

1. Parents of 2 years old girl complain of bright red color formation of size 1 to 1.5 cm that is not elevated over the mucous level on the upper lip area. The neoplasm changes its color during pressing, paleness appears. Regional lymph nodes, clinical blood and urine tests are without pathological changes. Put the preliminary diagnosis?
 - a. Capillary hemangioma
 - b. Capillary lymphangioma
 - c. Cavernous hemangioma
 - d. Cavernous lymphangioma
 - e. Pyogenic granuloma

2. The 3 month boy's mother complains of the presence of swelling of the left parotid area that is growing rapidly in her son. During examination of the left parotid area a rough surface with unclear borders of soft consistency was revealed. Neoplasm is painless during palpation. The skin over the swelling is not changed. Parotid salivary gland function is not affected. Cloudy yellowish liquid was received during puncture biopsy. Put the preliminary diagnosis.
 - a. Lymphangioma of parotid area
 - b. Hemangioma of the parotid area
 - c. Retention cyst of the parotid gland
 - d. Chronic parenchymatous parotitis
 - e. Pseudoparotitis Herzenberg

3. Parents of 1.5 years old child referred to the clinic with complains of an enlargement of tongue, difficulties with food intake. Child suffers from birth. Objectively: general condition is without obvious pathology. Tongue is increased in size (macroglossia), mucous membrane is represented by the vesicle-like granulated growth. Tongue is thick, painless on palpation. What is the most correct diagnosis?
 - a. Lymphangioma of the tongue
 - b. Hemangioma of the tongue
 - c. Fibroma of the tongue
 - d. Cyst of the tongue
 - e. Malignant tumor of the tongue

4. Mother of 3 months old girl complains of the presence of tissue deformation on the upper lip and left cheek area in her child. The cyanosis of the skin in this area is observed. Tumor increases in size. Objectively: facial asymmetry due to the presence of tumor of left cheek and upper lip area is revealed. The skin over deformation is cyanotic in color. Symptom of filling is positive. Select the most correct diagnosis
 - a. Hemangioma
 - b. Fibroma
 - c. Cyst of the soft tissues
 - d. Neurofibromatosis
 - e. Cherubism

5. Parents of 11 months girl complain of the presence of a large neoplasm in the area of the chin and both submandibular areas of the child. Formation was detected at birth. The neoplasm grows slowly, but during acute respiratory viral disease, tumor increases in size in 2-3 times, and then gradually decreases. Objectively: soft tissue tumor without clear borders is revealed in both submandibular and submental areas. The neoplasm of

paste-like consistency and painless during palpation is observed. The skin over the formation is not changed. Opening of the mouth is not limited. Tongue is increased in size. Enlarged papillae of the tongue contain of a clear yellow liquid. Provide the clinical diagnosis.

- a. Cystic form of lymphangioma
 - b. Myoma
 - c. Thyroglossal duct cyst
 - d. Cavernous hemangioma
 - e. Neurofibromatosis
6. Parents of a 6 -year-old child complain of the presence of the tumor in the left parotid area, which gradually increased. The colour of the skin over the tumor is not changed. Tumor is not painful, but during putting the head down it increases in size and the skin becomes cyanotic. What disease can be predicted in child?
- a. Haemangioma
 - b. Fibroma
 - c. Ateroma
 - d. Lymphangioma
 - e. Cyst of parotid glandule
7. Mother of the 4-year-old child complains of the presence of neoplasm on the tongue, which slowly increases and does not hurt. During the examination on the tip of tongue the pathological neoplasm on a broad base was revealed. On its surface small thin fibers are visible. Neoplasm is painless, soft during palpation. What is preliminary diagnosis?
- a. Lymphangioma
 - b. Lipoma
 - c. Fibroma
 - d. Haemangioma
 - e. Papilloma
8. Mum of the 4-year-old child complains of a red dot spot on his face. It appeared a month ago and is growing. During the examination the pathological red spot of spidery form in the infraorbital area was revealed. During putting pressure the painting disappears in the centre of the spot. What is the preliminary diagnosis?
- a. Cavernous haemangioma
 - b. Capillary haemangioma
 - c. Vascular nevus
 - d. Pigmented nevus
 - e. Verrucose nevus
9. 1 month after injury of the mucosa of the lower lip of a 3-year-old child the tumor-like formation appeared of rounded, painless, soft, bluish-colored, 8 mm in diameter. Put the diagnosis:
- a. Lymphangioma of the lower lip
 - b. Hemangioma of the lower lip
 - c. Retention cysts of the minor salivary gland
 - d. Papilloma of the lower lip
 - e. Fibroma of the lower lip

10. One day ago, at home, a 6-year-old boy banged his forehead. A few hours later a tumor appeared in the right superciliary area. Objectively: the significant swelling of the forehead tissue that covers eyelid of the right eye. The skin over the tumor is cyanotic. The tumor is soft in consistency, the symptom of fluctuation exists. The general condition of the boy is not disturbed. Set the preliminary diagnosis.
- Hematoma of the right superciliary area
 - Post-traumatic swelling of the right superciliary area
 - Fracture of frontal bone
 - Suppurative hematoma of the right superciliary area
 - Inflammatory infiltrate of the right superciliary area
11. Parents of 11 months girl complain of the presence of a large neoplasm in the area of the chin and both submandibular areas of the child. Formation was detected at birth. The neoplasm grows slowly, but during acute respiratory viral disease, tumor increases in size in 2-3 times, and then gradually decreases. Objectively: soft tissue tumor without clear borders is revealed in both submandibular and submental areas. The neoplasm of paste-like consistency and painless during palpation is observed. The skin over the formation is not changed. Opening of the mouth is not limited. Tongue is increased in size. An enlarged papillae of the tongue contain of a clear yellow liquid. Provide the clinical diagnosis.
- Cystic form of lymphangioma
 - Myoma
 - Thyroglossal duct cyst
 - Cavernous hemangioma
 - Neurofibromatosis
12. The parents of 2 years old boy complain of an existence of brown color neoplasm on the left buccal area with irregular surface and wiry hair on it in their child. The neoplasm was detected immediately after childbirth and it is insignificantly growing within the child's growth. Put the diagnosis.
- Pigmented nevus
 - Vascular nevus
 - Kaposi sarcoma
 - Neurofibromatosis of the face
 - Melanoma of the cheek
13. The parents of a 3-year-old boy appealed to a dental surgeon with complaints of the presence of tumor in a superciliary area in their child. Objectively: in a right superciliary area there is a 2.3 cm tumor of the soft-elastic consistency, round in shape. A skin above it is slightly swollen and neither changed nor soldered. The puncture biopsy revealed a mass of whitish color. What is the most reliable diagnosis?
- Dermoid cyst of right superciliary area
 - Cutaneous hernia
 - Epidermoid cyst of right superciliary area
 - Lymphangioma of the right superciliary area
 - Hemangioma of the right superciliary area
14. The parents of 2 years old boy were referred to the dental hospital with the complains of the presence of the brown color hairy formation, with rough surface in a left buccal

area in their child. The formation has been presented since childbirth. Its growth slightly increases with time. Put diagnosis.

- a. Pigmented nevus
- b. Vascular nevus
- c. Sarcoma Kaposi
- d. Neurofibromatosis of the face
- e. Melanoma of the buccal area

15. The patient of 8 years old was sent for the dental consultation due to the presence of the formation on the tongue. On the left side of the tongue, near the tip, there is a growth on a narrow base of pale pink color, without the infiltration of surrounding tissues, painless on palpation. Measuring of swelling is up to 0.8 cm. What is the most correct preliminary diagnosis?

- a. Papilloma of the tongue
- b. Fibroma of the tongue
- c. Cyst of the tongue
- d. Hemangioma of the tongue
- e. Lymphangioma of the tongue

16. During the examination of the 8 years old girl the neoplasm in the submental area with soft-elastic consistency was revealed. It is located in the middle line of the neck and is up to 2 cm in diameter. The neoplasm is a round-shaped with limited mobility (moves upwards during swallowing). Palpation is painless. Set the preliminary diagnosis:

- a. Thyroglossal cyst of the neck (medial cyst)
- b. Dermoid cyst of the submental area
- c. Cyst of the sublingual salivary gland
- d. Chronic lymphadenitis of the submental area
- e. Cyst of submental salivary gland

17. During the examination of the 12 years old girl the neoplasm in the area of upper third of the front surface of the sternocleidomastoideus muscle was revealed. The tumour is with soft-elastic consistency, up to 3 cm in diameter, with limited mobility. Palpation is painless. The symptom of fluctuation is positive. Choose the method of treatment.

- a. Cystectomy
- b. Cystotomy
- c. Suturing of the tumour
- d. Punction of the tumour with sclerotic therapy
- e. Sclerotic therapy

18. During the examination of the 12 years old girl the neoplasm in the area of upper third of the front surface of the sternocleidomastoideus muscle was revealed. The tumour is with soft-elastic consistency, up to 3 cm in diameter, with limited mobility. Palpation is painless. The symptom of fluctuation is positive. Set the diagnosis:

- a. Lateral cyst of the neck
- b. Thyroglossal cyst of the neck
- c. Dermoid cyst of the neck
- d. Epidermoid cyst of the neck
- e. Lymphangioma of the neck area

19. During the examination of the 14 years old gboy the neoplasm in the area of the bridge of the nose was revealed. The tumour is with solid-elastic consistency, up to 1,8 cm in diameter and it appeared few months ago. Palpation is painless. The tumour is slightly soldered with skin and its mobility is limited. The child is somaticly healthy. Choose the adequate method of anesthesia during surgical treatment of the boy:
- Infiltrative anesthesia
 - Intravenous anesthesia
 - Infraorbital anesthesia
 - Endotracheal anesthesia
 - Conductive anesthesia
20. During the examination of the 12 years old girl the round-shaped neoplasm in the area of the forehead was revealed. The skin above the tumour is hyperemic. The neoplasm is with solid-elastic consistency, up to 1,8 cm in diameter, soldered with skin. Palpation is painful. The symptom of fluctuation is positive. The body temperature is risen. Set the diagnosis:
- Suppurated atheroma of the forehead
 - Atheroma of the forehead
 - Fibroma of the forehead
 - Suppurated dermoid cyst of the forehead
 - Abscess of the soft tissues of the forehead
21. What tumours are refered to the epithelial growth?
- Adenoma
 - Lymphangioma
 - Fibroma
 - Lipoma
 - Hemangioma
22. Synonim of pleomorphic adenoma is:
- Mixed tumor
 - Adenolymphoma
 - Monomorphic adenoma
 - Lipoma
 - Basal cell carcinoma
23. Pleomorphic adenoma most often is observed in:
- Parotid area
 - Sublingual area
 - Submandibular area
 - Minor salivary gland
 - Sweat gland
24. Pleomorphic adenoma is:
- Covered by capsule but not all along
 - Covered by evident capsule all along
 - Not covered by capsule
 - Covered by thin capsule

- e. Malignant tumour
25. Monomorphic adenoma consists of:
- a. Adenous (glandular) tissue
 - b. Mesenchyme-like structure
 - c. Adenous (glandular) and Mesenchyme-like structure
 - d. Epithelium tissue
 - e. Fibrous tissue
26. Pleomorphic adenoma consists of:
- a. Adenous (glandular) and mesenchyme-like structure
 - b. Mesenchyme-like structure
 - c. Adenous (glandular) tissue
 - d. Epithelium tissue
 - e. Mucus structure
27. What symptom can indicate for malignization of the pleomorphic adenoma?
- a. Rapid intensive growth of the tumour and limitation of mobility
 - b. Slow growth of the tumour
 - c. Painfulness of the tumour
 - d. Mobility of the tumour nodule
 - e. Throbbing pain
28. What treatment tactic should be chosen if the tumour is located in the deep part of the parotid gland?
- a. Total parotidectomy
 - b. Partial parotidectomy
 - c. Subtotal parotidectomy
 - d. Enucleation of the tumour
 - e. All tactics are incorrect
29. During management of subtotal parotidectomy the following treatment should be provided:
- a. External part of the parotid gland should be removed
 - b. External and internal parts of the parotid gland should be removed
 - c. Internal part of the parotid gland should be removed
 - d. Tumour is removed with 1 cm of sound adjacent glandular tissue
 - e. All parotid gland is removed
30. During management of partial parotidectomy the following treatment should be provided:
- a. Tumour is removed with 1 cm of sound adjacent parenchymatous glandular tissue
 - b. External part of the parotid gland should be removed
 - c. Internal part of the parotid gland should be removed
 - d. All parotid gland is removed
 - e. Internal and external parts of the gland should be removed

31. After the clinical and X-ray examination of a 15-year-old patient the osteoblastoclastoma of the lower jaw was diagnosed (a cystophorous form. The diagnosis is confirmed by the specific punctuate (a brown liquid). A tumor keeps outside a cortical plate which is thin. What method of treatment should be chosen in order to apply to this tumor?
- Exfoliation of the tumor simultaneously with a shell
 - Cystectomy
 - Curettage of the tumor within the limits of the healthy tissues
 - Cystotomy
 - Resection of the lower jaw with a bone plastic
32. A 12- year-old child is directed to a hospital with a suspicion of osteoblastoclastoma of the lower jaw. What of the transferred researches must be conducted for the confirmation of the clinical diagnosis?
- X-ray examination, puncture biopsy of tumor
 - Microbiology research of puncture of the tumor
 - Ultrasonic research of the lower jaw, cytology research of a tumor
 - Thermovisiography research, Ultrasonic research of the lower jaw
 - X-ray and ultrasonic research of the lower jaw
33. The parents of an 8-year-old girl appealed with complaints of the absence of the 11 tooth. During the roentgenologic examination there was revealed the shade of high intensity with clear hill's contours. It consists of the conglomerations of the tooth tissues. What is the most credible diagnosis?
- Odontoma
 - Adamantinoma
 - Odontogenic fibroma
 - Follicle cyst
 - Radix cyst
34. The parents of a 13-year-old child appealed with complaints about the absence of the 45 tooth. Objectively: a convexity in the lower jaw from a vestibular surface in the area of the absent the 45 tooth is present. The surface in this area is smooth, painless on palpation. On the X- ray a shade of high intensity with clear contours is observed. There are numerous tooth-like forms on a background shade. What is the most credible diagnosis?
- Odontoma of the lower jaw
 - Ameloblastoma of the lower jaw
 - Odontogenic fibroma of the lower jaw
 - Follicular cyst of the lower jaw from the 45 tooth
 - Radicular cyst of the lower jaw from the 45 tooth
35. Osteblastoclastoma (cysts form) is diagnosed in a patient of 14 years old. The resorption of the bone tissue with the area of sclerosis around it was revealed on the X-ray. Multiple shallow cavities, horizontal resorption of dental roots in the tumorous area were present. What treatment is obvious to the patient?
- Surgical

- b. Chemotherapy
 - c. Symptomatic
 - d. Combined
 - e. Radial therapy
36. An 11-year-old child is complaining of the painless tumor presence of the mandible on the right. During palpation of the body of the mandible on the right Dupuytren's symptom is marked. The X-ray shows right lower jaw bone defect with clear edges 3x4 cm, which has 45 tooth follicle inside. Temporary teeth are intact. What is the most likely diagnosis?
- a. Osteoblastoklastoma
 - b. Cavernous haemangioma
 - c. Radicular cyst
 - d. Follicular cyst
 - e. Adamantinoma (solid form)
37. Parents of the 7-year-old boy turned into a children's dental clinic with complains of the 11th tooth's absence. During the objective examination the increased alveolar bone in the projection of 11th, 12th teeth was revealed. On X-ray the multiple shadows of various sizes that have teeth-like shape were determined. Their density meets the hard tooth tissues. Clarify the diagnosis.
- a. Odontoma of the maxilla
 - b. Follicular cyst of the upper jaw of the 11th tooth
 - c. Cementoma of the maxilla
 - d. Ameloblastoma of the upper jaw
 - e. Odontogenic fibroma of the maxilla
38. Osteoma has such forms:
- a. Central and peripheral
 - b. Intraossal and extraossal
 - c. Solid and soft
 - d. Osteoblastic and osteoclastic
 - e. Intraossal and osteoclastic
39. Please, find out the correct X-ray picture of odontoma:
- a. Dense radiopaque area with clear margins that is surrounded by halo of radiolucent area of about 1 mm
 - b. Round-shaped nidus of radiopacity with clear margins
 - c. Round-shaped nidus of radiopacity with unclear margins
 - d. Radiolucent nidus of bone destruction with radiopaque halo
 - e. Radiolucent nidus of bone destruction with unclear margins
40. Please, find out the roentgenologic picture of osteoid-osteoma:
- a. Radiolucent nidus with unclear margins which is surrounded by radiodense rim
 - b. Round-shaped radiopaque nidus with clear margins
 - c. Radiopaque nidus with unclear margins
 - d. Radiopaque nidus with clear margins which is surrounded by sclerotic rim
 - e. Radiopaque nidus with unclear margins with hyperostosis

41. Put the definition of the cyst:
- Tumour-like disease
 - Connective tissue tumour
 - Epithelial tumour
 - Tumour from tooth formative tissue
 - Vascular tumour-like disease
42. What is the definition of the pseudocyst?
- The cyst with lack of epithelial cells
 - The cyst with multilayered unceratinized epithelium
 - The cyst with multilayered ceratinized epithelium
 - The cyst with cuboidal epithelium
 - The cyst with squamous epithelium
43. What cyst of the jaw doesn't belong to odontogenic cysts?
- Nasopalatine cyst
 - Radicular cyst
 - Follicular cyst
 - Epidermoid cyst
 - Paradental cyst
44. What kind of cyst can be located in the apical area?
- Radicular
 - Follicular
 - Epidermoid
 - Paradental
 - Dermoid
45. Is cholesterol always observed in the radicular cyst cavity?
- Yes, always
 - Sometimes it is observed
 - No, never
 - It is not the main characteristic feature of the radicular cyst
 - Could be present, not always
46. The symptom of paresthesia of the lip is observed due to radicular cyst's growing on:
- The lower jaw only
 - The upper jaw
 - The upper and lower jaw
 - The symptom is never observed with the cyst growing
 - The frontal area of the upper jaw
47. The deformation of the lower jaw from the lingual side can be observed due to cyst presence on:
- Second, third molar area
 - Frontal area

- c. Bicuspid area
- d. Canine area
- e. First molar area

48. Put the definition of convergence:

- a. Approximation of the crowns of the teeth
- b. Disapproximation of the crowns of the teeth
- c. Approximation of the roots of the teeth
- d. Disapproximation of the roots of the tooth
- e. Root resorption

49. Put the definition of the divergence:

- a. Disapproximation of the roots of the teeth
- b. Approximation of the roots of the teeth
- c. Approximation of the teeth crowns
- d. Inclination of the tooth crown
- e. Resorption of the root

50. Supuration of the radicular cyst never leads to:

- a. Frontitis
- b. Sinusitis
- c. Osteomyelitis
- d. Abscess
- e. Periostitis

51. Put the definition of the osteodysplasy:

- a. An abnormality of development of bone tissue, due to restriction, perversion or arresting of osteogenesis on the proper stage of embryonic or postnatal developmental stage
- b. Pathologic process with functional and structural abnormalities of different parts of osseous system due to disturbances of trophic of osseous tissue
- c. Abnormalities of development of the osseous system
- d. Abnormalities of development of the osseous system after trauma of the bones
- e. All answers are correct

52. Put the definition of the osteodystrophy:

- a. Pathologic process with functional and structural abnormalities of different parts of osseous system due to disturbances of trophic function of osseous tissue
- b. Abnormalities of development of the osseous system
- c. Abnormalities of development of the osseous system after trauma of the bones
- d. An abnormality of development of bone tissue, due to restriction, perversion or arresting of osteogenesis on the proper stage of embryonic or postnatal developmental stage
- e. All answers are correct

53. Osteogenesis process which is observed in osteodysplasy can be damaged on the following its stage:

- a. Fibrous, cartilage, osteoid stages
 - b. Fibrous stage
 - c. Cartilage stage
 - d. Osteoid stage
 - e. There are no correct answers
54. Put the definition of Cherubism:
- a. Fibrous dysplasia of the lower jaw in the areas of the angles with genetic character
 - b. Systemic disease with polyostial bone involvement with thickening of zygomatic bones and lower jaw in the mental area and depression of the bridge of the nose
 - c. Fibro-Osseous dysplasia and hyperpigmentation of the skin and premature puberty
 - d. Abnormality of bone development of the skeleton
 - e. Osseous dystrophy of the upper jaw
55. Put the definition of McCune-Albright syndrome:
- a. Fibro-Osseous dysplasia and hyperpigmentation of the skin and premature puberty
 - b. Abnormality of bone development of the skeleton
 - c. Osseous dystrophy of the upper jaw
 - d. Fibrous dysplasia of the lower jaw in the area of the angles with genetic character
 - e. Systemic disease with polyostial bone involvement with thickening of zygomatic bones and lower jaw in the mental area and depression of the bridge of the nose
56. What treatment tactic should be chosen in case of Cherubism?
- a. No treatment
 - b. Surgical treatment
 - c. Conservative treatment
 - d. Conservative-surgical treatment
 - e. Criodestruction
57. The deformation of the face in patients with Cherubism can show the following changes with time:
- a. Decreases
 - b. Increases
 - c. Without any changes
 - d. Periods of decrease are changed by increased periods
 - e. No correct answers
58. Refer the epulis to the correct group of the diseases:
- a. Tumour-like neoplasm
 - b. Benign tumor
 - c. Malignant tumor
 - d. Inflammatory disease of periodont
 - e. Cyst of the jaw

59. What is the etiology of the epulis appearance?
- Trauma of the periodont due to overhanging fillings, absence of the contact point between the teeth, abnormal localization of the tooth in the dental arch etc
 - Inflammation of the periodont on the apex area of the tooth
 - Innate malformation of the periodont
 - Vascular abnormality of periodontal tissue
 - Idiopathic etiology
60. Epulis has the following forms:
- Fibrous, angiomatous
 - Hypertrophic, angiomatous
 - Fibrous, hypertrophic
 - Cystic
 - Sclerotic, angiomatous
61. Spicules are the distinguishing feature of the next tumour:
- Osteosarcoma
 - Osteoblastoma
 - Fibrosteoma
 - Osteoid-osteoma
 - Osteoma
62. What treatment should be provided for the patients with osteosarcoma?
- Resection of the jaw
 - Curettage of the pathologic nidus
 - Resection and curettage of the pathologic nidus
 - Radiotherapy
 - Palliative treatment
63. During palpation osteosarcoma is:
- Painfull
 - Painless
 - Fluctuation is present
 - Eggshell cracking symptom
 - Nontender
64. Set the definition of malignant tumour:
- Is a broad group of diseases involving pathological unregulated cell growth
 - Overgrowing of the cells that lacks the ability to invade neighboring tissue or metastasize
 - Inflammation of the cells
 - Pathological unregulated cell growth which never metastasize
 - Pathological unregulated cell growth which never penetrates into adjacent sound tissues
65. What are the main reasons which can lead to the malignant tumour development?
- All answers are correct

- b. Chemical
 - c. Biological
 - d. Physical
 - e. Mechanical trauma
66. What are the main distinguishing features of malignant tumor:
- a. All answers are correct
 - b. Infiltrative growth
 - c. Metastasis
 - d. Recurrence
 - e. Cachexy
67. What is the distinguishing feature of benign tumour?
- a. Resistance to radiotherapy and chemotherapy
 - b. Infiltrative growth
 - c. Quick growth
 - d. Metastasis
 - e. Cachexy
68. What is the distinguishing feature of malignant tumour?
- a. Cellular polymorphism
 - b. Expansive growth
 - c. Slow growth
 - d. Clear margins on an X-ray
 - e. Hyperplasia and dystrophy
69. What benign neoplasm does demonstrate an infiltrative growth?
- a. Hemangioma
 - b. Lipoma
 - c. Mixoma
 - d. Fibroma
 - e. Osteoma
70. What disease is characterized by cachexy, recurrence, immunodepression and infiltrative growth?
- a. Malignant tumour
 - b. Tumor-like disease
 - c. Benign tumour
 - d. Inflammation
 - e. Innate malformation
71. What disease is characterized by unclear margins on X-ray, presence of spicules and osteolysis?
- a. Malignant tumour
 - b. Benign tumour
 - c. Cysts
 - d. Epulis

- e. Tumour-like disease
72. Systemic manifestations (paraneoplastic syndrome) are distinguished for:
- a. Malignant tumour
 - b. Benign tumour
 - c. Tumour-like neoplasm
 - d. Cysts
 - e. Osteomyelitis
73. Systemic vasculitis, hematological derangements, metabolic disorders, suppression of immune system, neuropathy, skin manifestation are distinguished for:
- a. Paraneoplastic syndrome
 - b. Cachexy
 - c. Metastasis
 - d. Benign tumour
 - e. All answers are incorrect
74. Put the definition of excochleation:
- a. Removal of the contents of a cavity by scraping or curetting within sound tissues
 - b. Resection of the jaw within sound tissues
 - c. Partial resection of the jaw
 - d. Cystectomy
 - e. Cystotomy
75. Describe the method of incisional biopsy:
- a. Biopsy of a selected portion of a lesion
 - b. Biopsy in which tissue is obtained by puncture of a tumor
 - c. Biopsy of tissue removed by surgical cutting
 - d. Biopsy in which tissue is obtained by a punch
 - e. Biopsy in which tissue is obtained by application of suction through a needle attached to a syringe
76. Describe the method of excisional biopsy:
- a. Biopsy of tissue removed by surgical cutting
 - b. Biopsy in which tissue is obtained by a punch
 - c. Biopsy in which tissue is obtained by application of suction through a needle attached to a syringe
 - d. Biopsy in which tissue is obtained by puncture of a tumor
 - e. Biopsy of a selected portion of a lesion
77. Describe the method of aspiration biopsy:
- a. Biopsy in which tissue is obtained by application of suction through a needle attached to a syringe
 - b. Biopsy of tissue removed by surgical cutting
 - c. Biopsy in which tissue is obtained by a punch
 - d. Biopsy in which tissue is obtained by puncture of a tumor
 - e. Biopsy of a selected portion of a lesion

78. What additional diagnosis procedure must be performed before resection of the jaw due to neoplasm?
- Pathohistologic verification of the diagnosis (biopsy)
 - X-ray
 - MRI
 - CT Scan
 - Blood test
79. Put the definition of ablative principle of surgery which is used for malignant tumour treatment:
- Principle in surgery which prevents the recurrence and metastasis of malignant tumors by removing the tumor focus, along with the lymph vessels and the regional lymph nodes within the healthy tissue without touching the affected tissues
 - Set of measures that are used for wound cleaning from tumor cells remaining after removal of the tumor, including electrocoagulation, the use of drugs, etc
 - Electrocoagulation of the vessels in the wound
 - Antibiotic therapy after surgery
 - Radiotherapy
80. Malignant neoplasm should be differentiated with the next processes:
- All answers are correct
 - Benign tumours
 - Chronic productive osteomyelitis
 - Nonodontogenic periostitis
 - Precancerous processes
81. The child was born with a small capillary haemangioma on the cheek, and after treatment in place of the tumor the slightly noticeable cosmetic scar of the irregular shape was present. Which method of treatment was used?
- Excision
 - Cryodestruction with carbonic acid
 - Diathermocoagulation
 - Sclerotherapy of the tumor
 - Mechanical destruction
82. What type of neoplasm of blood vessels can be treated by dermabrasion and cryodestruction?
- Capillary hemangioma
 - Capillary lymphangioma
 - Cystic lymphangioma(hygroma)
 - Mixed hemangioma
 - Cavernous hemangioma

83. What medical solution is used for sclerotic therapy during the management of hemangioma?
- All answers are correct
 - Alcohol, novocaine, distilled water
 - Quinine-urethane solution
 - Calcium chloride
 - Prednisolone solution locally
84. What method of treatment is used for management of lipoma?
- Radical surgical excision
 - Chemiotherapy
 - Cryotherapy
 - Sclerotic therapy
 - Diathermocoagulation
85. Parents of 2 months old girl turned to the surgent with complaints on the presence of tiny red spot on the skin of the hairy part of the neck in their daughter. The diagnosis of capillary hemangioma was set. What should be the first doctor's tactic in this case?
- Conservative treatment (expectant management)till the age of 1,5-2 years
 - Surgical excision
 - Sclerotic therapy
 - Hormonal therapy
 - Laser therapy
86. In what clinical cases the method of primary embolisation of main vessels as preparation for the following surgical intervention is used?
- Cavernous and mixed hemangioma
 - Lipoma
 - Cavernous lymphangioma
 - Myoma
 - Dermoid cyst
87. What method of treatment should be chosen for management of capillary lymphangioma of the tongue?
- Wedge-like resection of the tongue
 - Sclerotherapy of the tongue
 - Conservative treatment
 - Laser therapy
 - Combined methods of treatment
88. What method of treatment is preferable for the management of "Vine spot" (nevus flammeus)in children?

- a. Laser therapy
 - b. Surgical excision
 - c. Conservative treatment
 - d. Sclerotherapy
 - e. Dermabrasion
89. For the diagnosis of large-sized and deep-localized hemangiomae the informative method of diagnosis is:
- a. All answers are correct
 - b. CT scan
 - c. MRI
 - d. Ultrasound diagnosis
 - e. Doppler echography
90. The symptom of "filling and devastation" is common for the next pathology:
- a. Cavernous hemangioma
 - b. Myoma
 - c. Pigmented nevus
 - d. Cavernous lymphangioma
 - e. Capillary hemangioma
91. During the fine-needle aspiration biopsy of neoplasm of soft tissue of the left submandibular area the sticky bright-yellowish liquid is obtained. What pathology can be suspected after this examination?
- a. Lymphangioma
 - b. Hemangioma
 - c. Lipoma
 - d. Epidermoid cyst
 - e. Dermoid cyst
92. In what clinical cases of hemangioma's treatment the systemic hormonal and interferon therapy is prescribed?
- a. When surgical or sclerotic treatment is not available and rapid growth of tumor is observed
 - b. Before surgical therapy
 - c. In cases of small-sized hemangioma
 - d. As the first stage of sclerotic therapy
 - e. All answers are correct
93. During the examination of the 12 years old girl the neoplasm in the area of upper third of the front surface of the sternocleidomastoideus muscle was revealed. The tumour is

with soft-elastic consistency, up to 3 cm in diameter, with limited mobility. Palpation is painless. The symptom of fluctuation is positive. Choose the method of treatment.

- a. Cystectomy
- b. Cystotomy
- c. Suturing of the tumour
- d. Punction of the tumour with sclerotic therapy
- e. Sclerotic therapy

94. The parents of 2 years old girl complain of the presence of painless deformation of the soft tissues of the temporal, parotid and buccal areas of the face on the left side in their daughter. The tumour has been represented since childbirth. The soft-tissue deformation does not differ from adjacent normal tissues by structure and color. There is a deformation of the upper alveolar process and its enlargement on the left side. The light brown spots of inside surface of the palms are present. Eosinophilia in the blood test is present. What tactic of treatment should be chosen?

- a. Multistage surgical treatment with interdisciplinary approach
- b. Sclerotic therapy before surgical intervention
- c. Method of expectation and dispanserisation of the patient
- d. Suturing of the tumor
- e. X-Ray therapy

95. What treatment tactic should be chosen if the tumour is located in the deep part of the parotid gland?

- a. Total parotidectomy
- b. Partial parotidectomy
- c. Subtotal parotidectomy
- d. Enucleation of the tumour
- e. All tactics are incorrect

96. What is the content of the ranula?

- a. Semitransparent viscous liquid of yellowish color
- b. Transparent liquid with cholesterol crystals
- c. Blood liquid
- d. Hemolyzed blood liquid
- e. Turbid liquid with whitish flakes

97. After the clinical and X-ray examination of a 15-year-old patient the osteoblastoclastoma of the lower jaw was diagnosed (a cystophorous form. The diagnosis is confirmed by the specific punctuate (a brown liquid). A tumor keeps outside a cortical plate which is thin. What method of treatment should be chosen in order to apply to this tumor?

- a. Exfoliation of the tumor simultaneously with a shell
- b. Cystectomy

- c. Curettage of the tumor within the limits of the healthy tissues
 - d. Cystotomy
 - e. Resection of the lower jaw with a bone plastic
98. A 12- year-old child is directed to a hospital with a suspicion of osteoblastoclastoma of the lower jaw. What of the transferred researches must be conducted for the confirmation of the clinical diagnosis?
- a. X-ray examination, puncture biopsy of tumor
 - b. Microbiology research of puncture of the tumor
 - c. Ultrasonic research of the lower jaw, cytology research of a tumor
 - d. Thermovisiography research, Ultrasonic research of the lower jaw
 - e. X-ray and ultrasonic research of the lower jaw
99. Osteoblastoclastoma (cysts form) is diagnosed in a patient of 14 years old. The resorption of the bone tissue with the area of sclerosis around it was revealed on the X-ray. Multiple shallow cavities, horizontal resorption of dental roots in the tumorous area were present. What treatment is obvious to the patient?
- a. Surgical
 - b. Chemotherapy
 - c. Symptomatic
 - d. Combined
 - e. Radial therapy
100. Please, find out the correct X-ray picture of odontoma:
- a. Dense radiopaque area with clear margins that is surrounded by halo of radiolucent area of about 1 mm
 - b. Round-shaped nidus of radiopacity with clear margins
 - c. Round-shaped nidus of radiopacity with unclear margins
 - d. Radiolucent nidus of bone destruction with radiopaque halo
 - e. Radiolucent nidus of bone destruction with unclear margins
101. What is the final period of the lower lip formation?
- a. The end of the first month of antenatal period
 - b. The end of the second month of antenatal period
 - c. The end of the third month of antenatal period
 - d. The end of the fourth month of antenatal period
 - e. The end of the fifth month of antenatal period
102. What is the final period of upper lip formation?
- a. The end of the second month of antenatal period
 - b. The end of the first month of antenatal period
 - c. The end of the third month of antenatal period
 - d. The end of the fourth month of antenatal period
 - e. The beginning of the fifth month of antenatal period

103. Latent cleft of upper lip is:
- Indrawn linear groove on the lip skin and notch on the red border of the lip
 - Defect of the soft tissue of the upper lip which does not reach the nostrils
 - Defect of the soft tissues of the upper lip which reaches the nostrils
 - Defect of the soft tissues of the upper lip from both sides
 - Defect of the bone tissue of the alveolar process in the frontal area
104. Incomplete cleft of upper lip is:
- Defect of the soft tissue of the upper lip which does not reach the nostrils
 - Indrawn linear groove on the lip skin and notch on the red border of the lip
 - Defect of the soft tissues of the upper lip which reaches the nostrils
 - Defect of the soft tissues of the upper lip from both sides
 - Defect of the bone tissue of the alveolar process in the frontal area
105. Complete cleft of upper lip is:
- Defect of the soft tissues of the upper lip which reaches the nostrils
 - Defect of the soft tissues of the upper lip from both sides
 - Defect of the soft tissue of the upper lip which does not reach the nostrils
 - Indrawn linear groove on the lip skin and notch on the red border of the lip
 - Defect of the bone tissue of the alveolar process in the frontal area
106. Parents complain of the incorrect pronunciation of certain sounds in their 7-year-old child. Objectively: the tongue is not mobile; it splits at the tip during pulling forward. The lower edge of tongue frenulum is attached in front of the excretory ducts of submandibular salivary glands. The frenulum is thin and transparent. The child is going to have the operation of frenulum elongation. What method of anaesthesia must be applied in this case?
- Infiltration anaesthesia
 - Mandibular anaesthesia
 - Torusal anaesthesia
 - Tuberal anaesthesia
 - Application anaesthesia
107. Parents of a 4-year-old child complain of speech defect, improper pronunciation of the sound "R". During the examination: the tongue is restricted in its movements, with moving it forward the tongue bends down. The lower edge of tongue frenulum is attached in front of the duct of submandibular salivary glands. Frenulum is thin, transparent. Specify timing of surgical intervention.
- Once diagnosed
 - After ending of the maxillo-facial bones growth
 - After the eruption of permanent incisors
 - After the formation of permanent dentition
 - After eruption of permanent molars
108. Parents of 2-month-old boy appealed on an occasion of the birth defect of the upper lip of their child. During the examination: the tissue defect of the upper lip of the crack form on the left is defined. The crack passes through all tissues of the lips and on

4 mm is not reaching the nasal passage. The integrity of the alveolar process and hard palate is retained. Formulate a preliminary diagnosis

- a. Congenital latent left-sided cleft of the upper lip
- b. Congenital apparent complete left-sided cleft of the upper lip
- c. Congenital apparent incomplete left-sided cleft of the upper lip
- d. Oblique cleft of the face
- e. Congenital apparent incomplete bilateral cleft of the upper lip

109. The 3-month-child with congenital upper lip defect was hospitalized in the clinic of the maxillofacial surgery. Objectively: asymmetrical face is due to unilateral cleft of the upper lip on the left. Cleft of hard and soft palate is missing. What age is the best for the surgical treatment of this child?

- a. At the age of 6-8 months
- b. At the age of 1-2 months
- c. At the age of 1-2 years
- d. At the age of 2-3 years
- e. At the age of 3-4 years

110. 2 months ago the boy was diagnosed with complete isolated innate both-sided cleft lip. General somatic diseases were not found. What age is optimal to cheiloplasty of the boy?

- a. 3 months
- b. 12 months
- c. 9 months
- d. 18 months
- e. 6 months

111. A child of 2 years old has cleft of the soft and hard palate but without the alveolar process involvement. What form of cleft is observed?

- a. Isolated incomplete cleft of the palate
- b. Combined incomplete cleft of the palate
- c. Isolated complete cleft of the palate
- d. Combined complete cleft of the palate
- e. Latent form of cleft palate

112. Put the definition of the incomplete cleft palate:

- a. Cleft of the uvula, soft palate and sometimes hard palate, but without alveolar process involvement
- b. Cleft of the uvula, soft palate and sometimes hard palate with alveolar process involvement
- c. Cleft of the soft, hard palate with alveolar process involvement but without cleft lip
- d. Cleft of the soft, hard palate with alveolar process involvement with cleft lip
- e. Cleft of the soft, hard palate without uvula involvement

113. Put the definition of the complete cleft palate:

- a. Cleft of the uvula, soft palate and sometimes hard palate with alveolar process involvement

- b. Cleft of the uvula, soft palate and sometimes hard palate, but without alveolar process involvement
 - c. Cleft of the soft, hard palate with alveolar process involvement but without cleft lip
 - d. Cleft of the soft, hard palate with alveolar process involvement with cleft lip
 - e. Cleft of the soft, hard palate with uvula involvement
114. What is the reason of the cleft palate formation?
- a. Failure of fusion of the lateral palatine processes, the nasal septum and/or the median palatine processes
 - b. The failure of fusion of the two medial nasal processes and the frontonasal process within the embryogenesis
 - c. The failure of fusion of mandibular prominences
 - d. The failure of fusion frontonasal prominence with mandibular prominences
 - e. The failure of fusion maxillar and mandibular prominences
115. What is the reason of the cleft lip formation?
- a. The failure of fusion of the two medial nasal processes and the maxillary processes within the embryogenesis
 - b. Failure of fusion of the lateral palatine processes, the nasal septum and/or the median palatine processes
 - c. The failure of fusion of mandibular prominences
 - d. The failure of fusion frontonasal prominence with mandibular prominences
 - e. The failure of fusion maxillar and mandibular prominences
116. A submucous cleft of the soft palate is characterized by:
- a. The midline deficiency or lack of muscular tissue and incorrect positioning of the muscles
 - b. Bony defect in the midline or center of the bony palate
 - c. Bony defect of the alveolar process
 - d. Bony defect of the hard palate and alveolar process
 - e. There is no correct answers
117. A submucous cleft of the hard palate is characterized by:
- a. Bony defect in the midline or center of the bony palate, bifid uvula can be present
 - b. Bony defect of the hard palate and alveolar process
 - c. The midline deficiency or lack of muscular tissue and incorrect positioning of the muscles
 - d. Bony defect of the alveolar process
 - e. Bony defect of the primary palate
118. Classic clinical triad of bifid uvula, a furrow along the midline of the soft palate, a notch in a posterior margin of the hard palate are distinguished features of:
- a. Submucous cleft palate
 - b. Incomplete cleft palate
 - c. Unilateral complete cleft lip and palate
 - d. Bilateral complete cleft lip and palate
 - e. Latent cleft lip

119. The parents of 2-years old child complain of an abnormal nasal speech in their child, persistent middle ear diseases, feeding/swallowing difficulties. Objectively: bifid uvula and notch in the posterior margin of the hard palate are present. Clarify the diagnosis:
- Submucous cleft palate
 - Incomplete cleft palate
 - Complete cleft palate
 - Unilateral complete cleft lip and palate
 - Latent cleft lip
120. The time for surgery intervention of cleft palate is:
- 9-18 months
 - After 10 weeks
 - 3-4 years
 - Immediately after setting the diagnosis
 - 6-9 years based on dental development
121. A 6-year-old boy got a trauma of teeth. Objectively: intact crowns of the 81 and 71 teeth are shorter than neighboring. There is the mobility of the II degree, percussion reaction is mild. On the X- ray: the resorption of the 81 and 71 roots is observed on the 1/3. The roots are deep in the spongy substance. Choose the optimal method of treatment in this case:
- Extraction of teeth 71, 81
 - Splintage of teeth 71 and 81
 - Replacement and splintage of teeth 71 and 81
 - Replantation of teeth 71 and 81
 - Observation
122. A 9-year-old child was directed to the pedodontic department because of the trauma of the upper teeth. Diagnosis is the complete dislocation of the tooth 11. What treatment method should be chosen?
- Replantation of the tooth 11
 - Orthodontic treatment of the tooth 11
 - Prosthetic treatment of the tooth 11
 - Implantation of the tooth 11
 - Extraction of the tooth 11
123. During the extraction of the 46 tooth doctor did not fix the lower jaw. During the operation the patient felt the pain in the left acoustic duct area. The jaw was displaced to the left side. The attempts to close the mouth were impossible. What complication was observed?
- One-sided dislocation of the articular heads from TMJ capsule
 - Bilateral dislocation of the articular heads from TMJ capsule
 - Fracture of the branches of lower jaw
 - Fracture of the articular process of the mandibula
 - Fracture of the corner of the lower jaw

124. 5. A child of 14 years old complains of the pain of the left side area of the lower jaw which increases during mastication. Anamnesis morbi: the trauma was occurred 2 days ago. On the basis of clinic, objective and roentgenologic data the followed diagnosis has been made: opened fracture of the lower jaw between the 44 and 45 teeth. Choose the method of medical immobilization of the jaw. .
- Teeth splinting
 - Port splint
 - Rudko appliance
 - Gingival plate
 - Temporal immobilization
125. A child of 4 years old got a trauma of the face two hours ago. The diagnosis was the intrusive dislocation of the 61 tooth. What should be the doctor's manipulations?
- Observation
 - Endodontic treatment of the 61 tooth
 - Extraction of the 61 tooth
 - Reposition of the 61 tooth
 - Splintage of the 61 tooth
126. A 5-year-old child got the trauma of teeth. Objectively: the crowns of the 51 and 61 teeth are shorter than neighboring ones for 1,2 mm. The mucosa in the area of the 51 and 61 teeth is blushed and swollen. On the X-ray: the periodontal ligament in the apical area of the roots of 51 and 61 teeth is absent. The apexes of the 51 and 61 teeth are located deeply in the spongy substance of the bone. What tactic of treatment will be optimal?
- Extraction of the 51 and 61 teeth
 - Ligature splintage
 - Replantation
 - Observation
 - Reposition of the 51 and 61 teeth
127. A child is admitted to the hospital with a trauma of maxillofacial area. The possibility of tetanus infection in the wound is not excluded. What time after the injury the tetanus vaccine should be administered?
- At the time of appeal
 - Within 12 hours
 - During the first day
 - Within 2 days
 - Within a week
128. A child of 9 years old was taken to the clinic with complaints of pain in the upper jaw after fall from a height. Objectively: 12, 11, 21 teeth are mobile; teeth close at bite; hemorrhage and soreness are on the transition fold. The diagnosis is the fracture of alveolar process in the area of 12, 11, 21 teeth. Select the method of treatment.
- Splinting of a smooth tire-bracket splint
 - Simple ligature splinting
 - Splintage with Tigershtedt splint
 - Sling bandage
 - Port's splint

129. A child aged 15 months was diagnosed with intrusive luxation of the 51 tooth. What the doctor's tactic should be?
- Observation of self-eruption of the injured tooth
 - Extraction of the 51 tooth
 - Reposition of the 51 tooth
 - Splintage of the 51 tooth
 - Replantation of the 51 tooth
130. The child of 13 years old is sent to in-patient department with bilateral fracture of the mandible in the mental and angle region. On the X-ray the 34 tooth is located in the line of fracture. 4 days ago the child underwent trauma. Objectively: in the mental area the swelling of mucosa and secretion of pus in the line of the fracture are observed. What is the best doctor's tactic in this case? A. B. C. D. E.
- Extraction of the 34 tooth, jaw fragments fixation, medical supplies
 - Reposition of the jaw fragments with preservation of the 34 tooth, medical supplies
 - Reposition of the jaw fragments, replantation of the 34 tooth
 - Reposition the jaw fragments, fixation of the 34 tooth by ligature splinting
 - Medical supplies therapy, fixation of the 34 tooth by ligature splinting
131. A 14 years old child is complaining of pain in the left lower jaw, which increases during chewing, disturbances during closing of teeth. From anamnesis: the child was injured two days ago. Based on clinics, objective and radiological data the following diagnosis was clarified: open fracture of the lower jaw between 44 and 45 teeth. Choose a method of treatment for jaw immobilization.
- On-teeth splintage
 - Temporary immobilization
 - Porte splint
 - Apparatus of Rudko
 - Gum plate
132. A 10 years old boy on the fourth day after injury complains of pain in the left half of face, limited mouth opening. Objectively: significant soft tissue swelling of the left infraorbital and parotid areas. Bite is not changed. Mouth opening is limited to 1.5 cm. Attempt of movement or opening of the lower jaw is painful and "mechanical" barrier is felt. During the palpation of the area of left zygomatic arch the invagination of the bone and mild pain are present. Clarify the preliminary diagnosis:
- Fracture of the left zygomatic arch
 - Fracture of the left condylar process of the lower jaw bone
 - Traumatic arthritis of the left temporo-mandibular joint
 - Subbasal fracture of the upper jaw
 - Medium fracture of the upper jaw
133. The 10 years old girl felt face-down over the cross-bar on the PT lesson. Objectively: symmetrical face, mouth is open, closing of it is not possible. Lower jaw

moved to the left. During palpation: right articular head is not detected in the articular fossula. What is the probable diagnosis?

- a. Right-sided dislocation of the lower jaw
- b. Mandible fracture in the right corner area
- c. Contusion of the soft tissues in the area of the lower jaw fracture
- d. Fracture of the right coronary process
- e. Fracture of the left condyle process

134. In a child of 7 year old a full dislocation of the 11 tooth was revealed. According to anamnesis the trauma of the 11 tooth have been occurred 24 hours ago. Tooth was brought separately. Objectively: tooth socket is slightly hyperaemic, bone margins are unaffected. Socket is filled with a blood clot. Select an optimal plan of treatment.

- a. Replantation of tooth 11 with the previous root filling
- b. Replantation of tooth 11 with the following root filling
- c. Tooth extraction
- d. Reposition and fixation of the tooth 11
- e. Suturing of the socket

135. A 13 year old child underwent impact trauma of upper incisors. The child turned to the dentist in 40 minutes time after injury. During examination it was found that 11 and 21 teeth are intruded into the alveolar bone to the half of the crowns. Minor bleeding from the gums around the teeth was noted. Visually integrity of the mucosa is not disrupted. Pathological mobility of the 11 and 21 and adjacent teeth and alveolar bone were not found. There are no signs of teeth fractures on X-ray. What is the optimal tactic of dentist in this case?

- a. Extrusion of teeth 11 and 21 in the dental arch to the occlusal surface level, splintage, observation and determination if further therapiutic tratment is nessecary with EOD in a one month time
- b. Observation, EOD, antiinflammatory therapy and physiotherapy
- c. Replantation of teeth 11 and 21 after root canals filling
- d. Extrusion of teeth 11 and 21 to the tooth arch, ligation, observation, EOD
- e. teeth 11 and 21 extraction

136. A child of 6 year old is delivered to Children's Hospital by ambulance with a diagnosis: contusion-lacerated wound of the forehead. Maxillofacial surgeon was invited for consultation of the case. She examined the wound, produced an initial surgical debridement and primary sutures. Child was refered to further treatment to the regional clinic. What procedure is absolutely necessary to do in such cases?

- a. Consultation of neurosurgeon
- b. Hospitalization
- c. Sanation of the oral cavity
- d. Antimicrobial therapy
- e. Bed regime

137. A 5-years-old child was bitten by a dog two days ago. Diagnosis - bitten cheek wound. Parents weren't refer for the help in time. Objecively: the purulent inflammatory process of the wound is present. What type of surgical debriment should be done?

- a. Secondary debriment
- b. Initial early debriment

- c. Initial late debriment
 - d. Surgical debriment is not required
 - e. Initial delayed debriment
138. A 4-years-old girl was bitten by a dog in the area of the upper lip. What solution of the listed below is primarily to process the wound?
- a. 10% solution of soap
 - b. 0,002% chlorhexidine solution
 - c. 1% solution of hydrogen peroxide
 - d. 1:5000 potassium permanganate solution
 - e. 3% solution of soda
139. The 3 years old child got burns from boiling water. There are different size blisters fulfilled with clear liquid on the hyperemic and swollen background of the skin. Define degree of skin burn.
- a. II degree
 - b. I degree
 - c. III degree - level A
 - d. III degree - level B
 - e. IV degree
140. A 13 years old patient was injured of the middle face area. The girl addressed to the doctor with complains of pain, soft tissue swelling at the side of the upper jaw, pain during closing the mouth. The examination revealed the mobility of nasal bones, significant soft tissue swelling of the left zygomatic area, hemorrhage of the sclera eyes tissue, a symptom of a "step" along the edge of both eye sockets, nosebleeds, open bite, the lengthening of the middle part of the face. Put the diagnosis:
- a. Fracture of the upper jaw of the Le Fort III
 - b. Fracture of the upper jaw Le Fort II
 - c. Fracture of the upper jaw Le Fort I
 - d. Nasal bones fracture
 - e. Skull base fracture
141. After the performing of torus anesthesia with the 4 ml of 2% novocaine the patient complained on hard breathing. Objectively: upper and lower lips, mucosa of the larynx and the oral cavity became swelled and blushed. What complication was observed?
- a. Quincker's edema
 - b. Coma
 - c. Collapse
 - d. Anaphylactic shock
 - e. Intoxication by anaesthtetics
142. A 6 years old patient is refered to the dental office. The general condition of the patient: an average weight, body temperature is up to 38.5°C. Objectively: asymmetry of the face due to the slight swelling in the lower third of the right cheek and the submandibular area on the right side. The mouth opening is free. There is the

deformation of the alveolar process in the area of 83, 84,85 teeth on both sides. The teeth are mobile, percussion is sharply positive. Clarify the diagnosis:

- a. Acute odontogenic osteomyelitis
- b. Phlegmon of submandibular triangle
- c. Abscess of jaw-tongue groove
- d. Hematogenic osteomyelitis
- e. Acute suppurative periostitis

143. A child of 13 years old complains of changing of the colour of the upper tooth. 4 years ago there was a trauma of the frontal area on the upper jaw. Objectively: the tooth 11 is intact, percussion reaction is painless. The X-ray shows: the bone dilution near the root apex of the 11 tooth. It has the rounded form and the clear edges. What is the most reliable diagnosis?

- a. Odontogenic cyst of maxilla
- b. Exacerbation of granulomatosis periodontitis
- c. Chronic fibrotic periodontitis
- d. Chronic granulomatous periodontitis
- e. Chronic granulating periodontitis

144. The girl of 3 years old has the following diagnosis: acute odontogenic periostitis of the lower jaw from the 74 tooth. It is necessary to conduct periostotomy and extract the 74tooth. The child is nervous. Choose the optimal type of anesthesia:

- a. Intravenous general anesthesia
- b. Mandibular anesthesia
- c. Intubation general anesthesia
- d. Mask general anesthesia
- e. Central anesthesia

145. A 13-year-old child had an acute odontogenic osteomyelitis of 36 tooth which was complicated by an abscess of pterygo-mandibularis area. The 36 tooth must be extracted. It is necessary to expose a pterygo-mandibularis area. What type of the anesthesia should be chosen?

- a. General anesthesia
- b. Tuberal and palatal anesthesia
- c. Bershe-Dubov central anesthesia
- d. Infiltration anesthesia
- e. Torus anesthesia

146. The mother of a 5-year-old child complains of the tooth decay of the upper and lower jaw. Teeth are painful during meals. Objectively: the general condition is satisfactory. A child is emotionally unbalanced. The face is symmetrical. The 54, 64, 74, 75 teeth are destroyed to the level of the gums. There are fistulas with purulent discharge from the vestibular side of the gingiva in the area of the 54, 75 teeth. What is the best method of anesthesia?

- a. General anesthesia
- b. Local anesthesia
- c. Application anesthesia
- d. Infiltration anesthesia
- e. Tuberal and mandibular anesthesia

147. A 5-year-old girl is ill for 3 days with fever and worsening of the general condition. Objectively: the overall condition is moderate, the body temperature is 38, 6 ° C, and the girl is pale and excited. The tongue is furred, bad breath is noted. There is the hyperemia and swelling of the mucous membrane of gums in the area of the 83, 84, 85 teeth on both sides of the alveolar ridge. These teeth are moving, percussion is sharply positive, and the 84 tooth is sealed. What is the most likely diagnosis?
- Acute odontogenic osteomyelitis of the mandible
 - Acute odontogenic periostitis of the mandible
 - Acute nonodontogenic periostitis of the mandible
 - Suppurating of the odontogenic inflammatory cyst of the mandible
 - Acute sialadenitis of the submandibular salivary gland
148. The boy is 1 month old. At the mesial margin of the right lower eyelid the wound with purulent discharge is revealed. The boy fell ill suddenly, the temperature has rose to 40 0C. General condition is severe. On the second day of the disease the infiltrate the inner edge of eye socket and cheek was occurred. The skin over it is hyperaemic, fluctuation is not defined. Eye gap is narrowed. The pus excretes from the right nasal passage. There is an infiltration on vestibular site of alveolar process and on the palate. Mucosa of transitional fold over it is hyperemic and the fluctuation is obvious. What is the most appropriate diagnosis?
- Acute hematogenous osteomyelitis
 - Acute dacryocystitis
 - Flegmon of orbita on the right
 - Acute sinusitis
 - Acute serous periostitis
149. A boy 12 years old complains of increasing temperature to 38.5 C, difficulty during opening the mouth, pain during swallowing, eating, talking. OBJECTIVE: the skin is pale; the face is slightly asymmetrical due to swelling in the left submandibular area. Opening of the mouth is limited to 12 mm, painful. Swelling of tissue in the left sublingual area, left submandibular- lingual groove is infiltrated, swollen, painful during deep palpation; mucosa in this area is hyperaemic. The crown of 36 tooth is totally destroyed. What is the diagnosis?
- Odontogenic abscesses of submandibular-lingual area caused from 36 tooth
 - Acute odontogenic osteomyelitis of the lower jaw due to inflammatory process in the 36 tooth
 - Acute odontogenic periostitis of the lower jaw due to inflammatory process in the 36 tooth
 - Odontogenic phlegmon of the left pterygo-mandibular area
 - Odontogenic phlegmon of the left submandibular area
150. Parents of the 6 years old boy complained of increased body temperature, the worsening of the general condition of their child, painful swelling of the right cheek. Objectively: paleness of the skin, facial asymmetry due to swelling of the soft tissues of the right buccal area. Alveolar bone in the area of the 55, 54 and 53 teeth is thickened on both sides, painful during palpation. Indicated teeth are partially destroyed by caries, movable (II-III degree), the pus releases from the gingival pockets. Indicate the most likely diagnosis.

- a. Acute odontogenic osteomyelitis of the maxilla from 53, 54, 55 teeth
 - b. Acute purulent odontogenic abscess of the maxilla from 53, 54, 55 teeth
 - c. Odontogenic abscess of the buccal area from 53, 54, 55 teeth
 - d. Acute odontogenic serous periostitis from 53, 54, 55 teeth
 - e. Odontogenic phlegmon of the buccal area from 53, 54, 55 teeth
151. The mother of 5 years old child appeals to the dentist with complaints of the child's bad feeling, fever, and pain in the lower jaw. Objectively: moderate condition, body temperature rises up to 39°C. Facial asymmetry is due to swelling of soft tissues and infiltration of the right mandible area. The 84.85 teeth are changed in color, sealed. Percussion is painful; transition fold is flattened at the area of 83,84,85,46 teeth. Mucosa is hyperemic from the vestibular and lingual side. Put the diagnosis.
- a. Acute odontogenic osteomyelitis of the mandible
 - b. Acute suppurative periostitis of the mandible
 - c. Acute serous periostitis of the mandible
 - d. Exacerbation of chronic periodontitis
 - e. Festering cyst of inflammatory origin
152. During providing of the local anesthesia (2 ml of 10 % lidocaine), a 9 years old girl screamed, lost consciousness, generalized convulsions began. Skin - pale, bluish. It's impossible to measure the pulse because of convulsions. Preliminary diagnosis:
- a. Lidocaine intoxication
 - b. Angioneurotic edema
 - c. Anaphylactic shock
 - d. Bronchial obstruction
 - e. Fever convulsions
153. After acute purulent mastitis of the mother, a swelling appeared on the left infraorbital and zygomatic areas in her 2-month-old baby. Hyperemia of the left half of the baby's face is present. The temperature rises up to 39° - 40°C. Suppuration of the nose is noted. What diagnosis can be assumed?
- a. Acute hematogenous osteomyelitis
 - b. Phlegmon of infraorbital area
 - c. Acute sinusitis
 - d. Acute odontogenic osteomyelitis
 - e. Acute purulent periostitis
154. A 15- year-old child complains of swelling of the mandibular process, enlargement is slightly painful. Solid lymph nodes are integrated into the "packages". There is a region of bone resorption with clear margins, containing small sequestra on radiographs of the mandible process. Mantoux test is 12 mm in diametr. What is the most probable diagnosis?
- a. Tuberculosis of the mandible process
 - b. Actinomycosis of the mandible
 - c. Chronic osteomyelitis of the mandible
 - d. Acute osteomyelitis of the mandible
 - e. Ewing's sarcoma

155. A 10-years-old child suffers from the edema and pain on the right cheek. The general weakness and the increase of the temperature are present. Objectively: tenderness to the palpation of the lower third of the right cheek. The skin is slightly swelled above and undertakes in a fold. The colour is without changes. Intraoral examination: the 46 tooth is blasted by caries. The cavity of the tooth is opened, probing is unpainful, percussion is slightly positive. Transitional fold in the area of the 46, 85 and 84 teeth is smoothed out, swelled. The fluctuation is absent. What is the most reliable diagnosis?
- Acute serous periostitis of the lower jaw
 - Suppuration of the radicular cyst
 - Acute purulent periostitis of the lower jaw
 - Acute odontogenic osteomyelitis of the lower jaw
 - Suppuration of the follicular cyst
156. A girl of 2 years old has the temperature 38.5 ° C, a slight swelling under the jaw from the right side is present. She was ill for 5 days, when a small mobile nodule appeared under the lower jaw on the right. Objectively: the common state of the child is satisfactory. The face is asymmetric because of a slight swelling on the right submandibular area. The skin is blushed and doesn't plicate. The poured edema on the right submandibular area is observed. It spreads to the upper part of the neck on the right side. The edema is painful, solid. The teeth are healthy. What is the most reliable diagnosis?
- Acute nonodontogenic submandibular lymphadenitis
 - Acute sialoadenitis of the right submandibular salivary gland
 - Adenophlegmon of the right under the mandibular area
 - Chronic osteomyelitis of the lower jaw on the right
 - Acute festering periostitis of the lower jaw
157. 12 hours ago a slight swelling of the left cheek appeared in a 13- year-old boy. During the examination the asymmetry of the face was observed. It was caused by the swelling of the soft tissues of the left cheek. There is tenderness to the palpation. During the intraoral examination hyperemia and edema of mucous membrane of gums on the vestibular side in the apex area of the 26 tooth was found out. The 26 tooth is blasted, percussion is sharply positive, the 26 tooth is mobile (I degree). What is the most credible diagnosis?
- Acute odontogenic periostitis
 - Chronic odontogenic periostitis
 - Odontogenic acute lymphadenitis
 - Odontogenic acute osteomyelitis
 - Odontogenic chronic osteomyelitis
158. A diagnosis has been set to the patient: odontogenic phlegmon of the right submandibular area. Define the operative access for drainage of the inflammation of the infectious etiology:
- Section in submandibular area on 2 cm below from the edge of the jaw
 - Section in a right under lingual area
 - Section along the edge of the jaw
 - Section of 5 cm in length that wraps the corner of the jaw
 - Alveolaris section

159. A diagnosis has been made to the child: abscess of a hard palate. What type of the incision is correct in this case?
- Triangular section in the area of the hard palate
 - To conduct the puncture of an abscess
 - The section goes parallel to the raphe of the hard palate
 - The section in transversal direction
 - Line section goes perpendicularly to the raphe of the hard palate
160. A girl of 12 years old complains of a slight swelling and pulsating pain in the area of the lower jaw from the right side. The temperature is 39°C. Objectively: the considerable asymmetry of the face because of the swelling in the area of the lower jaw from the right side and submandibular triangle is noted. Opening of the mouth is painful and restricted. A crown of the 46 tooth is blasted. There is a tenderness to percussion of the 46, 45, 44 teeth which are mobile. Mucosa of the lower jaw from the right side is sharply blushed, bilateral deformation of mandibular process is clearly marked, and palpation of it is painful. Lymphatic nodes are enlarged and painful during the palpation. What is the most reliable diagnosis?
- Acute odontogenic osteomyelitis of the lower jaw
 - Osteogenic sarcoma
 - Acute bacterial submaxillaritis
 - Acute periostitis of the lower jaw
 - Odontogenic submandibular phlegmon