

Junior Perio Midterm, October 30, 2009- answer key

1. Osteoplasty in periodontal osseous surgery involves:
  - B. reshaping of non-supporting alveolar bone
2. Ostectomy in periodontal osseous surgery involves
  - D. removal of alveolar bone attached to a tooth.
3. Osseous resective surgery is most effective on:
  - A. periodontitis patients with slight to moderate loss of periodontal support.
4. "Positive" alveolar bone architecture is found when:
  - A. the interproximal bone level of teeth is coronal to the mid-facial and mid-lingual bone level.
5. The therapeutic goals of osseous resective surgery include:
  - C. creating gingival morphology that enhances oral hygiene performance.
6. In osseous resective surgery, flattening of interproximal bony craters is performed only after:
  - C. facial and lingual bone is thinned.
7. Which of the following is a shortcoming of osseous resective therapy?
  - A. Loss of periodontal attachment often occurs on initially shallow periodontal sites not affected by periodontitis.
8. Which instrument would you use for subgingival calculus removal from the distal surfaces of posterior teeth?
  - A. gracey 13/14
9. According to the Carranza textbook, which of the following does not involve removal of plaque and calculus from tooth surfaces?
  - A. curettage
10. When utilizing suture material, which of the following are true?
  - A. Chromic gut is treated with chromic acid to increase tensile strength
  - B. Gut resorbs by proteolysis in 4-5 days
  - C. Silk offers easy handling and knot tying
  - D. All of the above- correct answer is D

11. There is an association with HLA- Human Leukocyte Antigen used in tissue typing for bone marrow and organ transplantation and the occurrence of gingival overgrowth in patients taking certain medications, several studies find a particular association with cyclosporine. Which of the following are true?
- A. HLA- DR2 phenotype -50% of the renal transplants on cyclosporine show gingival overgrowth
  - B. HLA- B37 phenotype is associated with more severe overgrowth
  - C. HLA- DR1- seems to play a role against overgrowth induced by cyclosporine
  - D. All of the above correct answer is D
12. The width of keratinized gingiva is measured as the distance from the
- A. free gingival margin to the mucogingival junction
13. In managing mucogingival deformities, which of the following are addressed ?
- A. to correct gingival width
  - B. to correct gingival recession
  - C. to correct frenum pull
  - D. All of the above correct answer is D
14. Which of the following medications often result in gingival overgrowth?
- B. calcium channel blockers, phenytoin, and cyclosporine
15. Miller Class I recession defects can be distinguished from Class II defects by assessing the
- A. involvement of the mucogingival junction
16. All of the following are true regarding placing periodontal packs after surgery **EXCEPT**
- A. to protect the surgical wound
  - B. to minimize patient discomfort
  - C. help with post operative bleeding
  - D. to speed healing correct answer is D
17. According to the Carranza textbook, a gingivectomy procedure is all of the following **EXCEPT**
- D. used to manage 3 walled infrabony defects
18. Which of the following are true regarding healing after a gingivectomy?
- D. epithelial cells migrate at 0.5 mm per day
19. A gingivectomy may be performed by electrosurgery, which of the following is **true** regarding healing
- C. Deep resections close to bone can cause more gingival recession and bone necrosis

20. Regarding the external bevel gingivectomy technique, which of the following are **false**?
- C. the bevel is at a 90 degree angle to the tooth
21. No minimum width of attached gingiva has been established as a standard necessary for gingival health. Persons with excellent oral hygiene may maintain healthy areas with almost no attached gingiva.
- A. Both statements are true.
22. Management of periodontal pockets surgically includes all of the following **except**
- A. provide access for scaling and root planning
  - B. establish gingival contours that are optimal for plaque control
  - C. to create optimal osseous architecture
  - D. to regenerate lost Periodontium
  - E. create reverse architecture to allow for better access for plaque control - correct answer is E
23. Indications for periodontal surgery include which of the following?
- A. to manage periodontal pockets
  - B. to correct mucogingival deformities
  - C. to provide for restorative needs
  - D. all of the above correct answer
24. Which factors must be considered before choosing to perform a gingivectomy?
- A. evaluation of the osseous topography
  - B. attachment levels
  - C. anatomic considerations
  - D. esthetics
  - E. all of the above- correct answer
25. Healing after scaling and curettage results in:
- B. the formation of a long junctional epithelium with no new connective tissue attachment
26. Regarding frenum and the Frenectomy procedure, which of the following is **false**?
- D. All frenum must be removed
27. Which of the following factors does **NOT** influence the result of probing measurements?
- C. width of keratinized gingiva

28. A number of clinical trials demonstrates that flap procedures performed in patients with proper plaque control often result in gain of clinical attachment. Flap surgery in plaque-contaminated dentition showed similar results.
- A. First statement is true, second statement is false.
29. To gain access to alveolar bone which of the following is most appropriate?
- C. full thickness flap
30. Regarding a pedicle autograft which of the following is **false**?
- D. the color match is very poor
31. Partial thickness flap includes:
- B. the epithelium and a layer of the underlying connective tissue
32. The apically positioned flap technique could be performed in the following locations **except**:
- C. palatal maxillary teeth
33. Which of the following surgical procedures is specifically designed to preserve the gingival width?
- B. apically positioned flap
34. A periodontal pocket 6mm deep is present at distal #15. Tooth #16 is missing. Adequate amount of keratinized tissue is present. Periapical radiograph of the area shows no osseous defects. The most direct approach to pocket elimination in such a case is:
- A. gingivectomy procedure
35. The Modified Widman Flap technique as described by Ramfjord and Nissle is sutured with:
- A. interrupted direct sutures in each interdental space
36. When performing the Modified Widman Flap the following statements are correct **except**:
- C. osseous recontouring is done to establish ideal bone architecture
37. It is possible to have a deep crater in the bone between the facial and lingual plates without any radiographic indication.
- A. true
38. The Modified Widman technique
- C. is performed for exposing root surfaces for instrumentation

39. Angular defects are classified on the basis of the number of missing osseous walls.

- B. false  
It's the number of **remaining walls!!!!**

40. Which of the following are techniques for addressing gingival augmentation for root coverage and/or to gain keratinized tissue?

- A. Pedicle grafts
- B. Coronally advanced grafts
- C. Semilunar pedicles
- D. Free gingival grafts
- E. All of the above correct answer is E

41. Periodontal osseous surgery belongs to which of the following categories?

- B. resective procedures

42. If bone resection has been carried out in the interdental area, the buccal and lingual/palatal supporting bone margins of adjacent teeth may have to be resected to compensate for discrepancies in bone height resulting from the interdental bone resection. This type of osseous surgery is called:

- B. ostectomy

43. Regarding free gingival grafts all of the following are true except?

- E. color match is ideal

44. Examples of osteoplasty include the following except:

- C. elimination of bone walls of circumferential osseous defects

45. Flaps used in resective surgery heal with:

- A. a normal junctional epithelium apical to the cementoenamel junction

46. Osseous craters

- 1. Interproximal osseous concavities
- 2. are confined within the facial and lingual walls
- 3. are the most common intrabony defects
- 4. are considered one walled defects

- C. 1, 2, 3

47. Which of the following are true regarding a free gingival graft?

- A. increase the width of the attached gingiva
- B. deepen the vestibule
- C. complete coverage of an exposed root is not always achieved
- D. all of the above- correct answer

48. The most common etiology of marginal tissue recession is:
- A. improper tooth brushing technique
49. The ideal thickness for a free gingival graft is
- B. 1.0-1.5 mm
50. Pedicle grafts (laterally sliding grafts) are best indicated for managing which of the following?
- A. narrow, isolated mandibular recession