01. **Hand cutting instruments are composed of:**
   A. Handle and neck.
   B. Handle and blade only.
   C. Handle, shank and blade.
   D. Handle, neck and shank.
   E. Handle, neck, shank, and blade.
   
   **Key:** C

   **Topic:** Restoration / Cutting

02. **Use of water spray during cutting procedures have following advantages:**
   A. Dehydration of oral tissues.
   B. Tooth restorative material and other debrins are carried away.
   C. Pulp is protected from heat.
   D. Clean view of cavity can be achieved.
   E. Bacterial contamination controlled.
   
   **Key:** C

   **Topic:** Restoration / Cutting

03. **G.V. Black concluded that the following areas on tooth surface are relatively non self cleanable:**
   A. Pits and fissures.
   B. Tips and cusps.
   C. Crests of marginal/ crusing ridges.
   D. All inclined planes of cusps and ridges.
   E. Fossae.
   
   **Key:** A

   **Topic:** Restoration / Cutting

04. **Senile carious lesions are most commonly found exclusively on the following areas of the teeth:**
   A. Pits and fissures.
   B. Oulusal, incisal, facial and lingual embrasures.
   C. Inclined planes of cusps.
   D. Root surfaces of teeth.
   E. Interdental surfaces.
   
   **Key:** D

   **Topic:** Carries
05. **The main advantage in developing high copper amalgam alloy is:**
   A. Elimination of gamma 1 phase.
   B. Increase the strength of amalgam.
   C. Decrease the flow value of amalgam.
   D. Elimination of gamma phase 2.
   E. Reduce the conductivity of amalgam.
   **Key: D**

   **Topic:** Clinical Dental Materials

06. **In a cavity preparation cavo-surface margin will be junction between:**
   A. Cavity wall/ floor and adjacent tooth surface.
   B. Cavity wall and floor.
   C. Floor of occlusal box and approximial box.
   D. Approximial wall of one tooth with another.
   E. Axial wall and occlusal floor.
   **Key: A**

   **Topic:** Restoration / Cutting

07. **The optimum depth of a self threading pin for an amalgam restoration is:**
   A. 0.5 mm.
   B. 1 mm.
   C. 2 mm.
   D. 4 mm.
   E. 5 mm.
   **Key: C**

   **Topic:** Restoration / Cutting

08. **Diamonds are superior to bur for cutting:**
   A. Cementum.
   B. Dentine.
   C. Enamel.
   D. Soft tissues.
   E. Carries.
   **Key: C**

   **Topic:** Restoration / Cutting
09. **Class III amalgam restorations are usually prepared on:**
   A. Distal surfaces of anterior teeth.
   B. Mesial surfaces of canine.
   C. Distal surfaces of canine.
   D. Distal surfaces of incisors and mesial surfaces of canine.
   E. Mesial and distal surfaces of all the teeth.

   **Key:** C

   **Topic:** Restoration / Cutting

10. **The final finishing of silicate/ glass ionomers restoration is done after:**
   A. 7½ minute.
   B. 24 hours.
   C. 30 minutes.
   D. 1 hour.
   E. 1 minute.

   **Key:** B

   **Topic:** Clinical Dental Materials

11. **Pits and fissure sealants are usually derived from:**
   A. BIS-GMA resin.
   B. Polyurethanes.
   C. Zinc phosphate.
   D. Both A and B.
   E. Ataconic acid.

   **Key:** D

   **Topic:** Clinical Dental Materials

12. **Instruments used for handling resins are made of:**
   A. Stainless steel.
   B. Carbon steel.
   C. Teflon coated metal.
   D. Platinum.
   E. Gold.

   **Key:** C

   **Topic:** Restoration / Cutting
13. **Tooth surfaces involved in class II design 6 are:**
   A. Occlusal, proximal, part of facial and lingual surfaces.
   B. Occlusal, facial and lingual surfaces.
   C. Proximal and facial/lingual surfaces.
   D. Proximal, axial angle and facial/cervical
   E. Two or more surfaces of endodontically treated tooth.
   **Key: A**
   **Topic:** Restoration / Cutting

14. **In class V design 3 cavity preparation, extension look like:**
   A. Y.
   B. Snake eye.
   C. Moustache.
   D. Dove-tail.
   E. Kidney shape.
   **Key: C**
   **Topic:** Restoration / Cutting

15. **Toilet of cavity is:**
   A. Removal of debris by washing with \(\text{H}_2\text{O}\).
   B. Removal of debris by cold air spray.
   C. Removal of debris by hot air spray.
   D. Washing the cavity with soap solution.
   E. Washing the cavity with medicament.
   **Key: A**
   **Topic:** Restoration / Cutting

16. **Most common fracture occurring in amalgam restoration is seen at:**
   A. Cavosurface margin.
   B. The contact area.
   C. The isthmus area.
   D. Proximal box.
   E. Gingival floor.
   **Key: C**
   **Topic:** Restoration / Cutting

17. **The most widely used irrigant displaying optimal cleansing bactericidal properties is:**
   A. Formouresol.
   B. Sodium Hypochlorite.
   C. Saline.
   D. Hydrogen peroxide.
   E. Gultraldehyde.
   **Key: B**
   **Topic:** Endodontic
18. **Pain on percussion before endodontic treatment indicates:**
   A. Reversible pulpitis.
   B. Irreversible pulpitis.
   C. Pulp necrosis.
   D. Inflammation of periodontal tissues.
   E. Exposed dentine.

   **Key:** D

   **Topic:** Endodontic

19. **For the extripation of entire pulp, necrotic debris, and foreign material, one should use:**
   A. Raemers.
   B. Files.
   C. Barbed broaches.
   D. Bures.
   E. Plain broaches.

   **Key:** C

   **Topic:** Endodontic

20. **In RCT, over preparation of the outer wall of the optical curvature of the canal with inflexible instrument will cause:**
   A. Zipping.
   B. Perforation.
   C. Elbow formation.
   D. Ledge formation.
   E. Crazing.

   **Key:** A

   **Topic:** Endodontic

21. **While examining the RCT done by other dentist, you find a case where the radiograph shows densely packed gutta-percha in coronal thuid but poorly packed in apical thuid, the most likely cause is:**
   A. Excessive packing of dentine chips in apical one thuid.
   B. Failure to coat accessing cones with sealers.
   C. Failure to obtain proper depth of penetration with compacting instrument.
   D. Tool much root canal sealer.
   E. Use of accessory cones with fine tips.

   **Key:** C

   **Topic:** Endodontic
22. A patient presents wet a draining sinus tract in labial vestibule of a maxillary central incisor. To confirm your diagnosis about the origin of pathoses you should:
   A. Open the concerned root chamber.
   B. Taking the bite-wing radiograph.
   C. Thread gutta-percha through the root canal and expose the radiograph.
   D. Thread the gutta-percha through the tract and expose a radiograph.
   E. Measure the periodontal packet.
   **Key: D**

   **Topic:** Endodontic

23. Which of the following is the appropriate file for removing gutta-percha from root canals?
   A. K file.
   B. H file.
   C. Flexo file.
   D. S file.
   E. Rat tail type.
   **Key: D**

   **Topic:** Endodontic

24. A young 12 years old boy presents with reddish over-growth of tissue, protending from carious exposure in lower molar. What may be the possible diagnosis?
   A. Pulp polyp.
   B. Pulpal hyperemia.
   C. Varicosed polyp.
   D. Pulpal granuloma.
   E. Gum boil.
   **Key: A**

   **Topic:** Endodontic

25. An 8 years old boy presents with class III fracture of tooth # 11, which appeared an hour ago, the apex is not closed. Your treatment should be:
   A. Direct pulp capping with Ca (OH)₂.
   B. Pulpectomy follows by RCT.
   C. Pulpotomy and fill with Ca (OH)₂.
   D. Smoothening of ledges and restore with composite.
   E. Restoration with Glass ionomer cement.
   **Key: C**

   **Topic:** Endodontic
26. What is the space between the lateral incisors and canine called in maxillary deciduous teeth?
   A. Leeway space.
   B. Primate space.
   C. Freeway space.
   D. Bolton space.
   E. Interdental space.
   **Key: B**

   **Topic:** Peadodontic

27. The recommended concentration of fluoride in communal water supply is:
   A. 0.1 ppm.
   B. 0.5 ppm.
   C. 1.0 ppm.
   D. 2.0 ppm.
   E. 5 ppm.
   **Key: C**

   **Topic:** Restoration / Cutting

28. The pulp chamber in milk teeth in proportion to that of permanent teeth is:
   A. Bigger in milk teeth.
   B. Smaller in milk teeth.
   C. Same in both teeth.
   D. Absent in milk teeth.
   E. Less vascular in milk teeth.
   **Key: A**

   **Topic:** Peadodontic

29. The treatment of choice for vital, wide apex tooth which shows pulp exposure is:
   A. Pulpotomy.
   B. Pulpectomy.
   C. Apexification.
   D. Apenogenesis.
   E. Indirect pulp capping.
   **Key: D**

   **Topic:** Endodontic
30. **What is the common cause of failure of pulpotomy, that employs Ca(OH)$_2$ in primary molars?**
   A. Pulp fibrosis.
   B. Pulp calcification.
   C. Ankylosis.
   D. Internal resorption.
   E. Profused bleeding.

   **Key:** D

   **Topic:** Paedodontic

31. **The walking bleach technique is:**
   A. Use heat treatment.
   B. Requires patients to report in 24 hours.
   C. Can be done in poorly obturated canals.
   D. Uses mixtures of sodium perborate and 3% hydrogen peroxide.
   E. Tooth stain remover (Hydrochloric acid)

   **Key:** D

   **Topic:** Bleaching

32. **Recapitulation is:**
   A. Uses successively larger files to flare the canals.
   B. Removing the debris with smaller instruments than the instruments that go to apex.
   C. Circumferential filing with H files.
   D. Using various types of files and reamers to enlarge canals.
   E. Irrigation of canals with sodium hypochlorite.

   **Key:** B

   **Topic:** Endodontic

33. **Biologically active sealer which promote peri-apical healing contain:**
   A. ZnO Engenol.
   B. Cortico-steroids.
   C. Ca(OH)$_2$.
   D. Silver-points.
   E. Zinc phosphate.

   **Key:** C

   **Topic:** Endodontic
34. **In aesthetic dentistry, colour of the tooth is:**
   A. Hue.
   B. Chroma.
   C. Value.
   D. Translusency.
   E. Prismatic effects
   **Key: A**

**Topic:** Crown Bridge

35. **Post crown is indicated in the following case:**
   A. Insufficient coronal tooth portion.
   B. Loss of enamel but dentine is still left in crown.
   C. Insufficient root portion of tooth.
   D. Middle third fracture of root.
   E. Erosion of tooth substance.
   **Key: A**

**Topic:** Crown Bridge

36. **A stabilized root fracture with evidence of hyper-calcification of pulpal space requires:**
   A. No further treatment.
   B. Endotherapy with gutta percha.
   C. Endotherapy with Ca(OH)$_2$.
   D. Surgical removal of apical segment.
   E. Post retained crowny.
   **Key: A**

**Topic:** Crown Bridge

37. **While making a crown for erosion of tooth substance, ideal choice of crown is:**
   A. Porcelain crown.
   B. Metal crown.
   C. Porcelain fused metal crown.
   D. Acrylic crown.
   E. Partial crown.
   **Key: C**

**Topic:** Crown Bridge
38. In patients showing generalized attrition, normal treatment prior to crown preparation is:
   A. Desensitization of crown of tooth.
   B. Periodontal surgery.
   C. Sealing.
   E. Crown built up with composite.
   **Key: D**

   **Topic:** Crown Bridge

39. Temporary crown/bridges are made to last for short period of time to:
   A. Protect prepared dentine.
   B. To maintain appearance.
   C. To prevent tilting/over eruption of prepared tooth.
   D. Maintain occlusion.
   E. Improve masticatry process.
   **Key: C**

   **Topic:** Crown Bridge

40. Identify the macromechanical minimal preparation bridge:
   A. Resin bounded bridge.
   B. Adhesive bridge.
   C. Maryland bridge.
   D. Conventional bridge
   E. Rochette bridge.
   **Key: E**

   **Topic:** Crown Bridge

41. How many surfaces does the pontic has:
   A. Three.
   B. Four.
   C. Five.
   D. Seven.
   E. Two.
   **Key: C**

   **Topic:** Crown Bridge
42. **Cast, soldered and porcelain are three types of:**
   A. Fixed connectors.
   B. Moveable connectors.
   C. Partial connectors.
   D. Both A and B.
   E. Temporary connectors.

   **Key:** A

   **Topic:** Crown Bridge

43. **A good treatment plan in planning the bridge is:**
   A. To inform the patient about present condition extent of proposed treatment time and cost.
   B. Not to tell anything to the patient.
   C. Patients detailed past dental history.
   D. Patient must know about drawbacks of treatment.
   E. The patient should be only told the minimum possible things mainly about time and cost.

   **Key:** A

   **Topic:** Crown Bridge

44. **Which crown will have the maximum retention:**
   A. Full cast crown.
   B. 3/4 crown and no grooves.
   C. 3/5 crown and groove.
   D. 7/8 crown and groove.
   E. Post retain crown.

   **Key:** A

   **Topic:** Crown Bridge

45. **Tooth buds generally initiated after birth or :**
   A. Entire permanent dentician.
   B. All permanent and some primary teeth.
   C. First and second premolars only and second and third molars only.
   D. It is very variable.
   E. Lower central incisors only.

   **Key:** C

   **Topic:** Peadodontic