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Dentogist

MCQs in Dentistry

With Explanatory Answers

Clinical Sciences



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7th Edition

JAYPEE

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2 Prosthodontics

COMPLETE DENTURE

1. Atwood's classification order IV corresponds to: *(COMEDK 2012)*

a. A knife edged ridge
b. High well rounded
c. Low well rounded
d. Depressed

2. Posterior mandible resorbs at a rate approximately times faster than the anterior mandible: *(COMEDK 2012)*

a. 2 times
b. 4 times
c. 6 times
d. 8 times

3. Acute angle between soft palate and hard palate is present in all, *except*: *(MHCET 2012)*

a. Class I
b. Class II
c. Class III
d. Class IV

4. Veau's classification of a clefts of the hard and soft plate extending up to the incisive foramen is classified as: *(MHCET 2012)*

a. Class I
b. Class II
c. Class III
d. Class IV

5. 'Bead technique' is: *(MHCET 2012)*

a. Addition of monomer to polymer in small increment
b. Cold mold seal technique
c. Depression created along borders of framework drawn on the cast
d. Sterilization of files

6. Temperature of water used in water cooling trays for agar: *(MHCET 2012)*

a. 12–15 degree C
b. 15–18 degree C
c. 18–21 degree C
d. 21–25 degree C

7. The retromolar pad must be covered by the denture base because it aids in: *(COMEDK 2013)*

a. Retention only
b. Retention and support
c. Stability only
d. Stability and support

8. Which of the following statement is false? *(COMEDK 2013)*

a. The term 'pear-shaped' pad was coined by Craddock
b. Mucosa overlying pear-shaped pad is stippled
c. Retromolar pad lies posterior to pear-shaped pad
d. Mucosa overlying pear-shaped pad is not stippled

9. The mandibular labial frenum is a fibrous band that can be influenced by: *(COMEDK 2013)*

a. Incisivus
b. Orbicularis oris
c. Caninus and incisivus
d. Incisivus and orbicularis oris

10. Which of the following is not a mouth temperature wax? *(COMEDK 2013)*

a. Adaptol
b. Korrecta type 1
c. HL physiologic paste
d. Iowa wax

11. The hard palate is covered by: *(COMEDK 2013)*

a. Nonkeratinized mucosa
b. Keratinized mucosa
c. Orthokeratinized mucosa
d. Parakeratinized mucosa

12. The medial confluence of stress lines on the medial surface of the ramus that represents the racial growth of surface of the mandible is known as: *(COMEDK 2013)*

a. Xi point
b. Pm point
c. Me point
d. Eva point

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13. Tissue conditioning materials are: *(COMEDK 2013)*

a. Elastomers
b. Elastopolymers
c. Polymers
d. Impression plaster

14. The mean denture bearing area of edentulous mandible and maxilla respectively is: *(COMEDK 2014)*

a. 14 cm^2 and 24 cm^2
b. 24 cm^2 and 14 cm^2
c. 14 mm^2 and 24 mm^2
d. 24 mm^2 and 14 mm^2

15. Which of the following are stress bearing area? *(COMEDK 2014)*

a. Buccal shelf area, incisive papilla and palatine
b. Slopes of residual ridge, palatine rugae and midpalatine raphe
c. Incisive papilla, slope of the residual ridge and crest of the residual ridge
d. Slope of residual ridge, buccal shelf area and hard palate

16. Which color of articulating paper is used for diagnosis of premature contacts in eccentric relations? *(COMEDK 2014)*

a. Green
b. Blue
c. Red
d. Pink

17. While making impression of flabby ridges tissues on maxillary ridge for complete prosthesis. Care is taken to? *(COMEDK 2014)*

a. Use mucostatic impression technique
b. Use selective pressure technique of impression making
c. Use a close filling tray
d. Follow normal procedures

18. Adequate interocclusal rest space required for the comfort of the patient and health of the tissues is: *(COMEDK 2014)*

a. 1–8 mm
b. 2–6 mm
c. 5–8 mm
d. 2–4 mm

19. Which of the following measures the vertical dimension when the mandible and the muscle involed are in the physiologic function of speech: *(MHCET 2014)*

a. Freeway space
b. Leeway space
c. Closest speaking space
d. Primate space

20. Which of the following is an example of intraoral tracer? *(MHCET 2014)*

a. Height
b. Philips
c. Stansbery
d. Messerman

21. When closure in intercuspal position is attained during mastication, movement stops for about ---- msec before another cycle begins? *(MHCET 2014)*

a. 194
b. 94
c. 394
d. 594

22. Extraoral tracing method is grouped in the following for recording centric relation for complete denture patients: *(MHCET 2014)*

a. Functional method
b. Close mouth method
c. Static method
d. None of the above

23. Curve of Wilson used in complete denture: *(AIIMS May 2014)*

a. It is not used for arrangement of posterior teeth
b. Compensatory curve which helps in setting posterior teeth
c. Helps in alignment of posterior teeth along the inward pull of masseter
d. None

24. Which is true about immediate denture? *(AIIMS May 2014)*

a. Maxillary posterior teeth are extracted 1st and then on the day of denture insertion extract the remaining anterior teeth
b. All teeth extracted on the same day
c. Anteriors extracted first and on the day of denture insertion posterior teeth are extracted
d. None

25. Which of the following is true of permissive occlusal splint? *(AIIMS May 2014)*

a. Unilateral balance form of occlusion in CR and group function in lateral excursion
b. Bilateral balance form of occlusion in CR and group function in lateral excursion
c. Permits free movement of teeth
d. Unilateral balance form of occlusion in CR and canine guidance in lateral excursion

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26. Which is not used to measure vertical dimension of the face? *(AIIMS May 2012)*
a. Willis gauge
b. Verneir caliper
c. Boley's gauge
d. Boos biometer

27. Vertical facial height is measured through: *(AIIMS May 2012)*
a. Willis gauge
b. Boley's gauge
c. Boos bimeter
d. All of the above

28. Freedom of centric or discrepancy between centric relation and centric occlusion correlates with: *(AIIMS May 2012)*
a. 0.15–0.25 mm
b. 0.20–0.40 mm
c. 0.5–1.5 mm
d. 1–2 mm

29. Salts of Gantrez: *(AIIMS Nov 2012)*
a. Denture adhesive
b. Bonding agent
c. Denture cleanser
d. Antiflux

30. Which type of teeth are used in patient suffering from Parkinsonism? *(AIIMS Nov 2012)*
a. Anatomic
b. Semianatomic
c. Nonanatomic
d. Scissor teeth

31. While recording postpalatal seal patient is asked to look down because: *(AIIMS Nov 2012)*
a. To prevent flow of impression material
b. To activate muscles of soft palate
c. To activate muscles of soft palate and pharynx
d. a and b

32. For taking final impression tray should be inserted: *(AIIMS Nov 2012)*
a. Anteriorly first
b. Posteriorly first
c. Both together
d. Insignificant

33. Posterior teeth placed on lingual side of edentulous mandible leads to all *except*: *(AIIMS Nov 2014)*
a. Tongue cramping
b. Gagging
c. Speech problem
d. Increased forces on ridge

34. Fovea palatine represents: *(AIPGEE 2012)*
a. Palatine termination of maxillary denture
b. Opening of minor salivary gland ducts
c. Closure of mid-palatine raphe
d. Opening of greater palatine canal

35. While recording the condylar guidance using the three pin articulator, the incisal pin is kept: *(AIPGEE 2012)*
a. Removed from the articulator
b. In contact with the articulator
c. Out of contact
d. Insignificant

36. Masseteric notch is due to: *(AIPGEE 2012)*
a. Superior constrictor on buccinator
b. Superior constrictor on masseter
c. Masseter on buccinator
d. Buccinator on masseter

37. Lingual flange of mandible complete denture should be: *(AIPGEE 2012)*
a. Concave
b. Convex
c. Straight and short
d. Convex with extension toward dorsum of tongue

38. Alignment of teeth from anterior to posterior is: *(AIPGEE 2012)*
a. Curve of von Spee
b. Curve of Wilson
c. Curve of Monsoon
d. Pleasure curve

39. The sound most commonly affected due to altered position of maxillary anterior teeth: *(AIPGEE2012)*
a. F
b. V
c. A
d. S

40. A denture wearing patient has difficulty in swallowing is due to: *(AIPGEE 2012)*
a. Insufficient occlusal clearance
b. Insufficient vertical dimension
c. Increased vertical dimension of rest
d. Reduced vertical dimension of occlusion

41. Occlusal correction during post insertion can be best carried by: *(AIPGEE 2012)*
a. Rearticulated with a new series of jaw relation
b. Rearticulated using original jaw relation record
c. Equilibrated in the patient's mouth
d. Spot ground in the patient's mouth

42. A patient reports after 3 months of wearing complete dentures and complains of gagging while wearing, Treatment be: *(AIPGEE 2012)*
a. Medication
b. Removing all mechanical and biological factors responsible for it
c. Psychiatric consultation
d. Any one of the above or combination of it

43. Midline fractures of the maxillary dentures are mainly due to: *(AIPGEE 2012)*
a. Teeth set too far buccally
b. No relief in midpalatal line
c. Ridge resorption
d. Porosities in denture

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44. Resorption in mandible: *(AIPGEE 2012)*
a. Centripetal
b. Centrifugal
c. Centripetal or centrifugal depending on the stage of resorption
d. Centrifugal in anterior mandible and centripetal in posterior mandible

45. An increase in VDO causes: *(AIPGEE 2012)*
a. Sagging of the corners
b. Injury to soft tissue
c. Perleche
d. Candida infection

46. Which of the following is true about curve of Wilson? *(AIPGEE 2015)*
a. It is anteroposterior curve
b. It is important while teeth setting as the teeth are settled so as to along the curve of the arc
c. It is not important for setting the teeth in complete denture
d. It is represented by anterior teeth

47. Which of the following is true of permissive occlusal splint? *(AIPGEE 2015)*
a. Unilateral balance form of occlusion in CR and group function in lateral excursion
b. Bilateral balance form of occlusion in CR and group function in lateral excursion
c. Permits free movement of teeth
d. Unilateral balance form of occlusion in CR and canine guidance in lateral excursion

48. Face bow is used when which of the following treatment is indicated? *(AIPGEE 2015)*
a. A three unit bridge
b. Single unit prosthesis
c. Multiple prosthesis
d. Small arch prosthesis

49. Complete denture in the incisive foramen region which of the following is true? *(AIPGEE 2015)*
a. Should always be relieved
b. Should be relieved only when it is freely mobile tissue
c. Should be relieved when tissue overlying it is firm
d. It is a ring like structure surrounded by alveolar bone thus need not be relieved

50. Thickness of die spacer depends upon which of the following? *(AIPGEE 2015)*
a. Luting agent
b. Thickness of luting cement and casting shrinkage
c. Material of casting
d. Investment material

51. A patient wearing a complete denture in lower arch reports with the inflammation in the lower anterior region. Denture is having adequate retention and no problem during speech. Which of the following is the best treatment for this patient? *(AIPGEE 2015)*
a. Relining of denture
b. Reducing the lingual flange
c. Smoothening of area of denture
d. Apply sedative dressing in inflamed area

52. Which of the following is true regarding the immediate complete denture? *(AIPGEE 2015)*
a. Immediate complete denture cannot be given to patient
b. Posterior teeth are extracted first and complete denture is formed. On the appointment only the anterior teeth are extracted and complete denture is delivered
c. Teeth are extracted and accordingly added to the denture
d. Anterior teeth are extracted first and then posterior teeth are extracted

53. Height of floor of mouth can be measured by which of the following? *(AIPGEE 2015)*
a. Periodontal probe
b. Custom tray
c. Simple probe
d. Periodontal probe and custom tray

54. The chair side reline technique uses:
a. An alginate impression *(AB Shetty 2015)*
b. Acrylic
c. A tissue conditioner
d. Functional impression

55. The series or sequence of numbers that is seen in nature, occurring in the arrangement of leaves and in the number of petals of common flowers is called: *(AB Shetty 2015)*
a. Phi
b. Fibonacci
c. Liber Abaci
d. Brain-teaser

56. During recording centric relation, compound occlusion rims with styli in maxillary arch are used in: *(AB Shetty 2015)*
a. Patterson technique
b. Extraoral tracer technique

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c. Intraoral tracer technique
d. Needles house technique

57. Relining or rebasing of complete denture is required because: *(AB Shetty 2015)*
a. Denture base material abrades
b. Ridge resorption is a continuous phenomenon
c. It prolongs the useful life of the denture
d. All of these

58. The geometric formula of proportionality for dental compositions would require that starting at the midline each of the anterior teeth should be narrow that the tooth immediately mesial to it by slightly less than: *(AB Shetty 2015)*
a. 20% b. 30%
c. 40% d. 50%

59. The limits of hinge movement in terminal hinge position of the mandible is about: *(AB Shetty 2015)*
a. 19 to 22 degrees
b. 12 to 15 degrees
c. 20 to 30 degrees
d. 35 degrees

60. The following statement is true: *(AB Shetty 2015)*
a. Women show nearly twice as much maxillary central incisors as men with the upper lip at rest
b. Men are more likely to have a low smile line than women
c. Women are more likely to have a low smile line than men
d. Both a and b

61. The smile line parallel the inner curvature of the: *(AB Shetty 2015)*
a. Lower lip b. Upper lip
c. Vermillion border d. Angle of the mouth

62. Facebow is caliper like device used to record the relationship of the jaws to the: *(Bihar 2015)*
a. Frankfort horizontal plane
b. Opening axis of jaws
c. Occlusal plane
d. Campers line

63. Which muscle has an indirect effect on the extent of impression in labial vestibule (maxilla): *(Bihar 2015)*
a. Masseter b. Orbicularis oris
c. Buccinator d. Levatorangulioris

64. Mouth opening is considered to be restricted when the distance is: *(Bihar 2015)*
a. Less than 53 mm
b. Less than 58 mm
c. Less than 50 mm
d. Less than 40 mm

65. Tekscan system: *(Bihar 2015)*
a. Used for qualitative analysis of occlusion
b. Quantitative analysis of occlusion
c. Uses ultrasonic methods
d. Both b and c

66. Lateral mandibular movement have a mean value of: *(Bihar 2015)*
a. 15 mm b. 10 mm
c. 5 mm d. 20 mm

67. All about MORA are true but one: *(Bihar 2015)*
a. Takes the condyle to returned position
b. Brings mandibular down forward
c. Repositioning device for mandible
d. Recaptures disc in internal dearrangement of TMJ

68. Average Fischer angle is: *(Bihar 2015)*
a. 10° b. 5°
c. 15° d. 20°

69. Average intrusion of teeth is: *(Bihar 2015)*
a. 56 microns
b. 20 microns
c. 28 microns
d. 10 microns

70. Simple facebow: *(Bihar 2015)*
a. Locates centric relation
b. Locates terminal hinge axis
c. It is a nonearpiece device
d. Relate mandible to maxilla

71. Condylar inclination to use simple facebow must be about: *(Bihar 2015)*
a. 20°
b. 30°
c. 40°
d. 70°

72. Middle part of lingual flange of lower dentures curves: *(Bihar 2015)*
a. Laterally b. Medially
c. Distally d. Occlusally

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73. Jaw relations are classified in the: *(Bihar 2015)*
a. 1 groups b. 2 groups
c. 3 groups d. 4 groups

74. Coble device can be used for recording: *(Bihar 2015)*
a. Vertical relation only
b. Horizontal relation
c. Both a and b
d. None of the above

75. Mediolateral compensating curve is how many degrees from the horizontal plane of orientation? *(Bihar 2015)*
a. 1–5° b. 5–10°
c. 10–15° d. 15–20°

76. How much outline of occlusal guards extends in soft tissue facial on the teeth? *(Bihar 2015)*
a. 1 mm b. 2 mm
c. 4 mm d. 5 mm

77. Minimum thickness of resilient resin used for occlusal guard is: *(Bihar 2015)*
a. 6.4 mm b. 4.2 mm
c. 3.1 mm d. 2.5 mm

78. Average swallowing force is: *(Bihar 2015)*
a. 5.3 pounds b. 11.4 pounds
c. 20.3 pounds d. 40.4 pounds

79. Speaking line is otherwise known as: *(Bihar 2015)*
a. High lip line b. Low lip line
c. Canine line d. Lip line

80. To prevent calculus deposition on denture: *(Bihar 2015)*
a. It should be soaked in 50% hypochlorite
b. Citric acid
c. White vinegar
d. Either a or b

81. Following are true for 'true-cusp', *except*: *(Bihar 2015)*
a. It is designed by French
b. It is a cuspless tooth
c. It had series of transverse buccolingual ridges
d. Produces free gliding contact

82. Hanau H_2 articulators has: *(Bihar 2015)*
a. Angled foot incisal guide pin
b. Curved incisal guide pin
c. Straight incisal guide pin
d. Split incisal guide pin

83. Atmospheric pressure as a factor of retention is effective only: *(Kerala 2015)*
a. If saliva is present
b. If adequate peripheral seal is present
c. If principle of mucostatic is applied
d. If good neuromuscular coordination is present

84. Transverse line extending from or between the middle of upper canine and the incisive fossa is called: *(Kerala 2015)*
a. Horizontal line
b. Orientation line
c. Transverse line
d. CPC line

85. The polished surface of denture occupies the position of equilibrium among the group of muscles is referred to as: *(Madhya Pradesh 2015)*
a. Natural zone
b. Neutral zone
c. Free zone
d. Freeway space

86. The use of Ch, S and J sound bring which teeth closer: *(Madhya Pradesh 2015)*
a. Premolar
b. Molar
c. Anterior
d. Lips

87. During the alignment of mandibular canine for a complete denture, the canine tip should be: *(Madhya Pradesh 2015)*
a. At the same level of central and lateral incisors
b. More than the level of central incisors
c. Inclined lingual to central incisor
d. Labially inclined to central incisor

88. The distance which separates the maxillary and mandibular arch in rest position is: *(Madhya Pradesh 2015)*
a. Midline diastema
b. Embrasure
c. Freeway space
d. Class I molar relation

89. The posterior most portion of the mandibular relation to maxilla in a vertical dimension is: *(Madhya Pradesh 2015)*
a. Acentric relation b. Centric relation
c. Centric occlusion d. Rest position of mandible

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90. Hinge articulator: *(MP 2015)*
a. Garriott
b. Ledwith
c. Howarth
d. Niswonger

91. Posterior border of buccal shelf area is formed by: *(MP 2015)*
a. Anterior border of masseter
b. Anterior border of buccinators
c. Retromolar pad
d. Pterydomandibular raphae

92. Silverman's closest speaking space: *(MP 2015)*
a. Present in resting position
b. Establishes vertical relation when muscles are at rest and hence a static entity
c. Established by pronouncing k,g,
d. Establishes vertical relation when muscles are in function and hence dynamic entity

REMOVABLE PARTIAL DENTURE

93. Cross section of palatal bar is: *(MHCET 2012)*
a. Half oval
b. Half pear shape
c. Full pear shape
d. Oval

94. Wrought metal in cast RPD is used for: *(AIIMS May 2014)*
a. Retentive arm
b. Reciprocal arm
c. Major connector
d. Minor connector

95. Occlusal scheme for removable partial denture, class II modification space 1: *(AIIMS Nov 2012)*
a. Balanced occlusion
b. Canine guided occlusion
c. Group function
d. Group function of canine guided depends upon modification space

96. Split lingual bar type connector is not preferred in contemporary partial denture, major disadvantage is: *(AIPGEE 2012)*
a. Complex design
b. Entrapment of tissues
c. Decreased retention
d. Inadequate stability

97. Which of the following is not a type of major maxillary metal partial denture framework? *(AIPGEE 2012)*
a. Lingual U plate
b. Palatal strap
c. Palatal plate
d. Single palatal bar

98. Property of internal occlusal rest are all *except*: *(AIPGEE 2012)*
a. Horizontal stabilization
b. Provide retention
c. Vertical stop
d. Support

99. A patient with class II modification partial edentulous space in the mandibular arch with opposing full complement of natural teeth in maxillary arch, occlusion to be given is: *(AIPGEE 2012)*
a. Canine guided occlusion
b. Unilateral balanced occlusion
c. Bilateral balanced occlusion
d. Canine guided or unilateral balanced depending on total number of missing teeth

100. Guiding plane function is: *(AIPGEE 2012)*
a. Permit multiple pathways of insertion
b. Provide single path of insertion and removal
c. Provide single insertion and multiple removal
d. Generate functional pathways

101. Connector of choice in tongue tie is: *(AIPGEE 2012)*
a. Lingual bar
b. Sublingual bar
c. Lingual plate
d Cingulum bar

102. Major disadvantage of flexible major connector is: *(AIPGEE 2015)*
a. Increased resorption of residual ridge
b. Distribution of occlusal load
c. Increased retention
d. Decreased chewing efficiency

103. Which of the following is true about hybrid prosthesis? *(AIPGEE 2015)*
a. It is having a fixed component over which removable part is placed
b. It has removable denture along with fixed denture
c. It has uses parts of oral tissue as the support
d. Have separated removable and fixed component

104. Internal occlusal rest is important for all of the following, *except*: *(AIPGEE 2015)*
a. Horizontal stabilization
b. Retention
c. Vertical stop
d. Support

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Answers with Explanations

COMPLETE DENTURE

Ans. (a) A knife edged ridge

Ref: Hubertus Spiekermann 1st ed. Pg. 96

Atwood's classification of bone resoprtion	
Class I	Tooth bearing alveolus
Class II	Alveolus after extraction
The actual stages of bone resorption are presented in following four classes	
Class III	High alveolar process
Class IV	High narrow knife edge alveolar process
Class V	Rounded flat ridge
Class VI	Concave flat alveolar process

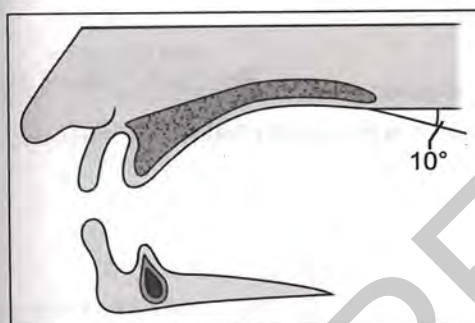
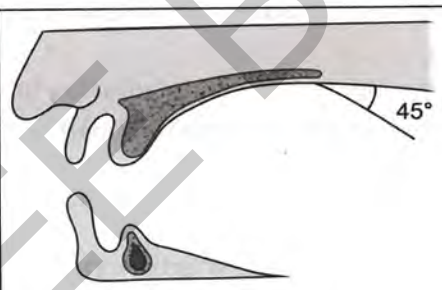
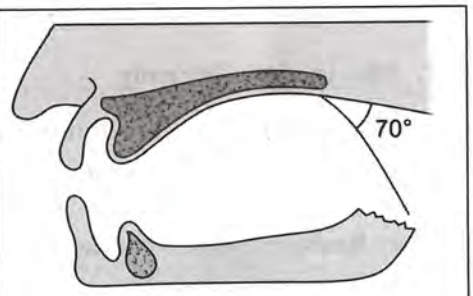
Ans. (b) 4 times

Ref: Gerard M. Scortecci 1st ed. Pg. 59

Atrophy of the maxillary arch proceeds at a slower rate than in the mandible. The posterior mandible resorbs approximately four times faster than the anterior mandible.

Ans. (d) Class IV

Ref: Deepak Nallaswamy 1st ed. Pg. 26

		
Class I soft palate (10°)	Class II soft palate (45°)	Class III soft palate (70°)
Class I palate form have maximum tissue coverage	Class II palate form have tissue coverage less than class I but more than class II	Class III palate form have minimum tissue coverage and have v-shaped dental arch

Ans. (b) Class II

Ref: SI Bhalajhi 3rd ed. Pg. 442

Veau's classification (1931)

He has classified clefts into four groups:

Group 1: They are clefts involving the soft palate.

Group 2: They are clefts of the hard and soft plate extending up to the incisive foramen.

Group 3: They are complete unilateral clefts involving the soft palate, the hard palate, lip and the alveolar ridge.

Group 4: They are complete bilateral clefts affecting the soft palate, the hard palate, the lip and alveolar ridge.

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5. Ans. (a) Addition of monomer to polymer in small increment *Ref: S Oratur Pg. 187*

The idea is to allow mixing polymer and monomer to take place in cavity itself, instead outside the mouth in the glass slab and also material placed in cavity in increments instead of bulk. Thus, procedure is very demanding and has to be done in carefully a moisture free cavity. Polymer and monomer dispensed separately in two dappen glasses. By using the fine camel hair brush, the cavity floor is first moistened with monomer, then tip of the same brush again moistened with monomer is dipped into polymer. Now, some polymer particles get attached to the tip of the brush in the form of the bead. This bead is taken to floor of the cavity, which has already been moistened with monomer, polymer particles of a bead get dissolved in monomer at the cavity is slightly over filled. Doctor Nealon advocated this technique.

Claimed advantage of this technique is that since mixing take place inside the cavity and the resin is introduced in increments, shrinkage is compensated by additional increments. Thus, uniform adaptation at all cavity margins and walls can be achieved. No pressures and no matrix bands are necessary in this method.

6. Ans. (c) 18–21°C *Ref: Phillips 11th ed. Pg. 237*

Agar set by gelation which is the reversible change brought about by change in temperature

Liquification temp: 71–100 C

Storage temperature 65 C

Gelation Temperature: 35–50 C

Making the agar impression

Gelation is accelerated by circulating cool water (approximately 18–21 C) through the tray for 3–5 min. during the gelation. It has proceed to a point at which the gel strength is sufficient to resist deformation or fracture. Waiting an extra minute greatly increases the strength and tear resistance. Also, the lower the temperature, the more rapidly gelation occurs and, to a certain extent, the stronger the material will become.

7. Ans. (c) Stability only *Ref: Zarb 12th ed. Pg. 239*

Mandibular complete denture should be covered retromolar pad because, it is meant for following reasons:

- More surface area gives better retention.
- Provider border seal.
- Resist movement of denture base.
- It is relatively stable.
- Here, according to answer key both option 1 and 3 are correct.

8. Ans. (b) Mucosa overlying pear shaped pad is not stippled *Ref: Deepak Nallaswamy 1st ed. Pg. 57*

Mucosa overlying pear shaped pad is not stippled. Pear shaped pad is a triangular keratinized soft pad of tissue at the distal end of the ridge. The retromolar pad has a stippled and keratinized mucosa.

9. Ans. (d) Incisivus and orbicularis oris *Ref: Deepak Nallsawmy 1st ed. Pg. 55*

Labial frenum: It is a fibrous band in mandible. The muscles, such as incisive and orbicularies oris influence this frenum. It is active. The mandibular labial frenum receives attachment from the orbicularis oris muscle. Hence it is quite sensitive and active. The impression will be the narrowest in the anterior labial region.

10. Ans. (b) Korreeta type I *Ref: Stewart Rudd Kuebker 2nd ed. Pg. 385*

- The fluid wax impression is used either to make a reline impression for existing partial denture or to correct the distal extension edentulous ridge portion of the original master cast.

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- The term fluid wax is used to the waxes that have the ability to flow at mouth temperature. The most frequently use fluid waxes are Iowa Wax, developed by Dr Smith Korrecta Wax no 4, developed by Drs OC Korrecta Wax No 4 is slightly more fluid than Iowa wax.
- Korrecta Wax no 1 was used to support the softer no 4 wax if extension beyond that length. The no 1 wax, however neither available nor is a example of fluid wax.

11. Ans. (b) Keratinized mucosa *Ref: Zarb and Bolender Pg. 211*

- The ultimate support for a maxillary denture is the bone of maxillae and the palatine bone. The palatine processes of the maxillae and the palatine bone form the hard palate and provide support for the denture.
- The hard palate is covered by soft tissue of varying thickness, even though the epithelium is keratinized throughout in the region of the medial palatal suture, the submucosa is extremely thin.

12. Ans. (d) Eva point *Ref: Sridher. Textbook of Craniofacial Growth Pg. 199*

Arcial growth of mandible

- Proposed by Rickerts.
- The advantage was that the of growth can be constructed for every individual depending the length of the core of the mandible.
- In order to locate the central core which is immune to surface deposition and resorption, he introduced 2 landmarks XI point and EVA point on the mandibular ramus.
- XI point: Represents geometric center of ramus.
- Eva point: In dried mandible, the stress lines run on the medial aspect up the ramus. The stress lines fork into two at a particular point that was named as Eva point.

13. Ans. (c) Polymers *Ref: Deepak Nallaswamy 1st ed. Pg. 224*

- Tissue lining materials are those which aid to decrease the force per unit area transmitted to the supporting tissue.

Composition

- Tissue conditioners are composed of polyethylmethacrylate and a mixture of aromatic ester and ethyl alcohol. Tissue conditioners are available as three component systems.
  - Polymer (powder)
  - Monomer (liquid)
  - Liquid plasticizer (flow control)
  - A gel is formed when these materials are mixed, with the ethyl alcohol having a greater affinity for the polymer.

Uses of tissue conditioners

- The major uses of these tissue conditioning materials include:
  - Baseplate stabilization
  - To diagnose the outcome of resilient liners
  - Liners in surgical splints
  - Temporary obturator
  - Trial denture base
  - Tissue treatment
  - Functional impression material.

14. Ans. (a) 14 cm^2 and 24 cm^2 *Ref: Deepak Nallaswamy 1st ed. Pg. 60*

The total area of support from the mandible is significantly less than from the maxillae. The average available denture-bearing area for an edentulous mandible is 14 cm^2, whereas for edentulous maxillae it is 24 cm^2. This means that the mandible is less capable of resisting occlusal forces than the maxillae are, and extra care must be taken if the available support is to be used to advantage.

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15. Ans. (d) Slope of residual ridge, buccal shelf area and hard palate *Ref: Deepak Nallaswamy 1st ed. Pg. 50, 55*

Maxilla	
Primary stress bearing area	Residual alveolar ridge
Secondary stress beating area	• Rugae or anterior hard palate • Maxillary tuberosity
Tertiary stress bearing area and secondary retentive area	Posteriolateral part of hard palate
Relieving areas	• Incisive papilla • Mid palatine raphae • Cuspid eminence • Fovea palatine
Primary retentive area	Posterior palatal seal area
Mandible	
Primary stress bearing area	Buccal shelf area
Secondary stress bearing area	Slopes of edentulous ridge
Primary retentive and primary peripheral seal area	Retromolar pad
Secondary peripheral seal area	Anterior lingual border
Relief areas	• Crest of the residual ridge • Mental foramen • Mylohyoid ridge

16. Ans. (b) Blue *Ref: Patil. Dental Material 1st ed. Pg. 74*

Blue color of articulating paper is used for diagnosis of premature contacts in eccentric relations. Articulating paper used to check occlusal contact or any discripancies present in the occlusion. Waxed articulating paper has blue color due to cobalt salt while red is due to iron oxide.

17. Ans. (a) Use mucostatic impression technique *Ref: Internet*

A multitude of impression techniques have been suggested in the past to help record a suitable impression of a flabby denture-bearing area. When considering these, it is important to realize that all impressions for complete dentures could be categorized in three ways:

1. The mucostatic technique (non-displacive)
2. The mucocompressive technique (displacive)
3. The selective pressure impression technique—where some denture bearing tissues are displaced, and others are not.

   A mucostatic impression technique records the undisplaced denture bearing areas at rest. As the resultant denture is more closely adapted to the underlying tissues at rest, it is theoretically more retentive. However, occlusal forces will not be evenly distributed across the underlying denture bearing area. In contrast, a mucocompressive impression technique compresses the underlying tissues in a manner similar to the way in which the resultant denture will compress the underlying tissues. In this fashion, the resultant occlusal forces will be more evenly distributed across the denture bearing tissues. While there is much speculation in the dental literature regarding the most suitable impression technique for a complete denture, there is no evidence to indicate that one technique produces better long-term results than the other. In practice, most impression techniques for conventional dentures could effectively be considered 'selective pressure' techniques. If close-fitting custom trays and high viscosity impression materials are used, the soft tissues at the vibrating line on the palate are compressed, while the tightly bound mucosa on the hard palate is not.

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18. Ans. (d) 2–4 mm *Ref: Deepak Nallaswamy 1st ed. Pg. 130*

The occlusal vertical dimension should provide for most patients a minimum interocclusal clearance (freeway space) of 2–4 mm in the premolar region. It is established by adjustment of the lower occlusal rim and verified using various techniques of clinical measurement.

19. Ans. (c) Closest speaking space *Ref: Deepak Nallaswamy Pg. 131*

Closest speaking space	*Freeway space*
• Described by Silverman	• Described by Niswonger
• Closed speaking space measures	• Freeway space measures the vertical
• the vertical dimension	
• When mandible is involed	• Dimension when mandible is at rest
• in function of speech	
• It is dynamic position	• It is static position
• It is about 1–2 mm in the premolar area	• It is 2–4 mm in the premolar area

20. Ans. (d) Messerman *Ref: Internet*

Other intraoral tracer is gothic arch tracer.

21. Ans. (a) 194 *Ref: Internet*

When closure in intercuspal position is attained during mastication, movement stops for about 194 msec before another cycle begins

Actual chewing time per meal: 450–600 sec

Duration of each masticatory cycles: 1 sec

Duration of occlusal contact during each cycles: 0.3 sec

Total no of occlusal contact during chewing per day: 10 min

Teeth are in contact for 2–6% of times a day.

22. Ans. (d) None of the above *Ref: Boucher 10th ed. Pg. 290*

Gothic arch tracing (also known as arrow point or needle point tracing) is an extraoral method of recording centric relation in horizontal jaw relation.

23. Ans. (b) Compensatory curve which helps in setting posterior teeth

Ref: Orthodontics: The Art and Science by SI Bhalajhi 5th ed. Pg. 71

This is a curve that contacts the buccal and lingual cusp tips of the mandibular buccal teeth. It results from the inclination of the lower posterior teeth. It helps in aligning teeth parallel to the direction of medial pterygoid for optimum resistance to masticatory forces. (not the masseter)

24. Ans. (a) Maxillary posterior teeth are extracted 1st and then on the day of denture insertion extract the remaining anterior teeth *Ref: Deepak Nallaswamy. Textbook of Prosthodontics 2nd ed. Pg. 255*

25. Ans. (c) Permits free movement of teeth *Ref: Okeson 2nd ed. Pg. 397*

- Occlusal splints come in many different designs. The most common type of occlusal splint is called a permissive splint. This is an appliance that may be fitted to either the upper or the lower teeth. The biting surface of a permissive splint is smooth and fairly flat.

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