	E DENTISTRY D2 EXAMINATION #2		Col	ruted		
NAME:						
PRECLINIC SEAT	NUMBER:			41		
EXAMINATION N		A		77		
<ol> <li>Your examination</li> <li>Write your named tetters and digit</li> <li>On the reverse the box labeled</li> <li>Be sure to dark examination for</li> <li>Choose the be</li> </ol>	on booklet should con ne and preclinic seat r ne and Temple ID nun s below the boxes. side of the computer identification informa ken all circles on the a this purpose. st answer for each qu	number on the cover of the ober on the computerized ized answer sheet sign yetion.	e examination boo I answer sheet in the our name and write and of the examina be answered durin	klet.  The appropriate boxes.  The the number and letter  The time will no  The the examination.	you have all of the examinating Blacken the corresponding (A or B) of your test booklet the given at the end of the	
axial wall taper of	degrees				etween the preparation and the mates that a minimum taper of	
a. 2-		b. 3 – 5; 15 – 20	c. 6; 8	@2-6; 12		
		e Shillingburg text, a tape	er or total converge	nce of	degrees has been propo	sed as being
achievable clinica a. 9	lly while still affording b. 12	©16	d. 20	e. 25		
absorb the curion absorb the curion between the body and both absorbed to be between the body and between the body absorbed to be body and between the body are body and body are body are body and body are body are body and body are body are body and body are body and body are body and body are body are body are body and body are body are body are body are body and body are body are body are body and body are body	ng light in the first 1 to statements are true statements are false ximal contact of a full idline of the tooth buck arginal ridge iddle of the occlusal contents of the too	c. statement of d. statement of the proximal statement of the proxim	ne is true; statement ne is false; statement ould be located:	nt two is false	agents tend to scatter or	
	b. 1, 4	c. 4, 5	404	. 1 2		
a) 3, 4			d. 2, 4	e. 1, 3	ania anida d il	
a.	metabolizes substra forms a gelatinous		c. derives en	ecause it produces orgergy from enamel constitutions of the constitution of the consti	tituents	
6. Whenever pos a. b. c. d.	the need for etching the need for applying the possibility of tra	d be used for placing com procedures is eliminated g enamel bonding agent pping air in a restoration less amount of composit	d is eliminated is minimized			
	ollowing factors contrib proximal cavosurfac uniform occlusal rec rounded occlusal lir	duction		aced functional cusp b		

8. Supplemental retention on abutment teeth is made possible by	
a. parallel alignment	d. a chamfer-type preparation
b. greater bulk of metal	© proper use of grooves and box forms
c. proper cementing technique	
9. Gavelis et al found that tooth preparations with	permitted the most complete seating of a crown.
a. parallel bevels (b) shoulders	c. chamfers d. reverse bevels
All of the following are true regarding the use of the knife edge     a. the axial reduction may fade out instead of terminating     b. difficulty in identification may make waxing of the resto     c. it is more susceptible to distortion under occlusal force     Control	n in a definite finish line Fration difficult
11. A large carious lesion on the distal surface of a maxillary central. Class I lesion 4. pit and fissure 2. Class II lesion 5. smooth surface 3. Class IV lesion	elesion
a. 1 only b. 2 and 5 (c) 3 and 5	d. 3 only e. 4 only
	perative dentistry)
13. Overcontoured crowns can be the result of	
1. the need for added retention	4. periodontal considerations
overbulking by technicians insufficient tooth reduction	5. ack of a functional cusp bevel
a. all of the above b. 2, 3 and 4 © 2, 3	and 5 d. 1, 3 and 5 e. 3 and 5
14. The rubber dam retainer that should be used on partially eruptor a. 212 b. W56 C 14A	ed molars is d. W2
removed from the mouth.  In a caries prone individual, it is best to place the finish line. The finish line should extend beyond existing restoration. The deeper the finish line (restoration margin) resides in periodontium.  a. all of the above are true.  1, 2, 3, 4  1, 2, 4, 5  2, 4 and 5 only	ele to do so.  In the dot so, without tearing or deforming the impression when it is the subgingival because the gingival sulcus is caries-free.
♣. 1, 4 and 5 only	
The current consensus is that dentin bonding agents bond print a. chemically      mechanically	narily to tooth structure. c. via hydrogen bonding

17. Which of the following statements is true concerning the preparation for a composite veneer  **Mesial and distal contact should be broken for improved esthetics  **The preparation should penetrate ½ the thickness of the enamel  **3. The margin should always extend subgingival  **Reduce the incisal edge to minimize the occurrence of protrusive interferences  **The desired margin configuration is the chamfer							
a. all c	f the above	b. 1, 2, 5	c. 2, 4, 5	<b>₫</b> 2, 5	e. 4, 5		
the diameter of t	nargin is formed as the he bur used, otherwis statements are true statements are false	se a lip of unsuppo c. sta	orted enamel resu tement one is true	pered diamond; th ilts. e; statements two i ee; statement two i	s false	fer should not be wider than hall	f
available for monomers from both	nomer interdiffusion.	If the dentin surface c. sta	ce is dried with air tement one is true	gths because water, the collagen under e; statements two is se; statement two is	ergoes immedia s false	e porosity of collagen networks te collapse and prevents resin	
20. After the dentist has completed an etching procedure on a Class III composite preparation, the preparation becomes contaminated with saliva. In response, the dentist should do which of the following?  a. Blow away the saliva with air, then proceed  b. Rinse away the saliva with water, dry the preparation, then proceed  c. Wipe away the saliva with a cotton pellet, rinse the preparation with water, dry it with air, then proceed  Rinse away the saliva with water, dry the preparation with air, then repeat the etching procedure							
21. In a full gold crown preparation, the purpose of the seating groove is to  a. prevent any rotational tendencies during cementation  b. help guide the casting to place during cementation  c. provide resistance and retention form  d. two of the above  all of the above							
22. Microfill resin composites generally have a percentage filler content than other types of resin composites.  allower b. higher							
facial cus 2. facial cus 3. lingual cus	side interferences g ps of mandibular mo ps of maxillary prem sps of maxillary mola ps of maxillary molar	lars olars ars	the inner aspects	of which teeth?	Maxi Mani	L B	
a. 2 and	4 (6)1 an	d 3	c. 2 and 3	d.	3 and 4		
<ol> <li>Regarding light curing of composite resin, which of the following statements are true</li> <li>The tip of the curing light should be within 2 mm of the composite surface</li> <li>It is recommended that no more than 1.5 – 2 mm increments be light-cured at a time.</li> <li>The degree-of-conversion (or degree of cure) is related to both the intensity of light and duration of exposure.</li> <li>Most light-curing requires a minimum of 20 seconds for adequate curing under optimal conditions of access</li> <li>Using a hand held curing light, most dental composites can be cured to levels of 75% degree of conversion of the reactive monomer sites.</li> </ol>							
<b>∦</b> д∧а. а	l statements are true	b. 2,	3, 5 c. 2	2, 3, 4 d.	1, 2, 4, 5	<b>(6)</b> 1, 2, 3, 4	
dentist notes that	reparing Tooth # 30 to caries remains on the caries form to caries with a caries with a	ne facial, pulpal, a	nd lingual walls o c.	f the preparation. remove the caries	The next step ir with a large rou	depth have been established, the treatment is to and bur on high speed and bur on slow speed	ne

26. It is more difficult to bond to dentin than to enamel because:  a. dentin contains more mineralized tooth structure  b. dentin contains more water  c. the presence of the smear layer makes it harder for the adhesive to wet the dentin  the two of the above  e. all of the above
27. The height of contour on the facial surface of posterior teeth is located  a in the gingival one-third of the tooth b. in the middle one-third of the tooth c. at the junction of the middle one-third and the gingival one-third d. at the junction of the middle one-third and the occlusal one-third e. It varies depending on the height of the tooth
28. The most deleterious effect of polymerization shrinkage of a resin composite is: a. increased wear formation c. decreased stiffness
29. Which of the following correctly describe the Class III distal of the canine preparation for amalgam?  1. usually lingual approach to preserve esthetics  2. lingual dovetail is not indicated unless it existed previously or is necessary to enhance retention form for the cavity preparation.  3. Enter the tooth with a # 2 round bur held perpendicular to the long axis of the tooth.  4. bur is positioned so the entry cut will penetrate into the contact point.  5. the lingual outline blends with the incisal and gingival margins creating a preparation with little or no lingual proximal wall.
a. All of the above are correct b. 1, 2, 3 and 4 c. 2, 3 and 4 c. 2, 3 and 4 c. 3 and 4
30. When placing pins to enhance retention form of a prepared cavity, which of the following potential pin sites should be avoided?  a. the mid-buccal area of the mandibular first molar  b. the mid-mesial area of the maxillary first premolar  c. the mid mesial area of the maxillary first molar
In a completed Class III cavity preparation for composite which of the following walls should remain in contact with the adjacent tooth.  a. Incisal  b. gingival  facial  d. lingual  e. all walls should break contact with the adjacent tooth.
<ul> <li>32. Which of the following clinical situations involving direct pulp capping would be the most likely to be successful?</li> <li>a. A pin-point exposure having sound dentin on the periphery of the exposure, with a mild degree of pulpal inflammation restricted to the exposure site. Poor isolation using cotton roles.</li> <li>b. A carious exposure having decayed or infected carious dentin at its periphery, inflammation in the pulpal tissues beyond the exposure site. Isolation using rubber dam.</li> <li>C. A pin-point exposure having sound dentin on the periphery of the exposure, with no pulpal inflammation at the exposure site. Isolation using rubber dam.</li> <li>d. An exposure with profuse hemorrhage and great involvement (mechanical) of the pulpal and root tissues.</li> </ul>
33. A carbide bur with a numerical code 1156 can be described as a(n)  a. tapered fissure  b. straight fissure  c. crosscut straight fissure
34. Which of the following statements regarding quadrant dentistry (is) are true (ST 778)  1. it is recommended to restore the most anterior tooth first  2. If proximal boxes differ in size, teeth with larger boxes should be restored first.  3. When restoring a quadrant of Class II amalgam tooth preparations, it is permissible to apply matrix bands on alternate preparations in the quadrant and restore the teeth two at a time.  4. Using a finishing strip between newly placed contacting amalgam restorations may lighten or eliminate the proximal contact.
a. all of the above are true b. 1 and 2 c. 2, 3, 4 e. 4

• .	35. The copal resin varnish that is placed in the cavity preparation before the amalgam is placed is condensed provides  a. sealing of the margins for the lifetime of the restoration  b. long-term sealing of several years duration  d. no sealing of the margins						
	36. The part as the	of the axial conto	ur that extends from the t	pase of the gingival sulcus p	east the free margin of the g	ingiva has been described	
		of contour	@ emergence profile	e c. "protective	e bulge" d. cervical	constriction	
	37. Accordin	g to material pres	ented in the Shillingburg	text, the acute angle margin	should be used on cast me	etal restorations. The angle	
		nearly parallel to t in the 15 to 30 de	he long axis of the tooth gree range		o 45 degree range o 60 degree range		
	by a proce amount, w	edure termed	This ight expose the pulp.	o clinical or radiographic inc s procedure involves the rer c. preventive resin rest d. sealant	noval of infected dentin exc	damage, the tooth may be treated ept for the deepest, last small	
	a.			c. poly (vinylethyl meth d. bis-acrylate	acrylate)		
	40. Disadvar 1. 2. 3. 4. 5.	ntages of using Je brittleness high exothermic poor polishabili toxic effect of fr high volumetric	c heat increase	tion of provisionals include			
	Pa. 2, 4 and 5		1, 2 and 5	c. 2, 3, 4 and 5	d. 3, 4 and 5	<b>6</b> 1, 2, 4 and 5	
				ant, identify the following standard answer sheet if the		as true or false. Darken (a) on	
Concete	\ a.	True I	o. False				
144 HA14	42. Mature p 43. When pu adjacen 44. Base ma 45. A tapered 46. The reac  7 No correl 48. Inadequa 51 The use place a beve	plaque is primarily inching holes in the state tooth, measured terials are needed fissure bur can be stion that occurs in lation exists between the isthmus with of composite resirel subgingivally.	anaerobic. e rubber dam, the distance at the level of the gingival under composite resin re e described as a slightly a mixture of zinc oxide a een resin tag length and e s the most likely cause for	ce between holes is equal to al tissue. estorations to provide them tapered cone with the smal and eugenol (IRM) is exothe enamel/resin bond strength. or isthmus fracture of Class	al insulation. I end of the cone directed to rmic. Zinc phosphatically amalgam. Depth face is not generally recommend.	e occlusally.  er of one tooth to the center of the  ava  ward the bur shank.	