

PERIODONTAL DISEASE

Dentalelle Tutoring

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- B. Mandibular anteriors
- C. Premolars and canines
- D. Molars

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- B. Diuretic
- C. Immunosuppressant
- D. Antineoplastic

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- C. Retromolar pad
- D. Interdental papilla

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- B. Over production of collagen
- C. Over production of spirochetes
- D. Over production of leukocytes

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- B. Age
- C. Tobacco
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How do you treat gingival fibromatosis?

- A. Surgery
- B. Gingivectomy
- C. Crown lengthening
- D. Apical flap

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- A. Surgery
- B. Gingivectomy *may require multiple treatments**
- C. Crown lengthening
- D. Apical flap

What is a common location of pericoronitis?

- A. Retromolar pad
- B. Mandibular third molars
- C. Primary teeth
- D. Endodontic lesions

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What is plaque?

- A. A sticky salivary glycoprotein layer (pellicle) that consists of bacteria and their products
- B. Hard deposits that consist of bacteria and the pellicle
- C. A cottage like substance with many bacteria and pellicle
- D. The main cause of recession, harbours bacteria and the pellicle

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What is the duration of antimicrobial administration for periodontitis?

- A. 7-10 days
- B. 10-14 days
- C. 14-21 days
- D. 21 days +

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- A. Adequate water
- B. Limit the water to reduce sensitivity
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- D. Sodium bicarbonate or Listerine

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What is the purpose of root planning?

- A. Removal of supra gingival calculus at it's best
- B. Promote more good bacteria
- C. Leaves the tooth less susceptible to accumulation of debris
- D. To limit root sensitivity

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What is sub gingival curettage?

- A. The removal of diseased soft tissue from the periodontal pocket
- B. Removal of plaque and calculus from the periodontal pocket
- C. Removal of all soft deposits from the periodontal pocket
- D. Removal of all hard and soft deposits from the periodontal pocket

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What is the purpose of an open flap curettage?

- A. Permanently cuts away the soft tissues and opens a flap
- B. Reflects the soft tissue and gains access to deeper periodontal structures
- C. Uses deep cures to gain access to deeper areas
- D. A series of radiographs are needed, vertical bitewings to check the bone levels

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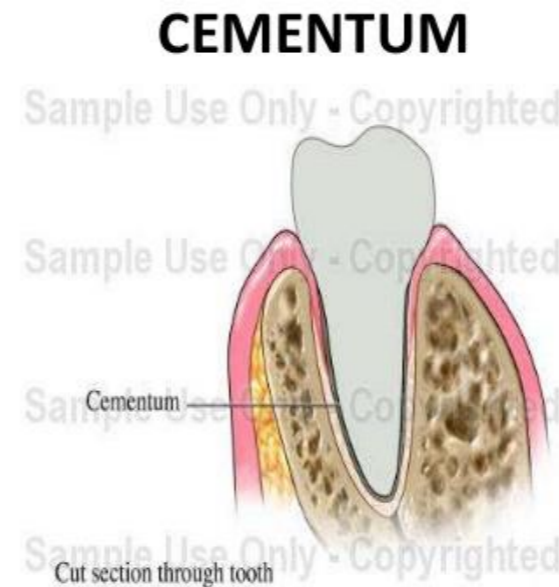
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- A. Few Sharpey's fibres present
- B. Located apically
- C. No cells present
- D. Doesn't play a roll in supporting tooth structure

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➤ **ACELLULAR**

CEMENTUM: It is the first cementum forms, covers approximately cervical third or half of the root & does not contain cells.

➤ **CELLULAR**

CEMENTUM: It forms after the tooth reaches the occlusal plain. It is more irregular and contain cells (cementocytes) and in individual spaces (lacunae)

Periosteum covers ___ bone.

- A. Inner
- B. Outer
- C. Entire
- D. Superior

Periosteum covers ___ bone.

- A. Inner - Endosteum covers the inner bone
- B. **Outer**
- C. Entire
- D. Superior

What disease/syndrome will you see Hypercementosis?

- Sjogrens Syndrome
- Steven Johnsons Syndrome
- HIV
- Paget's Disease

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- Sjogrens Syndrome
- Steven Johnsons Syndrome
- HIV
- **Paget's Disease - a chronic disease of elderly people characterized by deterioration of bone tissue, especially in the spine, skull, or pelvis, sometimes causing severe pain; osteitis deformans.**

Bacterial characteristics with periodontal disease may have 'bacilli' . What shapes are these?

- Rectangular
- Long and thin
- Ball Shaped
- Spherical

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- **Rectangular**
- Long and thin - Rods
- Ball Shaped - Cocci
- Spherical - Cocci

Which bacteria have lesser significance associated with perio?

- A. P.gingivalis
- B. P.intermedia
- C. Cocci
- D. Campylobacter rectus

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- B. Gram positive
- C. A mix of gram negative and positive
- D. None of the above

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- B. Gram positive - cocci and rods**
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What does gingivitis and perio both contain?

- A. P.intermedia
- B. Fusobacterium
- C. Veillonella parvula
- D. Gram positive bacteria

What does gingivitis and perio both contain?

- A. **P.intermedia**
- B. Fusobacterium - gingivitis
- C. Veillonella parvula - gingivitis
- D. Gram positive bacteria (remember gingivitis has gram negative bacteria and perio has both dependent on the stage)