
- 5) all answers are correct

05. When preparing a tooth for a stamped crown, a ledge is formed

- 1) supragingival
- 2) at the level of the gum edge
- 3) subgingival on the vestibular surface
- 4) subgingival along the entire perimeter of the tooth neck
- 5) all answers are correct
- 6) all answers are incorrect

06. Alginate mass is used

for obtaining working casts in the manufacture of crowns

- 1) cast
- 2) stamped form
- 3) farforovaya street
- 4) plastic
- 5) cermet industry
- 6) metal-plastic

07. When preparing a tooth for a crown

select the following number of treated surfaces:

- 1) 2
- 2) 3
- 3) 4
- 4) 5
- 5) 6

08. Preparation of teeth for crowns is performed

- 1) hard-alloy drills
- 2) with diamond heads

- 3) with milling cutters
- 4) carborundum stones
- 5) vulcanite disks
- 6) metal separation discs

09. Indications for the manufacture of all-metal stamped crowns

- 1) defect of the crown part of the tooth
- 2) changing the color
- 3) mobility of 3 degrees
- 4) increasing the height of the lower face
- 5) splinting system
- 6) bridge support
- 7) under the clamp for a removable prosthesis

10. The alginate impression mass is kneaded

- 1) on the water
- 2) on a 3% solution of table salt
- 3) on the catalyst attached to the material

Section 8

01 Group

- 1) alginate
- 2) solid
- 3) СИЛИКОНОВЫЕ
- d)
- e)

Impression material

- a) gypsum
- crystal b) stomalgin
- (c) optosil
- xanthoprene
- repin

02. The edge of the stamped crown sinks into the gingival groove

- 1) by 0.2-0.5 mm
- 2) by 0.5-1.0 mm
- 3) by 1.0-1.5 mm

03. The length of a stamped gold alloy crown is stored using the following methods:

- 1) diamond heads
- 2) carborundum heads
- 3) metal shears

04. Requirements for an artificial stamped crown

- 9) have close contact with the antagonist teeth in the central occlusion
- 10) cover the tooth neck tightly
- 11) restore contact with adjacent teeth
- 12) sink no more than 0.2-0.5 mm into the gingival groove
- 13) overestimate occlusion by crown thickness
- 14) restore the anatomical shape of the tooth

05. Gum inflammation after crown fixation can be caused by

- 1) its wide edge
- 2) its long edge
- 3) lack of contact with adjacent teeth
- 4) unspokeness of the equator
- 5) absence of bumps on the chewing surface
- 6) lack of antagonist teeth

06. Alloys are used for the manufacture of stamped crowns

- 1) gold 900 samples
- 2) gold 750 samples
- 3) stainless steel
- 4) chromium-cobalt alloy

07. A fixed stamped crown can be removed from the tooth according to the indications, using

- 1) kolesovidny bor
- 2) a volcanic disk
- 3) a milling cutter
- 4) diamond head
- 5) carborundum head

08. Clinical stages of manufacturing a stamped crown [•] - tooth preparation, obtaining casts

- []- crown supply
- []- determination of central occlusion
- [] - fixing the crown

09. In the manufacture of artificial crowns, plaster models are fixed

- 1) to the occluder
- 2) to the articulator
- 3) go to estesiometer
- 4) to the gnathodynamometer
- 5) they don't use additional devices

10. The presence of premature contacts is detected when using

- 1) wax plate

- 2) copy paper
- 3) diagnostic models of the jaws
- 4) visually
- 5) records of lower jaw movements
- 6) 1+2+3+4+5
- 7) 1+2+5

**Federal Statebudgetary Educational Institution
North Ossetian State Medical Academyof the Ministry of Health of the Russian
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Department of Dentistry No. 1

Faculty of Dentistry **Course 4**

Discipline Practice for obtaining professional skills and professional experience

Exam ticket # 1

1. Parallelometry. Novak's method.
2. OComplications in the treatment of partial tooth loss

Head of the Department, MD,

Associate Professor M. G. Dzgoeva