

2002

Corrected

NAME _____
SEAT _____

Removable Partial Denture Quiz #2 (A)

Directions

Submit name and seat#

Select the best available answer

No questioning instructors other than a type error

1. The RPD component responsible for facilitating the common path of insertion of a RPD is called a (an) _____?
a. major connector
b. minor connector
c. guide plane
d. ☒ guide plate
2. Upon jaw opening or disoccluding; the component responsible for keeping the RPD from unseating (dislodging) is a(an) _____?
a. occlusal vest
b. indirect retainer
c. ☒ direct retainer
d. major connector
3. An occlusal (maxillary) scheme with a full ideal (#1-16) number of teeth except for numbers 3,4,5 missing due to extractions is what kennedy classification?
a. kennedy class I
b. kennedy class II
c. ☒ kennedy class III
d. kennedy class IV
4. An occlusal (maxillary) scheme with only numbers 6,7,8,9,10 and 11 remaining is what kennedy classification?
a. ☒ kennedy class I
b. kennedy class II
c. kennedy class III
d. kennedy class IV
5. Which direct retainer would cause a class 1 lever action (cantilever) on an abutment next to a distal extension?
a. ☒ suprabulge
b. infrabulge
c. "I" bar (RPI) clasp system
d. "half T" bar clasp system
6. Guiding planes are affected by the antero-posterior tilt of the cast.
a. ☒ True
b. False
7. A direct retainer exerts its greatest force at the tooth's height of contour.
a. ☒ True
b. False
8. The components of a RPI clasp are a distocclusal rest, proximal plate and I-bar.
a. True
b. ☒ False

9. Factors that determine the selection of a clasp are configuration of the survey line, location and degree of undercut and whether or not the abutment is bordering a distal extension or tooth-bound space.

☒ a. True

☐ b. False

10. The undercut gauge used for wrought wire is 0.01 inch.

☐ a. True

☒ b. False

Spring 2004

Corrected

90%

good job

RPD Quiz #2

15 MINUTES

Student Name _____

B

Row/Seat Number _____

Instructions: Please print all written answers. If the instructor cannot read your answer, the answer cannot be graded. There is only one word for each blank space.

Grading:

All questions are worth 10 points

90-100 = A

80-88 = B

78-70 = C

68 and below = F

1. List all of the metal components of a clasp assembly. (Note: All parts must be listed for credit. Partial credit will not be given.)

- a. Major/Minor Connector
- b. Rests
- c. Retentive Arms
- d. Bracing/Supporting Arm

2. An undercut is defined as:

- ☒ a. The portion of the surface of an object that is below the height of contour in relationship to the path of insertion.
- ☐ b. The portion of the surface of an object that is above the height of contour in relationship to the path of insertion.
- ☐ c. The contour of the cross-sectional portion of a residual ridge or dental arch that prevents the insertion of a prosthesis.
- ☒ d. a only
- ☐ e. b and c
- ☐ f. a and c

3. In the mandibular arch, the primary stress-bearing area for vertical forces is the shelf buccal

4. Recontouring survey lines on abutment teeth accomplishes the following:

- ☒ a. Moves/lowers the survey line closer to the rotational point
- ☐ b. Exposes dentin and should not be done
- ☒ c. Reduces off-vertical forces
- ☐ d. a only
- ☒ e. a and c only

10

bottomed tof

5. Full palatal coverage major connectors are indicated:
- ☒ (a) in most situations in which some or all anterior teeth remain
 - ☒ (b) in Class II arch with a posterior modification and some missing anterior teeth in distal extension edentulous areas
 - ☒ (c) in Class I arch with one to four premolars and some missing anterior teeth remaining, and abutment support is poor and cannot otherwise be enhanced; residual ridges have undergone extreme vertical resorption; direct retention is difficult to obtain
 - ☒ (d) in the absence of a pedunculated torus
 - ☒ (e) all of the above
6. A Kennedy Class II clinical situation indicates the following:
- ☒ a. Unilateral edentulous area posterior to the abutment
 - ☒ b. Bilateral edentulous areas posterior to the abutments
 - ☒ c. Unilateral edentulous areas with abutments posterior and anterior
 - ☒ d. An edentulous area anterior to the abutments
7. Which of the following statements about an occlusal rest is INCORRECT. (Select one answer)
- ☒ a. Spoon-shaped
 - ☒ b. Inclined toward the center of the tooth
 - ☒ c. Prepared with the floor of the rest at an angle less than 90 degrees from the vertical
 - ☒ d. Prepared with the marginal ridge reduced 2.5 mm to allow sufficient bulk of the metal and all line angles rounded
 - ☒ e. Prepared with the junction of the occlusal rest and proximal surface representing the widest portion of the rest seat
8. Which of the following statements about an embrasure rest is INCORRECT. (Select one answer)
- ☒ a. It is often prepared on premolar teeth
 - ☒ b. Extends over the occlusal surfaces of two approximating teeth
 - ☒ c. Has thru and thru clearance of at least 3 mm in centric and eccentric movements
 - ☒ d. Is also known as a kissing clasp or back to back Akers
9. When surveying a diagnostic cast, a left lateral tilt is performed in order to:
- ☒ a. Increase or decrease the undercut areas on the proximal surfaces of abutment teeth.
 - ☒ b. Increase or decrease the undercut areas on the buccal surfaces of abutment teeth.
 - ☒ c. Raise or lower the height of contours on the buccal surfaces of abutment teeth.
 - ☒ d. a only
 - ☒ e. b and c
10. List two advantages for selecting an A-P palatal strap.
- a. Pleasant to the Patient
 - b. Absorbs almost all forces directed upon it.

Name _____

Lab Seat _____

RDIV—Complete Denture Section

Quiz #2

Seat Number _____

40 minutes

Please answer the following questions to the best of your ability. All essay questions must be **LEGIBLE**. If they cannot be read, they will not be graded.

Please print.

1. Knowledge of edentulous anatomy is extremely important when making a denture. What influence do the following anatomic structures have in the fabrication of complete dentures? **PLEASE BE SPECIFIC**
(Total 50 points....5 points for each response)

Canine eminence: On the maxilla, canine eminence should be perpendicular to the occlusal plane, and on the mand., the canine eminence should be tilted

Tuberosity: Slightly buccally from the occlusal plane. Determines the distal extension of the max. denture.

Coronoid process: Should end before tuberosity. Determines the distal extension of the mand. denture.

Zygomatico-alveolar crest: Provides for attachment of Zygomaticus muscle in the max. denture.

Mentalis: Provides retention to the mandibular anterior denture.

Buccal shelf: Extends from max./mand. denture to provide room for mastication of food; prevents food impaction, masseter

External oblique ridge: Provides an area for muscle attachment to the alveolar bone of the mandible

Retromolar pad: Determines the height of the teeth on the mandibular denture. (Mand. occlusal table = 1/2 ht. of retromolar pad)

Retromylohyoid space:

Posterior area of Mand. denture should not impinge upon this area

Modiolus:

Provides retention to mand. posterior denture

2. When setting anteriors for a complete denture, what is the major anatomical factor affecting their location? **BE SPECIFIC (5 pts.)**

The residual ridge. The ^{max / mand} anteriors should be labial to the ridge, except for the cuspid, which is centered over the crest of the ridge.

3. The interdental papilla in the complete denture set-up should be: **(5 pts.)**

- (a) Concave in the anterior region
- (b) Convex in all directions
- (c) Convex only in the anterior region
- (d) Concave in all directions

4. Mrs. Smith just had a new set of dentures made by Dr. Toothacher. When she returned for her first post-operative visit, she informed the doctor that every time she yawned or opened her mouth wide, her upper denture would fall down. What would you suspect to be the cause of this problem? **BE SPECIFIC (10 pts.)**

Mrs. Smith's max denture did not have a posterior palatal seal ("ah" line), therefore, air was becoming trapped under her denture,

5. List five indications for using non-anatomic posterior denture teeth when fabricating a complete denture. **(10 pts.)**

- (a) Patient is a bruxer
- (b) Flabby residual ridge
- (c) Previous denture had non-anatomic teeth
- (d) Patient is not reliable (for frequent adjustments of anatomic teeth)
- (e) Excessive horizontal forces during mastication

6. List five factors that determine the Neutrocentric concept. **(10 pts.)**

- (a) No curve of Wilson/Specie present
- (b) Max teeth are parallel to interpupillary line and base of skull.
- (c) All teeth touch a flat occlusal plane.
- (d) Max + Mand teeth touch each other in a parallel plane
- (e) Provides an area of contact between max + mand teeth instead of a point.

7. What is the rationale for developing a concave surface on the lingual flange of a mandibular denture? **BE SPECIFIC**

Extra credit: 10 pts.

To provide adequate room for movement of the tongue during mastication and to prevent a food trap.

Dr. Thornton, Please Re-grade, Thank you

RPD Quiz #2

First initial of last name:

30 MINUTES

Student Name

Row/Seat Number

What? 68

Instructions: Please print all written answers. No partial credit given. If the instructor cannot read your answer, the answer cannot be graded.

Grading:

All questions are worth 10 points, unless indicated differently

90-100 = A

80-88 = B

78-70 = C

68 and below = F

1. What is the difference between an infrabulge and suprabulge clasp? Give examples of each.

An infrabulge clasp is positioned apical to the height of contour - I bar

A Suprabulge clasp is positioned coronal to the height of contour - ^{NO} ~~Grading arm of an Akers clasp~~

2. When fabricating the design of a Kennedy Class II RPD, explain (using biomechanics, anatomy and physiology) the importance of the retromolar pad coverage?

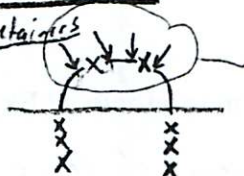
10 A class II RPD has a single posterior abutment on one side of the arch. Given that the fulcrum line lies anterior to the edentulous area significant measure must be taken to include coverage of the free distal retromolar pad area. This will increase the retention of the RPD and allow increased masticatory forces to be placed on the DE without unseating the RPD.

3. Kennedy Classifications: to be placed on the DE without unseating the RPD.

a. Class I, Mod. 2 (Include fulcrum line and indirect retainer(s))

x = edentulous area

↓ = indirect retainers

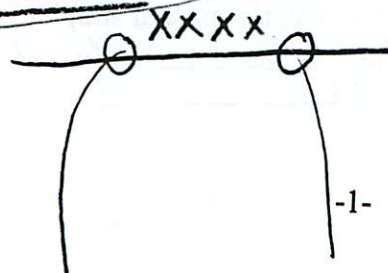


Are you saying there are 4 IR's?

b. Class IV (Include fulcrum line with location of direct and indirect retainer(s))

X = edentulous area

O = direct retainers



No indirect retainers

NO

4.

What are the advantages and disadvantages in using the anterior-posterior palatal strap?

Advantages:

*Pleasant to patient
Very rigid
Offers good support*

Disadvantages:

*Most metal in patients mouth may cause increased irritation
Rigidity may cause in wear to opposing occlusion*

5. A Kennedy Class III clinical situation indicates the following: (5 points)

- a. Unilateral edentulous area posterior to the abutment
- b. Bilateral edentulous areas posterior to the abutments
- c. Unilateral edentulous areas with abutments posterior and anterior
- d. An edentulous area anterior to the abutments

6. Provide definitions for the following terms: (20 points)

Intaglio surface Inner surface of an RPD, Area touching the palatal tissue,
Base metal Any metal that facilitates
Passivity Forces placed on dentition when denture is in place but (NOT) under masticatory force
Angle of convergence Angle of converging clasps assembly with the minor connectors

7. What is the difference between a fulcrum line and axis of rotation?

Fulcrum line is a line drawn through the most posterior abutment teeth. Axis of rotation is a point + around which the RPD may rotate given varying edentulous scenarios and masticatory forces

8. Name the three classes of levers and give an example of each.

*1st - tooth to tooth
2nd - car jack
3rd - pry bar*

9. Of the three lever systems, which one is the most efficient? Explain why.

Third class because the amount of force required to displace the smaller side around the fulcrum is much less than the forces required to move the opposite side of a 1st or 2nd class lever

10. List two indications for selecting a Posterior palatal strap. (5 points)

- a. No anterior teeth being retained
- b. Teeth borne RPD

80

RPD Quiz #2

First initial of last name: _____

20 MINUTES

Student Name _____

Row/Seat Number _____

100

Instructions: Please print all written answers. No partial credit given. If the instructor cannot read your answer, the answer cannot be graded. There is only one word for each blank space.

Grading:

All questions are worth 10 points

90-100 = A

80-88 = B

78-70 = C

68 and below = F

Hoping you could please check #1.

1. List all of the metal components of a clasp assembly. (Note: All parts must be listed for credit. Partial credit will not be given.)
- a. Minor connector
 - b. Rest
 - c. Retentive clasp
Reciprocal clasp
2. What is the difference between the retromolar pad and the pear-shaped pad?
- The retromolar pad is an area of nonkeratinized tissue overlying glandular tissue posterior to the 3rd molar region in the mandible. The pear-shaped pad is at the location of the 3rd molar extraction site, anterior to the retromolar pad area.
3. An indirect retainer is defined as:
- ☒ (a) The component of a RPD that assists the direct retainer(s) in preventing displacement of the distal extension denture base away from the tissues
 - ☐ (b) The component of a RPD that assists the bracing arm in stabilization and prevents horizontal displacement of the distal extension
 - ☒ (c) A metal component of the RPD located anterior to the fulcrum line
 - ☒ (d) a and c
 - ☐ (e) b and c
4. Define denture resin packing
- The denture resin packing is the pressing of resin or denture material into the preformed mold within the refractory flask.

5. When designing a RPD, after the clinician has surveyed and re-contoured the abutment teeth, the next procedure to be performed on the diagnostic cast would be: then create rest seats for the appropriate

metal components previously determined by edentulous area and surveyed contours. To tripod the cast.

Full palatal coverage major connectors are indicated:

- (a) in most situations in which some or all anterior teeth remain
(b) in Class II arch with a posterior modification space and some missing anterior teeth in distal extension edentulous area
(c) in Class I arch with one to four premolars and some or all anterior teeth remaining, and abutment support is poor and cannot otherwise be enhanced; residual ridges have undergone extreme vertical resorption; direct retention is difficult to obtain
(d) in the absence of a pedunculated torus
(e) all of the above

6. A Kennedy Class IV clinical situation indicates the following:

- a. Unilateral edentulous area posterior to the abutment
b. Bilateral edentulous areas posterior to the abutments
c. Unilateral edentulous areas with abutments posterior and anterior
(d) An edentulous area anterior to the abutments

7. List three physical characteristics that beryllium provides to base metal properties:

- a. Increased fluidity ↓ melt range
b. Improved castability
c. Increased hardness

8. For a Kennedy Class III clinical situation, how many indirect retainers should be used?

For a Kennedy class III at least 4 indirect retainers should be used.

9. According to McCracken, flexibility of the clasp arm is a product of:

- a. length, b. diameter, c. cross-sectional component material

10. List two indications for selecting a Posterior palatal strap.

- a. No anterior teeth to be replaced
b. Tooth supported RPD

Class III



Question 6

70 60

RPD Quiz #2

First initial of last name: _____

20 MINUTES

Student Name _____
Row/Seat Number _____

Instructions: Please print all written answers. No partial credit given. If the instructor cannot read your answer, the answer cannot be graded. There is only one word for each blank space.

Grading:

All questions are worth 10 points

90-100 = A

80-88 = B

78-70 = C

68 and below = F

1. List all of the metal components of a clasp assembly. (Note: All parts must be listed for credit. Partial credit will not be given.)
 - a. Clasp
 - b. Rest
 - c. Supportive/Bracing Arm Guide Plate
2. What is the difference between the retromolar pad and the pear-shaped pad?
Retromolar pad is more posterior; the pear-shaped pad is right next to the area of an extracted third molar.
3. An indirect retainer is defined as:
 - (a) The component of a RPD that assists the direct retainer(s) in preventing displacement of the distal extension denture base away from the tissues ✓
 - (b) The component of a RPD that assists the bracing arm in stabilization and prevents horizontal displacement of the distal extension
 - (c) A metal component of the RPD located anterior to the fulcrum line ✓
 - (d) a and c
 - (e) b and c
4. Define denture resin packing
The application of the resin to some of the ~~components~~ ^{resin} metal components of the RPD example (The placement of the resin on the meshwork over the DE) packing the resin in.

5. When designing a RPD, after the clinician has surveyed and re-contoured the abutment teeth, the next procedure to be performed on the diagnostic cast would be: prepare the rest seats on the cast

6. Full palatal coverage major connectors are indicated:
- (a) in most situations in which some or all anterior teeth remain
 - (b) in Class II arch with a posterior modification space and some missing anterior teeth in distal extension edentulous area
 - (c) in Class I arch with one to four premolars and some or all anterior teeth remaining, and abutment support is poor and cannot otherwise be enhanced; residual ridges have undergone extreme vertical resorption; direct retention is difficult to obtain
 - (d) in the absence of a pedunculated torus
 - (e) all of the above
- These were all in the notes for Full palatal coverage Major connectors*
- These were all in the*

6. A Kennedy Class IV clinical situation indicates the following:
- a. Unilateral edentulous area posterior to the abutment
 - b. Bilateral edentulous areas posterior to the abutments
 - c. Unilateral edentulous areas with abutments posterior and anterior
 - d. An edentulous area anterior to the abutments

7. List three physical characteristics that beryllium provides to base metal properties:
- a. Whitens
 - b. Strengthens
 - c. Increases the melting point of the base metal

8. For a Kennedy Class III clinical situation, how many indirect retainers should be used?
- Zero indirect retainers should be used but 4 clasps should be used

9. According to McCracken, flexibility of the clasp arm is a product of:

a length, b diameter, c Material d Cross-sectional form (pear shaped or circular)

10. List two indications for selecting a Posterior palatal strap. -

a. Used with tooth borne RPDs (Class III)

b. No replacement of anterior teeth

more flexible.

50

[Signature]

First initial of last name: _____

RPD Quiz #2

20 minutes

Student Name _____

Row/Seat Number _____

Instructions: Please **print** all written answers. **No partial credit given.** If the instructor cannot read your answer, they cannot be graded.

Grading:

All questions are worth 10 points

90-100 = A

80-88 = B

78-70 = C

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1. Name at least three types of chromium-containing, base metal dental casting alloys.

- a. NICKEL - CHROMIUM
- b. COBALT - CHROMIUM NICKEL
- c. COBALT CHROMIUM

2. What affect does the buccinator muscle have on a removable partial denture? (Be specific, i.e., describe the muscle and its affect on the denture, do not include origin and insertion)

THE BUCCINATOR MUSCLE WILL CAUSE THE RPD TO LIFT AWAY FROM THE TISSUE, ~~AND~~ THE VERTICAL

3. An indirect retainer is defined as:

- (a) The component of a RPD that assists the direct retainer(s) in preventing displacement of the distal extension denture base away from the tissues
- (b) The component of a RPD that assists the bracing arm in stabilization and prevents horizontal displacement of the distal extension
- (c) A metal component of the RPD located anterior to the fulcrum line
- (d) a and c
- (e) b and c

4. Which element is added to base metal alloys to reduce tarnish and corrosion?

- (a) silver
- (b) cobalt
- ✓ (c) chromium
- (d) nickel
- (e) vanadium

5. Explain why the retromolar pad is always covered by the denture base of a distal extension removable partial denture.

✓ THE COVERAGE OF THE RETROMOLAR PAD AIDS IN DENTURE STABILITY AND HELPS IN FORCE DISTRIBUTION, KEEPING PERIODONTIUM & REMAINING TEETH HEALTHY

6. Provide an illustration of the following Kennedy classifications:

a). Class II, modification 2:



b). Class III, modification 2:



7. Draw the fulcrum line and the location of the indirect retainer for Question 6a.

8. How many indirect retainer(s) are required for Question 6b? Explain your answer

2, YOU NEED 1 INDIRECT RETAINER FOR EACH EDENTULOUS AREA

9. For a Kennedy Class I RPD, what are the advantages for placing an occlusal rest on the mesial surface of a distal abutment instead of the distal surface of the same tooth?

✓ PLACING A DISTAL OCCLUSAL REST CAUSES TIPPING OF THE RPD. A MESIAL REST ALSO CREATES STABILITY AND PREVENTS BONE LOSS.

10. What are the indications for selecting a lingual plate as a major connector on a mandibular RPD?

✓ IF THE PERSON HAS A HIGH LINGUAL FRENUM OR YOU PLAN ON ADDING ANTERIOR TEETH TO THE PROSTHESIS IN THE FUTURE.

RPD Quiz #2

First initial of last name: [redacted]

20 MINUTES

Corrected

Student Name [redacted]

Row/Seat Number [redacted]

Instructions: Please print all written answers. No partial credit given. If the instructor cannot read your answer, the answer cannot be graded.

Grading:

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90-100 = A

80-88 = B

78-70 = C

68 and below = F

15

1. List all of the metal components of a clasp assembly. (Note: All parts must be listed for credit. Partial credit will not be given.)

- a. Rest
b. Reciprocating clasp (or bracing arm)
c. Retention clasp

2. Passivity is defined as force from clasp assembly only exerted on tooth upon insertion and removal not removal

3. An indirect retainer is defined as:

- (a) - The component of a RPD that assists the direct retainer(s) in preventing displacement of the distal extension denture base away from the tissues
(b) The component of a RPD that assists the bracing arm in stabilization and prevents horizontal displacement of the distal extension
(c) - A metal component of the RPD located anterior to the fulcrum line
(d) a and c
(e) b and c

4. List the 5 factors that will provide the most desirable path of placement when the RPD is inserted and removed. (Each answer is worth 2 points)

guidelines, interferences, Retention, Reciprocating, aesthetics
areas areas

5. Why is occlusion an important factor in RPD design? Because an RPD is a dynamic design. You want the forces to be evenly distributed so as to preserve the periodontium and remaining tooth structure.

15
10
25

6. Provide two objections for using a U-shaped major connector:

a. flexible at open ends

b. not as rigid as the ~~horseshoe~~ horseshoe so it doesn't provide as much support

7. Which of the following statements about an occlusal rest is INCORRECT? (Select one answer)

- a. Spoon-shaped T
- b. Inclined toward the center of the tooth T
- c. Prepared with the floor of the rest at an angle less than 90 degrees from the vertical ✓
- d. Prepared with the marginal ridge reduced 2.5 mm to allow sufficient bulk of the metal and all line angles rounded ✓
- e. Prepared with the junction of the occlusal rest and proximal surface representing the widest portion of the rest seat ✓

8. Which of the following statements about an embrasure rest is INCORRECT? (Select one answer)

- a. It is often prepared on premolar teeth ✓
- b. Extends over the occlusal surfaces of two approximating teeth
- c. Has thru and thru clearance of at least 3 mm in centric and eccentric movements ✓
- d. Is also known as a kissing clasp or back to back Akers ✓

9. When surveying a diagnostic cast, an antero-posterior tilt is performed in order to:

- a. Increase or decrease the undercut areas on the proximal surfaces of abutment teeth. ✓
- b. Increase or decrease the undercut areas on the buccal surfaces of abutment teeth. ✓
- c. Raise or lower the height of contours on the buccal surfaces of abutment teeth. ✓
- d. a only
- e. b and c

10. Which minor element in nickel-chromium alloys forms an intermetallic compound with nickel, and contributes to the alloys strength & hardness?

- a. nickel
- b. tungsten *hardening*
- c. manganese *fluidity*
- d. aluminum
- e. beryllium *fluidity*

Corrected

50

First Initial of Last Name

Name

RDIV—Complete Denture Section

Quiz #2

Lab Seat

30 minutes

Please answer the following questions to the best of your ability. All essay questions must be **LEGIBLE**. If they cannot be read, they will not be graded.
Please print.

1. Knowledge of edentulous anatomy is extremely important when making a denture. What influence do the following anatomic structures have in the fabrication of complete dentures? **PLEASE BE SPECIFIC**
(Total 25 points....5 points for each response)

Hamular notch:

X This lies posterior in maxillary arch. If a proper impression of this is not taken the denture may cause soreness of this.
Alveolar ridge:

✓ This is one of the stress bearing areas. However, resorption of this area is very high.

Geniotubercle:

✓ Tubercle which the genioglossus attaches. Improper impressioning of this will lead to the denture causing soreness of this spot.

Buccinator:

✓ This muscle limits the length (width and extension) of the buccal flange of denture. This muscle tends to loosen as age progresses.

Mentalis:

✓ This muscle limits the labial flange extension of mandibular denture.

This muscle pulls chin up and rolls the lip down.

17
33
5

2. Retention, stability, and support are critical factors that must be assessed and incorporated during denture fabrication. Of these three factors circle the factor(s) that are provided or enhanced by the anatomical structure.
(Total 60 points....10 points for each response)

Anatomical Structure	Critical Factors		
Example: Buccal shelf	Retention	Stability	Support
Answer: Support, because the buccal shelf provides the primary support area in the mandibular arch			

Anatomical Structure

Critical Factors

Canine eminence

Retention

Stability

Support

X

Tuberosity

Retention

Stability

Support

X

Labial vestibule

Retention

Stability

Support

✓

Retromolar pad

Retention

Stability

Support

✓

Retromylohyoid space

Retention

Stability

Support

✓

Rugae

Retention

Stability

Support

X

3. Mrs. Smith just had a new set of dentures made by Dr. Toothacher. When she returned for her first post-operative visit, she informed the doctor that every time she eats food and swallows, she feels like she has a sore throat. What would you suspect to be the cause of this problem? BE SPECIFIC (10 pts.)

The denture extends too far posterior or too palatal seal. It extends so far back it is putting pressure on the muscles required for swallowing.

4. List five criteria for posterior tooth selection when fabricating a complete denture. (5 pts.) No partial credit given

1. condition of the ridge
2. neuromuscular control
3. occlusion NO
4. patient's desire NO
5. opposing arch

- ① opposing arch soreness.
- ② reaching
- ③ pressure dent. on.
- ④ ridge relationship
- ⑤ opposing arch.

33

C

First Initial of Last Name _____

PRINT NAME: _____
RDIV—Complete Denture Section

Quiz #2-B

20 minutes

Please answer the following questions to the best of your ability. Unless indicated, each question is worth 10 points. There is only **one response** to every question.

1. Which of the following is/are useful guide(s) in determining a patient's occlusal vertical dimension?
1. Appearance
 2. Phonetics
 3. Observation of the rest position
 4. Pre-extraction profile records
- ✓
- A. (1) (2) (3)
B. (1) (3)
C. (2) and (4)
D. (4) only
☒ E. All of the above
- 10x 2. Based on textbook reading and lecture notes, the alveololingual sulcus is divided into three regions. When border molding has been successfully completed, what is the typical configuration (shape) of this region?
- Triangle
- ✓ 3. Research studies have shown that, in general, the facial surface of central incisors are located 7 to 10 mm anterior to the incisive papilla
- ✓ 4. Which of the following methods best describe the most accurate technique for obtaining the centric relation position?
- ☒ (a) Place patient in a supine position, mouth open, touch the tongue to the palate and close on the back teeth
- (b) Place patient in upright position, and ask them to bite down
- (c) Place patient in upright position, mouth open, press on the tip of the chin, push the lower jaw back, and bite down
- (d) None of the above

5. Retention, stability, and support are critical factors that must be assessed and incorporated during denture fabrication. Of these three factors **circle the factor(s)** that are provided or enhanced by the anatomical structure. ~~Answer: Support, because the buccal shelf provides the primary support area in the mandibular arch~~
(Total 30 points....6 points for each response)

<u>Anatomical Structure</u>	<u>Critical Factors</u>		
<i>Example:</i> Buccal shelf	Retention	Stability	Support
Answer: Support, because the buccal shelf provides the primary support area in the mandibular arch			

<u>Anatomical Structure</u>	<u>Critical Factors</u>		
Canine eminence	Retention	<u>Stability</u>	Support - 3
Hamular notch	Retention	<u>Stability</u>	Support - 6
Rugae	Retention	Stability	<u>Support</u> ✓
Tuberosity	Retention	<u>Stability</u>	Support - 3
Labial vestibule	<u>Retention</u>	Stability	Support - 3

6. In complete dentures, the external oblique line is used as a guide for determining the:

- (a) position of the posterior teeth
(b) height of the occlusal plane
(c) termination of the buccal flange
(d) termination of the lingual flange

7. An incorrect occlusal vertical dimension causes clicking sounds when the patient talks and pain when swallowing. To correct this problem, the dentist should do which of the following?

- (a) decrease the rest vertical dimension and diminish the interocclusal distance
(b) increase the rest vertical dimension and increase the interocclusal distance
(c) decrease the occlusal vertical dimension and increase interocclusal distance
(d) Increase the occlusal vertical dimension and diminish the interocclusal distance
(e) None of the above

Name _____
RDIV—Complete Denture Section
Quiz #2

Lab Seat _____

Please answer the following questions to the best of your ability. All essay questions must be **LEGIBLE**. If they cannot be read, they will not be graded. Please print.

1. What is the name of the space and range distance between occluding surfaces of maxillary and mandibular teeth when mandible is in its physiologic rest position? (10 points)

Interocclusal space 2-4mm is the range between the occluding surfaces of maxillary & mandibular teeth when mandible is in its physiologic rest position

2. Explain difference/similarities between post-dam and posterior palatal seal. (10 points)

The posterior palatal seal helps to compensate polymerization shrinkage during denture processing. Creates retention for the maxillary denture. Post-dam does not compensate for polymerization shrinkage of the denture but does help with retention of the denture.

3. When is the ideal time to develop the posterior palatal seal? (Select one) (10 points)

☐ At the initial appointment

☐ Before the final impression

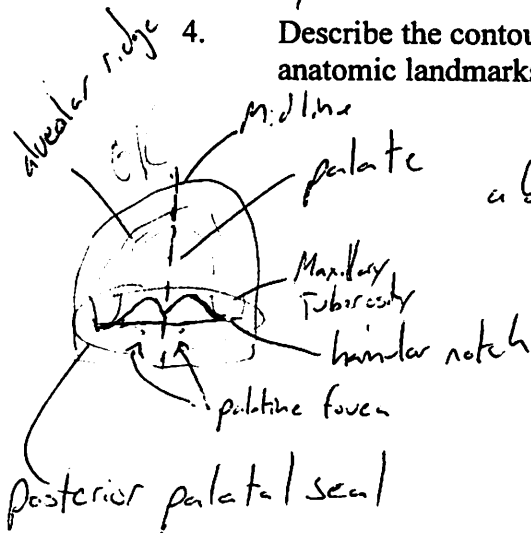
☐ When the occlusal wax rims are developed and before tooth set-up

☒ Anytime prior to sealing the waxed dentures for processing

4. Describe the contours of the posterior palatal seal. Use an illustration with anatomic landmarks/ amount of reduction. (30 points)

The posterior palatal seal should look like a butterfly or for me it looks like a bow

The amount of reduction at the mid line of the posterior palatal seal should be 1mm and it needs to taper to about 0.5mm at the hamular notch area.



5. Describe ALL of the problems created when the vertical dimension of occlusion has an inadequate interocclusal distance. (20 points)

Clicking of teeth.
facial distortion.
Problems with swallowing
angular cheilitis
phonetic problems
soreness and tenderness
resorption due to trauma

6. What is the closest speaking space? (10 points)

The closest speaking space is 1-2 mm

7. List two reference lines that should be used when developing the plane of occlusion for complete dentures? (10 points)

Inter papillary line and the alaragus line
(Campers line)

8. When the external form of the complete denture is waxed, describe the contours of the interdental papilla. (10 points)

The interdental papilla should be flat or slightly concave. (prevents food impaction)