**DENTISTRY PATHOLOGY**

1) Which are the odontogenic tumors histological groups

a) osteogenic

b) epithelial

c) vascular

d) mesenchymal

e) mixed

2) Which of the following statements characterize ameloblastoma:

a) benign tumor

b) benign, locally invasive tumor

c) located in maxilla (incisors)

d) located in mandible (the ascending branch)

e) located in mandible (molar region)

3) Which are the histological forms of ameloblastoma

a) follicular

b) alveolar

c) plexiform

d) papillary

e) tubular

4) Which are the microscopic characteristic signs of follicular ameloblastoma:

a) diffuse grow

b) stellate and polygonal cells in the centre

c) cubic or cylindrical cells in the centre

d) polygonal and stellate cells at the periphery

e) cubic or cylindrical cells at the periphery

5) Which of the following are odontogenic epithelial tumors:

a) ameloblastoma

b) odontoma

c) odontogenic myxoma

d) adenomatoid tumor

e) ameloblastic fibroma

6) Which are the clinical-anatomical forms of ameloblastoma:

a) vilous

b) cystic

c) nodular

d) diffuse

e) solid

7) Which are the benign tumors of odontogenic mesenchyme:

a) dentinoma

b) ameloblastic fibroma

c) myxoma

d) cementoma

e) ameloblastoma

8) Which are the cementoma histological variants:

a) compound odontoma

b) basal-cell ameloblastoma

c) cementifying fibroma

d) mixed cementoma

e) gigantiform cementoma

9) Which of the following are the mixed odontogenic tumors:

a) ameloblastic fibroma

b) ameloblastic fibro-odontoma

c) adenomatoid tumor

d) odontoameloblastoma

e) odontogenic myxoma

10) Which of the following are the pseudotumoral jaw disorders:

a) osteoblastoclastoma

b) chemodectoma

c) cherubims

d) epulis

e) fibrous dysplasia

11) Which of the following are the epulis histological variants:

a) simple

b) angiomatous

c) cavernous

d) giant cell

e) fibromatous

12) Which are the histological signs of giant cell epulis:

a) it contains granulation tissue

b) it contains hyaline

c) it contains ameloidoblasts

d) it contains osteoclasts

e) it contains hemosiderin deposits

13) Which of the following are the fibrous dysplasia forms and its preponderant location:

a) monostotic

b) polyostotic

c) intraosseous

d) mandible

e) maxilla

14) Which are the Albright syndrome morphological signs:

a) monostotic fibrous dysplasia

b) polyostotic fibrous dysplasia

c) skin ulcer

d) skin melanosis

e) endocrinopathies

15) The following are fibrous dysplasia histological characteristics EXCEPT:

a) bone destruction

b) melanin deposits

c) replacement by fibrous tissue

d) osteoid tissue formation

e) cysts formation

16) The following are osteoblastoclastoma features, EXCEPT:

a) it is of odontogenic origin

b) it is of osteogenic origin

c) it is defined node

d) it contains foci of haemorrhage

e) it forms cysts

17) The following are osteoblastoclastoma microscopic features, EXCEPT:

a) it contains osteoblasts

b) it contains osteoclasts

c) bone resorption is present

d) it is made of newly formed bone

e) it has glandular structures

18) Which of the following are histological variants of salivary glands adenomas:

a) monomorphic

b) pleomorphic

c) follicular

d) cystic

e) basophilic

19) Which of the following are the macroscopic features of pleomorphic adenoma:

a) it increases rapidly

b) it grows slowly

c) it is nodule shaped

d) it increases unlimited

e) it is of a thick consistency

20) Which are the morphological features of pleomorphic adenoma:

a) it contains glandular structures

b) it contains mesenchymal structures

c) it relapses

d) it does not relapse

e) it does not metastasize

21) Which of the following are monomorphic adenoma histological variants:

a) follicular

b) tubular

c) basal cell

d) giant cell

e) clear cell

22) Which are the adenolymphoma microscopic features:

a) it affects lymph nodes

b) it is localized in the parotid gland

c) it is well-confined node

d) the epithelium has eosinophilic cytoplasm

e) the epithelium has basophilic cytoplasm

23) Which are the mucoepidermoid tumor morphological features:

a) well-defined node

b) epidermoid-type cells

c) acinar cells

d) mucous cells

e) intermediate cells

24) Which are the progression criteria of malignant mucoepidermoid tumor:

a) prevail intermediate cells that do not produce mucus

b) mucous cells prevail

c) expansive growth

d) invasive growth

e) it metastasizes

25) Acinocellular tumor morphological features include the following EXCEPT:

a) mucus-producing cells

b) basophilic serous cells

c) clear cell

d) it has solid fields

e) it metastasizes

26) Which is the common malignant tumor of the salivary glands:

a) mucoepidermoid tumor

b) acinocelular tumor

c) adenolymphoma

d) adenocystic carcinoma

e) follicular carcinoma

27) Non carious lesions of teeth are the following, except:

a) dental abrasion

b) fluorosis

c) pulpitis

d) dental erosion

e) cuneiform defects

28) Which statements are correct about the dental caries characteristic:

 a) frequently affects children, adolescents

b) frequently affects the upper jaw teeth

c) commonly affects the lower jaw teeth

d) first molars are often affected

e) lower incisors are commonly affected

29) Which are the local factors of dental caries development:

a) excess of carbohydrates in alimentation

b) oral microbial flora

c) blood type

d) composition of saliva

e) permanent teeth terms eruption

30) General factors that are important in the dental caries development are the following EXCEPT:

a) hereditary predisposition

b) metabolism disorders

c) osteo-articular system pathologies

d) content of vitamins and micronutrients

e) hormonal disorders

31) Dental deposit consists of the following EXCEPT:

a) microbes

b) food scraps

c) desquamated epithelium

d) cholesterol

e) mucin

32) Which are the dental caries evolution stages:

a) macula stage

b) the stages of tanning

c) surface caries

d) circular cavity

e) deep cavity

33) Which are the microscopic components of cavity decay wall:

a) softened dentin zone

b) transparent dentin zone

c) granulation tissue

d) fibrous tissue

e) dentin replacement zone

34) Types of dental caries in children are the following, EXCEPT:

a) circular

b) retrograde

c) arrested

d) fluorosis

e) early subenamel

35) Local complications of deep caries are the following EXCEPT:

a) pulpitis

b) periodontitis

c) periodontosis

d) soft tissue abscess

e) mouth floor phlegmon

36) General complications of deep dental caries are the following EXCEPT:

a) rheumatic diseases

b) sepsis

c) vasculitides

d) cerebral stroke

e) allergic reactions

37) Pulp reactive changes include the following EXCEPT:

a) circulatory disorders

b) atrophy

c) pulpitis

d) dystrophy

e) cysts

38) General etiological factors of pulpitis are:

a) infectious

b) alimentary

c) metabolic

d) toxic

e) hereditary

39) Local etiological factors of pulpitis are the following, EXCEPT:

a) traumas

b) chemical factors

c) sialadenitis

d) medium and deep caries

e) thermal agents

40) The histological structure of dental pulp presents the following EXCEPT:

a) collagen fibbers

b) fibroblasts

c) myocytes

d) odontoblasts

e) blood and lymphatic vessels, nerve endings

41) Which are acute pulpits’ variants:

a) catarrhal

b) serous

c) fibrinous

d) phlegmonous

e) gangrenous

42) Which are chronic pulpits’ variants:

a) serous

b) granulating

c) diffuse purulent

d) fibrous

e) fibrinous

43) The following are local pulpits’ complications, EXCEPT

a) periodontitis

b) osteomyelitis

c) periostitis

d) amyloidosis

e) mouth floor phlegmon

44) Pulpits’ general complications may be the following EXCEPT

a) pneumonia

b) endocarditis

c) glomerulonephritis

d) rheumatic diseases

e) vasculitis

45) Periodontitis causative factors are the following EXCEPT

a) pulpitis

b) deep caries

c) Trauma

d) chemical factors

e) psychological factors

46) Which are periodontitis forms by location:

a) diffuse

b) acute

c) apical

d) chronic

e) marginal

47)Which are acute apical periodontitis forms:

a) serous

b) fibrinous

c) catarrhal

d) focal purulent

e) diffuse purulent

48) Which are chronic apical periodontitis forms:

a) granulating

b) granulomatous

c) fibrinous

d) fibrous

e) purulent

49) Which are granulomas variants in chronic granulomatous periodontitis:

a) simple

b) "foreign body"

c) specific

d) epithelial

e) cystogranulomas

50) Periodontitis local complications are the following EXCEPT

a) periostitis

b) regional lymphadenitis

c) osteomyelitis

d) primary amyloidosis

e) sinusitis

51) The peculiarities of periodontitis in children include the following EXCEPT:

 a) it is located at the poliradicular teeth roots

b) formation hydatid cyst

c) permanent tooth follicle destruction

d) formation of follicular cysts

e) it affects temporary and permanent teeth

52) Which are the local causes of gingivitis:

a) dental trauma

b) chemical factors

c) fluorosis

d) infection from dental deposits

e) middle caries

53) Which are general causes of gingivitis:

a) infectious diseases

b) cardiovascular disturbances

c) respiratory disturbances

d) endocrine disturbances

e) metabolic disturbances

54) Which are common morphological forms of gingivitis:

a) catarrhal

b) ulcerative

c) fibrinous

d) hypertrophic

e) purulent

55) The main causes of periodontitis are the following EXCEPT:

a) dental abnormalities

b) the oral soft tissue abnormalities

c) endocrine diseases

d) rheumatic diseases

e) hemi-sinusitis

56) Morphological picture of periodontal pocket in periodontitis include the following EXCEPT:

a) it contains detritus in the lumen

b) the wall is made of granulation tissue

c) it contains areas of squamous epithelium

d) it contains areas of bone desorption

e) bone sequesters

57) Which are the variants of bone resorption in periodontitis:

a) diffuse

b) sinuous

c) lacunar

d) idiopathic

e) smooth

58) Which is the frequent complication of periodontitis:

a) loss of tooth

b) osteomyelitis

c) periostitis

d) apical periodontitis

e) pulpitis

59) Morphological picture of periodontosis include the following except:

a) gingival retraction

b) denudation of neck and root of the tooth

c) microvessel sclerosis and hyalinosis

d) dystrophic connective tissue changes

e) periostitis

60) Inflammatory diseases of jaw are the following except:

a) osteitis

b) periostitis

c) periodontitis

d) osteomyelitis

e) odontogenic infection

61) Which are periostitis morphological forms:

a) catarrhal

b) fibrinous

c) serous

d) purulent

e) fibrous

62) The morphological picture of jaw osteomyelitis includes the following EXCEPT:

a) cavity filled with pus

b) pyogenic membrane

c) granulation tissue

d) bone sequesters

e) mucus excess

63) The odontogenic infection complications are the following EXCEPT:

a) sepsis

b) sinusitis

c) thrombophlebitis

d) orhitis

e) mediastinitis

64) Which is the complication of jaws chronic osteomyelitis::

a) pericarditis

b) pleuritis

c) amyloidosis

d) pneumonia

e) chronic hepatitis

65) Which are the jaws cysts variants:

a) serous

b) fibrinous

c) mucinous

d) follicular

e) radicular

66) Radicular cyst morphological signs include the following, EXCEPT:

a) it is 0.5-3.0 cm in diameter

b) it is covered by squamous epithelium

c) bone sequesters

d) the wall is fibrous

e) it contains inflammatory infiltration

67) Acquired diseases of the salivary glands are the following, EXCEPT:

a) sialoadenitis

b) sialolithiasis

c) developmental abnormalities

d) cysts

e) tumors

68) Which disorders are accompanied by primary sialoadenitis:

a) mumps

b) tuberculosis

c) sarcoidosis

d) cytomegalovirus infection

e) toxoplasmosis

69) Which are the secondary sialoadenitis causes:

a) local allergies

b) bacteria

c) viruses

d) heavy metal salts poisoning

e) mechanical factors

70) Which are acute sialadenitis morphological variants:

a) catarrhal

b) serous

c) fibrinous

d) purulent

e) haemorrhagic

71) Clinico-morphological forms of cheilitis are the following, EXCEPT:

a) exfoliative

b) papillary

c) glandular

d) by contact

e) meteorological

72) Which are clinico-morphological types of glossitis:

a) specific

b) exfoliative

c) rhomboid

d) non-specific

e) hypertrophic

73) The main etiologic groups of stomatitis are the following, EXCEPT

a) traumatic

b) infectious

c) allergic

d) in pneumopathies

e) in dermatoses

74) The most common variants of stomatitis by inflammation character are the following EXCEPT:

a) catarrhal

b) ulcerous

c) gangrenous

d) fibrinous

e) exfoliative

75) Which are the infectious diseases with oral manifestations:

a) flu

b) measles

c) scarlet fever

d) chickenpox

e) poliomyelitis

76) Which are dermatological diseases with oral manifestations:

a) lichen planus

b) scabies

c) pemphigus

d) dermatitis herpetiformis

e) streptodermia

 77) Blood diseases with oral manifestations are the following, EXCEPT:

a) hypochromatic anemia

b) pernicious anemia

c) erythremia

d) agranulocytosis

e) posthaemorrhagic acute anemia

 78) Vitamin deficiency oral symptoms are accompanied by:

a) hypovitaminosis A

b) avitaminosis D

c) avitaminosis B2

d) avitaminosis B1

e) avitaminosis C

79. Which are the first elements that sufferer in the pulp necrosis evolution?

A. cells;

B. connective fibres;

C. vascular walls;

D. nerve fibres;

E. fundamental substance.

80. Liquefactive necrosis:

A. is a form of the pulp gangrene;

B. is produced by enzymes;

C. is dominated by protoplasm coagulation phenomena;

D. is commonly installed after applying arsenic dressings;

E. is caused by the antiphormin type antiseptic solutions;

81. Which are the factors that may cause pulp necrosis?

A. repeated trauma of a low-intensity;

B. dislocations, intrusions;

C. diabetes, hypertension;

D. temperatures higher than 75 ° C;

E. temperatures below 0 ° C.

82. Which of following statements about liquefactive necrosis are true?

A. it is an aseptic mortification of pulp;

B. the tooth colour is changed;

C. biochemical tests are negative;

D. electro vitality tests can give a false positive response;

E. all answers are correct.

83. Which of following are determining causative factors in pulp gangrene?

A. prolonged vascular spasms followed by ischemia;

B. avitaminosis (A and C);

C. microorganisms reached the endodontic space;

D. physiological states: menstruation, prolonged labour;

E. dislocations with intrusions.

84. Devitalizing based on arsenic preparations can be followed by:

A. coagulation necrosis;

B. liquefactive necrosis;

C. profuse bleeding due to opening of pulp chamber;

D. dry pulp necrosis;

E. yellow-brown or black-purple pulp necrosis

85. In which of the following cases tooth discoloration occurs?

A. pulp necrosis;

B. chronic pulpitis

C. pulp gangrene;

D. Acute serous pulpitis

E. acute purulent pulpitis

86. Which microorganisms are involved in the pulp gangrene pathogenesis?

A. beta haemolytic streptococcus A;

B. white Staphylococcus;

C. staphylococcus aureus;

D. gonococcus;

E. pneumococcus

87. The wet gangrene is characterized by:

A. putrefied firm pulp tissue;

B. radiological image with periapical changes;

C. very soft putrefied pulp tissue;

D. partial loss of the pulp structural configuration;

E. total loss of the pulp structural configuration.

88. The coagulation necrosis is characterized by:

A. dry pulp;

B. pulp yellow-brown or black-purple;

C. reduced pulp consistency;

D. removal is done quite easily with the channel tools;

E. often occurs after arsenic

89. Liquefactive necrosis is produced by:

A. vegetable enzymes;

B. animal enzymes;

C. antiseptic;

D. arsenic;

 E. bradykinin.

90. Pulp necrosis infection is produced bacterial germs coming from:

A. oral cavity;

B. neighbourhood cysts;

C. lateral root canal;

D. alveolar bone

E. none of the listed

91. The clinical picture of pulp necrosis includes:

A. tooth transparency higher than neighbouring teeth;

B. thermal pain;

C. pain from chemical irritants;

D. modified tooth staining, brown or yellow-gray;

E. tooth pain on shaft percussion

92. A pulp necrosis positive diagnosis is based on the following:

A. changing of tooth color;

B. hypersensitivity to palpation with the probe into the pulp chamber;

C. hypersensitivity to palpation with the probe into the root canal;

D. positive vitality tests;

E. positive bacterial seeding.

93. Which are the pulp gangrene determining causative factors:

A. prolonged vascular spasms, followed by ischemia;

B vitamin deficiency;

C. microorganisms reached the endodontic space;

D. dislocations, intrusions;

E. exogenous intoxications with various heavy metals.

94. Which of the following factor causes pulp gangrene:

A. formalin;

B. great and sudden increases of temperature;

C. the action of bacterial origin enzymes;

D. circulatory imbalance

E. arsenical dressing.

95. Necrosis of pulp can have the following course:

A. remains for a period in this stage;

B. spontaneous healing;

C. chronic pulpitis with closed pulp chamber;

D. pulp gangrene;

E. dental fracture.

96. Arsenic may cause dental pulp necrosis by:

A. pH change;

B. precipitating of plasma proteins and cell membrane damage;

C. vascular walls paralysis;

D. blocking cell respiration;

E. collagen depolymerization

97. Acute hyperaemic apical periodontitis:

A. represents the initial phase of pulp inflammation

B. represents the initial phase of periodontal ligaments inflammation

C. represents the initial phase of the apical alveolar bone inflammation

D. represents the initial stage of the inter-radicular septum inflammation

E. represents the initial stage of interdental septum inflammation

98. Pathological picture of acute serous apical periodontitis is dominated by:

A. vascular changes

B. chemical changes

C. enzymatic changes

D. pain

E. bone resorption

99. Epithelial cells of epithelial granuloma may originate in:

A. Epithelial rests of Malassez

B. sinus mucosa

C. oral mucosa in the case of fistulas

D. tooth pulp

E. alveolar bone

100. The acute serous apical periodontitis is morphologically characterized by:

A. vascular turgor

B. alveolar ligaments thickened

C. erythrocyte aggregation phenomena

D. fragmentation and depolymerization of Sharpey ligaments

E. internal alveolar cortex shows an irregular outline

101. Endosseous stage of acute purulent apical periodontitis is characterized by:

A. rich leukocyte infiltration

B. located pain

C. high pressure inside of tissue

D. mucosal swelling and infiltration

E. bone tissue lysis

102. Identify evolution and complications of acute purulent apical periodontitis:

A. external root resorption of iatrogenic nature

B. fistulisation, resorption and temporary healing

C. complications with osteomyelitic process

D. root internal resorption of microbial nature

E. suppuration of lodges and cervico-fascial spaces

103. Chronic fibrous apical periodontitis is morphologically characterized by:

A. formation of so-called fibrotic granuloma lesions

B. at the periphery of the formation, cell agglomeration is higher than in the middle

C. narrowed blood vessels with thickened walls

D. presence of the lymph-polyblastic infiltrates

E. presence of dense bone tissue areas with few bone trabeculae and intertrabecular spaces

104. In the simple fibrotic granuloma on the mechanism of development the following areas are distinguished:

A. stimulation area

B. colliquative area

C. irritation area

D. exudative area

E. area of necrosis

105. Wound healing after surgical incision of suppuration will be achieved:

A. by first intention

B. by second intention

C. after intradermal suture

D. after anatomical plans suture

E. after position suture

106. Phlegmon is a diffuse suppuration which is characterized by:

A. presence of fibrin collection

B. presence of necrotic tissue due to the purulent lysis

C. body temperature is not changed;

D. blood leukocyte level is normal;

E. polyuria appears constantly.

107. In the abscess of the vestibular space, the subperiosteal phase is dominated by:

A. congestion of teguments

B. high fever

C. congestion of mucosa corresponding to causal tooth

D. deep pain

E. heavily altered general condition

108. Mouth floor phlegmon can cause:

A. septic thrombosis of the cranial sinuses

B. septic meningitis

C. facial nerve paresis;

D. acute mediastinitis

E. pulmonary gangrene

109. Necrotizing fasciitis:

A. refers to a severe soft tissue supuration

B. is determined exclusively by anaerobic flora

C. entry gate can always be easily detected

D. debuts with specific clinical manifestations

E. entry gate cannot be always easily detected

110. Osteoperiostitis:

A. it is a localized bone inflammatory reaction

B. differential diagnosis is made with osteomyelitis

C. the diagnosis is based only on pathological examination

D. treatment consists of sequestrectomy

E. it is a generalized bone inflammatory reaction

111. OMF localized syphilis:

A. It is a nonspecific contagious infection

B. It evolves in several stages

C. The tertiary stage shows gum and tubers in the soft tissues

D. A positive diagnosis is based on specific serological reactions

E. The treatment is surgical

112. Mouth floor phlegmon:

A. it is also called Ludwig’s angina

B. the purulent process includes submandibular, sublingual and submental spaces

C. purulent process can be extended towards laterocevical space

D. pathological focus is most commonly located in the pterygomandibular space

E. primary foci are septic dentoparodontal processes or suppurative pericoronitides of superior wisdom teeth

113. Acute purulent adenitis is characterized by:

A. diffuse collection

B. well defined collection

C. periadenitis at the periphery

D. the coverings teguments are congested

E. not altered general condition

115. The maxillary sinus:

A. It is an annex of the nasal cavity

B. it opens in the superior meatus

C. it opens in the middle meatus

D. it opens in the inferior meatus

E. It is involved in nonspecific immune defence

116. Mucosa that covers the maxillary sinus wall is:

A. formed of epithelium with ortokeratosis

B. formed of epithelium with parakeratosis

C. consists of a ciliated cylindrical epithelium

D. consists of a multistratified epithelium

E. consists of a respiratory epithelium

117. In acute maxillary sinusitis, mucosal inflammatory process goes through three successive stages:

A. tumor, calor and dolor

B. congestive, catarrhal and purulent

C. margination of phagocytes, diapedesis of phagocytes and phagocytosis

D. exudative, granulation and epithelialization

E. vascular permeability, phagocytosis and cytotoxicity

118. Chronic maxillary sinusitis mucosa is:

A. congested

B. hyperplasia

C. atrophied

D. polypoid and cystic

E. extremely altered

119. Which are the local risk factors in delayed wound healing?

A. wound remaining foreign body

B. tensioned wound sutures

C. patient age

D. crushed wounds

E. immunosuppression

120. Brachial cyst:

A. It is laterocervical lymphadenopathy

B. It is cervical manifestation of Hodgkin lymphoma

C. Differential diagnosis with laterocervical lipoma must be done

D. Intraoral surgical approach

E. Can subject malignant transformation

121. Thyroglossal duct cysts:

A. It is also called median neck cyst

B. Appears only in childhood

C. It fistulises tegumental

D. It appears in the upper laterocervical 1/3

E. differential diagnosis with a lipoma must be done

122. Sialo- cyst:

A. It is due accessory salivary glands cystic dilatation

B. It appears only in the elderly

C. It often appears in the upper lip

D. It can be localized in the parotid

E. It can occur on the maxillary sinus floor

123. Oral mucocele:

A. It is a malignant tumor

B. It occur after chronic micro traumatisms of oral mucosa

C. It frequentlly appears at jugal mucosa level

D. It has a fluctuant consistency

E. It is very painful on palpation

124. Ranula is characterized by:

A. sublingual retention cyst

B. contains a colorless viscous liquid

C. spontaneous perforation can occur

D. is often complicated by suppuration

E. occurs only in adults

125. Sebaceous cyst:

A. It originates in the dermis fat cells

B. It arises by blockage of the salivary glands secretion

C. It originates at hair follicle level

D. It frequently appears on cervicofacial skin

E. Cystic cavity is filled with sebum

126. Epulis fissuratum:

A. It is a malignant tumor of the oral cavity

B. It appears in mobile prosthesis wearers

C. It is located on jugal mucosa

D. Mucosal covering membrane may be clinically unremarkable

E. A malignant tumor can be easily suspected

127. Pyogenic granuloma localized on jugal or lingual mucosa, is also known as:

A. fibrous epulis

B. granulomatous epulis

C. angiogranulomatos epulis

D. botryomycoma

E. papillomatous hyperplasia

128. Giant cell peripheral granuloma:

A. It is associated with [hyperparathyroidism](https://www.google.co.uk/search?espv=2&biw=1220&bih=799&q=hyperparathyroidism&spell=1&sa=X&ved=0ahUKEwjG1cCP_rLQAhWFKCwKHVEcDMcQvwUIGCgA)

B. It is prevalent in males

C. it appears more frequently in young ages

D. It is located palatal

E. It is also called giant cell epulis