

Database of questions for the Medical-Dental Final Examination  
(LDEK)  
Part 1  
Periodontology

Modified 12.12.2025

Question nr 1

What is the diagnosis for the following clinical scenario: a 22-year-old generally healthy, non-smoking female demonstrates the following periodontal parameters: 28 teeth, API 10%, BOP 4%, in the teeth 16, 11 and 26 probing depths of 6-7 mm, CAL 5-6 mm, in the tooth 11 mobility measured by Periotest +19, vertical bone loss around the teeth 16, 11 and 26 up to 60% of the root length in the radiography?

- A. clinically healthy gingiva on reduced periodontium.
- B. gingivitis on reduced periodontium.
- C. periodontitis stage II, grade C.
- D. periodontitis stage III, grade C.
- E. periodontitis stage IV, grade B.

Question nr 2

Epidemiological studies conducted in Poland in 2012 revealed that the rate of individuals with CPI 4 was:

- A. 1-6%.
- B. 5-10%.
- C. 16-20%.
- D. 20-30%.
- E. > 30%.

Question nr 4

Which of the following conditions **is not** a disease?

- A. black hairy tongue.
- B. fissured tongue.
- C. superficial glossitis.
- D. macroglossia.
- E. geographic tongue.

Question nr 5

The disease is manifested by various lesions, such as vesicles, bullae, papules, erythema, erosions, not only intraorally, but also at the site of other mucosa membranes (eye, anus, nose). The above description refers to:

- A. pemphigus.
- B. pemphigoid.
- C. multiform exudative erythema.
- D. Stevens-Johnson syndrome.
- E. herpetiform RAS.

Question nr 6

Lesions located on the gingiva and the hard palate are pathognomonic of:

- A. primary herpetic gingivostomatitis.
- B. recurrent herpes infection.
- C. shingles.
- D. infectious mononucleosis.
- E. herpangina.

Question nr 7

The term 'critical initial periodontal probing depth' was introduced for periodontal treatment decision-making that concerns:

- A. SRP.

- B. resective periodontal surgery.
- C. regenerative periodontal surgery.
- D. surgical treatment of periimplantitis.
- E. surgical treatment of gingival recession.

Question nr 8

Indicate the **false** statement concerning recurrent herpetiform aphthous ulcers:

- A. the lesions are multiple (>10).
- B. the lesions can coalesce into larger ulcers.
- C. the ulcerative lesions are large and very painful.
- D. the lesions heal spontaneously within at least 7 days by epithelialization.
- E. the lesions appear at the sites where minor salivary glands are present.

Question nr 9

Which clinical feature of leukoplakia determines its belonging to IV stage according to van der Waal:

- A. size of the single eruption is above 20 mm.
- B. multifocal lesions, which size is higher than 4 cm.
- C. location in the fundum of the oral cavity.
- D. surface of a white spot is "cracked".
- E. lesion remains for over 3 weeks.

Question nr 11

Which of the following group of patients **does not belong** to the high-risk periodontal group that should be primarily engaged in preventive periodontal care and treatment?

- A. patients receiving tacrolimus following kidney transplant.
- B. patients with periodontitis that had an ischemic stroke.
- C. patients with gingivitis and uncontrolled diabetes type I.

D. pregnant women with previously diagnosed periodontitis.

E. 18-year-old individuals with a genetic risk of inherited periodontitis.

#### Question nr 12

Which factor **is not** associated with a measurement error in periodontal charting of PD and CAL?

A. type of periodontal probe calibration.

B. angle of periodontal probe insertion in relation to the long axis of the tooth.

C. force of the probing.

D. type of the periodontal tissue measured: gingival sulcus vs. gingival pocket vs. periodontal pocket.

E. number of sites measured around the tooth.

#### Question nr 13

Which type of the immune responses increases inflammation and tissue destruction in periodontitis?

A. release of Th1-type cytokines by T helper cells.

B. release of specific antibodies against periopathogens by B cells.

C. polyclonal stimulation of B cells.

D. induction of the cell signaling pathway resulting in the increase in osteoprotegerin release.

E. phagocytosis by neutrophils.

#### Question nr 15

Which of the symptoms **is not** taken into account in the new classification of mucogingival deformities and conditions?

A. relation of interproximal CAL to buccal CAL.

B. presence of non-caries cavities.

C. keratinized gingiva height.

D. gingival thickness.

E. gingival papilla height.

Question nr 16

Precancerous Manganotti cheilitis is:

- A. glandular cheilitis.
- B. erosive cheilitis.
- C. granulomatous cheilitis.
- D. sun-induced cheilitis.
- E. chronic cheilitis.

Question nr 17

Which systemic disease is most closely bi-directional to periodontitis?

- A. myocardial infarction.
- B. diabetes mellitus type 2.
- C. prematurity.
- D. chronic obstructive pulmonary disease.
- E. chronic nephropathy.

Question nr 19

Which of the following are used in the treatment of red types of oral lichen planus:

- A. inhibitors of HSV replication - acyclovir and famciclovir.
- B. alpha-lipoic acid-based drugs.
- C. calcineurin inhibitors.
- D. salivary replacements.
- E. systemic antibiotics, especially clindamycin.

Question nr 20

Which of the following is the source of matrix metalloproteinases?

- A.** Gram-negative bacteria.
- B.** neutrophils.
- C.** macrophages.
- D.** fibroblasts.
- E.** all the above.

**Question nr 22**

Gingival manifestations of systemic conditions are part of:

- A.** gingival diseases associated with dental plaque.
- B.** plaque-induced gingivitis.
- C.** gingival diseases modified by systemic factors.
- D.** periodontitis as a manifestation of systemic diseases.
- E.** non-plaque induced gingival lesions.

**Question nr 23**

What clinical features should be taken into account in the differential diagnosis of herpetic gingivostomatitis and herpangina?

- A.** type of lesion.
- B.** presence of systemic symptoms.
- C.** skin lesions.
- D.** age of the patient.
- E.** localization of lesions in the oral cavity.

**Question nr 24**

White, fur-like coating attached to the underlining mucosa can be the symptom of:

- A.** lichen planus.
- B.** leukoplakia.

C. leukoedema.

D. candidiasis.

E. *linea alba*.

Question nr 27

A 45-year-old, generally healthy, smoking male has been referred to the periodontist. Clinical examination revealed chronic periodontitis and periodontal abscess in tooth 36 with PD=10 mm. What is the most appropriate treatment in this case?

A. prescription of clindamycin 300 mg every 6 hours for 5 days.

B. medical counseling for smoking.

C. rinsing of the pocket of tooth 36 with 10% solution of metronidazole and supragingival scaling of the mandibular teeth.

D. drainage of the abscess, rinsing with physiological saline, subgingival scaling in tooth 36.

E. extraction of tooth 36 under block anesthesia.

Question nr 28

Indicate **the false** statement about Periostat:

A. reduces the levels of collagenases in the GCF.

B. inhibits PGE<sub>2</sub> release.

C. inhibits bone resorption .

D. does not affect periodontal pocket bacteria.

E. has similar to high-dose doxycycline effects.

Question nr 29

Hereditary gingival fibromatosis is a part of:

A. plaque-induced gingivitis.

B. plaque-induced gingival diseases.

C. non-plaque-induced gingival diseases.

D. non-plaque-induced gingivitis.

E. periodontitis induced by general diseases.

Question nr 30

Which criteria should be fulfilled to diagnose periimplantitis when no previous history is available?

- 1) PD > 4 mm and CAL > 3 mm;
- 2) PD > 6 mm;
- 3) BoP +;
- 4) clinically visible implant mobility;
- 5) keratinized gingiva height of 1 mm;
- 6) vertical bone loss of 3 mm in the radiography.

The correct answer is:

A. all the above.

B. 1,3.

C. 2,4.

D. 3,6.

E. 1,6.

Question nr 31

What ulcers are characterized by a firm, infiltrated base?

- 1) traumatic;
- 2) neutropenia-associated;
- 3) cancerous;
- 4) tuberculosis-associated;
- 5) syphilis-associated.

The correct answer is:

A. 1,2.

B. 2,3.

C. 3,4.

D. 3,5.

E. all the above.

Question nr 32

Which of the following periodontal risk factors exhibits a dose-effect relationship?

- A. certain single-nucleotide polymorphisms.
- B. smoking.
- C. mucocutaneous disorder-associated.
- D. BMI.
- E. personal income.

Question nr 33

Which of the following statements concerning oral leukoplakia **is false**?

- A. verrucous type is caused by HPV1 and HPV2.
- B. epithelial dysplasia starts in the basal layer.
- C. color of the lesion may vary from white, creamy to white-red.
- D. risk of malignant transformation increases with time.
- E. macule is the primary lesion.

Question nr 35

Indicate the true statements describing the effect of smoking on periodontitis:

- 1) higher CAL loss is linked to longer history of smoking.
- 2) smoking does not affect the clinical course of advanced aggressive periodontitis.
- 3) effects of smoking are especially important in individuals with genetic susceptibility to periodontitis.
- 4) mean values of PD and BOP are higher in smokers than in non-smokers.
- 5) smoking is a non-modifiable risk factor for periodontitis.

The correct answer is:

- A. 1,2.
- B. 1,3.
- C. 2,4.
- D. 3,5.
- E. 4,5.

Question nr **36**

Indicate the **false** sentence concerning the etiopathogenesis of lichen planus:

- A. it can result from the replication of HPV virus of the mucosa and the skin.
- B. there is a significant similarity of its histopathological image to graft-versus-host disease.
- C. drug-induced lesions are defined as lichenoid.
- D. connection with hypersensitivity type IV is postulated.
- E. keratinocyte apoptosis of the stratum basale of the epidermis occurs.

Question nr **37**

Leukotoxin is produced by:

- A. *Porphyromonas gingivalis*.
- B. *Tannerella forsythia*.
- C. *Aggregatibacter actinomycetemcomitans*.
- D. *Treponema denticola*.
- E. all the above.

Question nr **38**

Which of the following HPV viruses is/are responsible for the malignant transformation of leukoplakia?

- A. HPV 16.
- B. HPV 6 and 11.
- C. HPV 13 and 32.
- D. HPV 18.
- E. HPV 16 and 18.

Question nr **39**

Which of the following **is not** a disease of the tongue?

- A. rhomboid glossitis.
- B. geographic tongue.
- C. black hairy tongue.
- D. fissured tongue.
- E. Hunter's glossitis.

Question nr **40**

Which feature **does not** help to differentiate between universal and Gracey curettes?

- A. clinical effectiveness of SRP.
- B. number of cutting edges.
- C. angle between the face of the blade and the terminal shank.
- D. possibility to perform both root debridement and curettage.
- E. laborious sharpening.

Question nr **41**

How acute non-lymphoblastic lymphoma is characterized in the new classification of periodontal diseases and conditions?

- A. it is a systemic factor modifying dental plaque-induced gingivitis.
- B. it causes specific infection in the non-plaque-induced gingivitis.
- C. it causes necrotizing periodontitis as an effect of mild and transient immunodeficiency.
- D. it is a periodontitis criterion of grade C.
- E. it is a systemic disease coded as ICD-10 affecting periodontal tissues.

Question nr **42**

What is the prevalence of gingival lesions in the patients with acute leukemia?

- A. about 1%.
- B. about 5%.

C. about 10%.

D. about 17%.

E. over 40%.

#### Question nr 43

Which of the protocols of non-surgical periodontal treatment is recommended in the treatment of generalized aggressive periodontitis?

A. classical protocol of mouth disinfection.

B. FMD with povidone iodine and systemic antibiotic treatment.

C. local drug delivery.

D. SRP with systemic low-dose doxycycline.

E. extraction of the teeth with pathological mobility with early implant installation.

#### Question nr 44

Which of the following HPV-related oral lesions **does not** require surgical excision?

A. focal epithelial hyperplasia.

B. papilloma.

C. genital wart.

D. verrucous epithelial dysplasia.

E. keratoacanthoma.

#### Question nr 45

What clinical symptoms of periimplantitis would advocate the systemic use of metronidazole according to CIST protocol?

1) PD > 5 mm;

2) periotest value +20;

3) presence of purulent exudate in the pocket;

4) CAL > 6 mm;

5) bone loss greater than 25 % of the length of the implant.

The correct answer is:

A. 1,3,5.

**B.** 1,2,3.

**C.** 2,3,4.

**D.** 1,3,4.

**E.** 1,4,5.

**Question nr 46**

What is the diagnosis for the following clinical scenario: a 45-year-old generally healthy female with a history of periodontal treatment demonstrated the following periodontal parameters: API 20%, BOP 8%, probing depths not exceeding 3 mm, clinical attachment levels not exceeding 4 mm, bone loss of 25% in the radiography?

**A.** clinical healthy intact periodontium.

**B.** clinically healthy gingiva on reduced periodontium.

**C.** gingivitis on reduced periodontium.

**D.** non-plaque-induced gingivitis.

**E.** periodontitis stage II, grade B.

**Question nr 47**

What is the goal of periodontal surgery?

**A.** better access to the root surface.

**B.** clinical reduction of periodontal pockets.

**C.** resolution of inflammation and establishing the environment for a new connective tissue attachment formation.

**D.** re-establishing the physiological and esthetical gingival line.

**E.** all the above.

**Question nr 48**

Interventional studies proved that non-surgical periodontal treatment is beneficial in terms of the improvement of the typical disease markers in patients with:

**A.** diabetes mellitus type 2.

**B.** non-ST elevated myocardial infarction.

**C.** ischemic stroke.

**D.** pre-eclampsia.

**E.** infectious endocarditis.

**Question nr 49**

Which features enable to distinguish between the universal and Gracey curette?

1) length of the shank;

2) length of the cutting edge;

3) number of the cutting edges;

4) angulation of the shank;

5) angulation of the cutting edge towards the shank;

6) hardness of the cutting edge.

The correct answer is:

**A.** 1,2,3,4,5.

**B.** 1,2,5.

**C.** 2,3,5.

**D.** 3,4,5.

**E.** 3,5,6.

**Question nr 50**

Which of the following pathologies is specific to periodontitis only?

**A.** formation of a subgingival biofilm.

**B.** loss of connection between epithelial attachment cells and the enamel surface.

**C.** apical proliferation of the epithelial attachment.

**D.** lymphocyte infiltration into the subepithelial connective tissue.

**E.** increase in the volume of gingival crevicular fluid.

**Question nr 51**

In the case of reactive leukoplakia, alcohol abuse as a causative factor is reported in:

- A.** 80% of cases.
- B.** 70% of cases.
- C.** 50% of cases.
- D.** 10% of cases.
- E.** alcohol is not an independent causative factor for leukoplakia.

Question nr **55**

Indicate the correct approach in the case of a periodontal abscess in the tooth 26 in an immunocompetent patient that previously has received systemic clindamycin for periodontal reasons:

- A.** empirical administration of another antibiotic - amoxicillin with clavulanic acid 625 mg 3 times a day for 5 days.
- B.** collection of subgingival plaque from the pocket for the molecular test of periopathogens and their drug sensitivity.
- C.** SRP performance in the 2nd quadrant.
- D.** abscess draining through the pocket or through a vertical incision done at least 2 mm below gingival margin.
- E.** tooth extraction.

Question nr **56**

Gingivitis associated with diabetes belongs to the group of:

- A.** dental plaque-associated gingivitis .
- B.** gingival diseases modified by systemic factors associated with the endocrine system.
- C.** gingival diseases modified by systemic factors associated with blood dyscrasias.
- D.** non-plaque associated gingival diseases.
- E.** gingival symptoms of systemic diseases.

Question nr **57**

What is the first-choice medication in the treatment of ANUG:

- A.** metronidazole.

- B. doxycycline.
- C. azithromycin.
- D. amoxicillin/clavulanic acid.
- E. clindamycin.

Question nr **58**

Which of the following etiological factors is not related to the angular cheilitis?

- A. chronic erythematous candidiasis.
- B. infection with multi-resistant *Staphylococcus aureus*.
- C. type IV hypersensitivity reaction.
- D. prolonged extraction of the lower wisdom tooth.
- E. long-term use (10 years) of full dentures.

Question nr **59**

A 55-year-old generally healthy female is referred with painful lesions on the buccal mucosa. During clinical examination symmetrical whitish bilateral lines with lesions surrounding erosions are revealed in the retromolar buccal mucosa. Which diagnosis should be taken into account as the most probable?

- A. minor aphthous ulcers.
- B. homogenous leukoplakia.
- C. erosive oral lichen planus.
- D. lupus erythematosus.
- E. pemphigus vulgaris.

Question nr **60**

Leukotoxin is:

- A. endotoxin secreted by Gram-negative bacteria.
- B. endotoxin secreted by Gram-positive bacteria.

- C. exotoxin secreted by Gram-negative bacteria.
- D. exotoxin secreted by *A. actinomycetemcomitans*.
- E. none of the above.

Question nr **61**

Which of the following statements is **false**?

- A. autogenous bone graft is obtained from the same individual.
- B. allogenic bone graft is obtained from the same individual.
- C. xenograft is a bone obtained from the animals.
- D. alloplastic graft is made of non-organic material.
- E. allogenic bone graft might be obtained from the organ donor bank.

Question nr **62**

Which of the following connects the tooth to the bone in the most coronal part of the root?

- A. acellular afibrillar cementum.
- B. acellular extrinsic fiber cementum.
- C. acellular intrinsic fiber cementum.
- D. cellular intrinsic fiber cementum.
- E. cellular mixed stratified cementum.

Question nr **63**

Which of the following statements describing gingival hyperplasia **is false**?

- A. it usually appears 3 months after the beginning of pharmacotherapy.
- B. it is usually present in the anterior maxillary and mandibular teeth.
- C. in the patients receiving cyclosporine, children are most frequently affected.
- D. it is characterized by an increased inflammatory response in the presence of dental plaque.

E. it starts from the marginal gingiva, later involves the gingival papilla.

Question nr 64

Indicate the clinical symptom that **falsely** characterizes burning mouth syndrome:

A. symptoms remain for at least 2 weeks.

B. pain intermissions.

C. bilateral pain.

D. xerostomia spuria.

E. taste disorders.

Question nr 67

Viral diseases **cannot** manifest in the oral cavity in the form of:

A. vesicle.

B. papule.

C. nodule.

D. telangiectasia.

E. bulla.

Question nr 68

Intraepithelial bullae are present in:

A. pemphigus vulgaris.

B. pemphigoid.

C. erythema multiforme.

D. aphthous stomatitis.

E. erosive oral lichen planus.

Question nr 69

Which type of the root cementum is covering the area from the CEJ to the middle of the root and contains perpendicularly-oriented collagen bundles?

- A. acellular non-fiber cementum.
- B. acellular intrinsic fiber cementum.
- C. acellular extrinsic fiber cementum.
- D. acellular mixed fiber cementum.
- E. mixed extrinsic fiber cementum.

Question nr 71

IgG antibodies directed against the basement membrane of stratified cell epithelium are typical of:

- A. pemphigus vulgaris.
- B. pemphigoid.
- C. lichen planus.
- D. lupus erythematosus.
- E. recurrent aphthous stomatitis.

Question nr 72

What is a primary lesion in erosive oral lichen planus:

- A. papule.
- B. vesicle.
- C. macule.
- D. ulcer.
- E. bulla.

Question nr 73

Which periodontal condition is an indication for systemic antibiotic treatment?

- A. necrotizing gingivitis accompanied by systemic symptoms.
- B. single periodontal abscess in an immunocompetent patient.

- C. peri-implantitis with a clinically detectable implant mobility.
- D. gingival recession treatment in the maxilla using the tunnel technique.
- E. periodontitis treated with FMD protocol regardless of disease severity.

Question nr 74

Which of the following statements concerning the use of systemic antibiotics in the treatment of periodontitis **is false**?

- A. minimal antibiotic inhibition concentration is 500 times higher for bacterial biofilm than for planktonic bacteria.
- B. gingival crevicular fluid flow reduces minimal inhibition concentration.
- C. if repeated every 3 months, antibiotic therapy stimulates periodontal pathogens to develop multiple drug resistance.
- D. antibiotic therapy should be combined with non-surgical or surgical treatment.
- E. to reduce the risk of development of multi-drug resistance, antibiotics should be prescribed for at least 14 days.

Question nr 75

Which of the following protocols **is not** effective in the treatment of oral candidiasis?

- A. use of mouth rinse containing 0.2% chlorhexidine solution.
- B. use of mouth rinse containing 10% solution of acidic sodium bicarbonate.
- C. local application of miconazole, an imidazole derivative.
- D. systemic use of nystatin, a polyene macrolide.
- E. replacement of the denture in the case of denture stomatitis.

Question nr 76

Which of the following diseases **is not** caused by RNA viruses?

- A. herpangina.
- B. hand, foot and mouth disease.
- C. mumps.

**D.** AIDS.

**E.** focal epithelial hyperplasia.

**Question nr 77**

Which of the following belongs to the secondary lesions?

**A.** excoriation.

**B.** bulla.

**C.** vesicle.

**D.** papule.

**E.** erosion.

**Question nr 78**

Gracey curettes 7/8 and 9/10 are used for subgingival scaling of:

**A.** anterior teeth.

**B.** distal sites of posterior teeth.

**C.** mesial sites of posterior teeth.

**D.** buccal and lingual sites of posterior teeth.

**E.** none of the above.

**Question nr 79**

Which of the following belongs to the primary lesions?

**A.** scar.

**B.** rhagade.

**C.** ulcer.

**D.** crust.

**E.** pustule.

**Question nr 80**

What type of inheritance is presently believed to be associated with the periodontitis?

- A. autosomal dominant.
- B. autosomal recessive.
- C. X chromosome-linked.
- D. polygenic.
- E. polymorphic.

Question nr 81

Which of the following diseases is **not** caused by RNA viruses:

- A. hand, foot and mouth disease.
- B. herpangina.
- C. molluscum contagiosum.
- D. rubella.
- E. AIDS.

Question nr 82

Which of the following precancerous diseases is characterized by a moderate risk of malignancy development (10-20 %)?

- A. Bowen's disease.
- B. tertiary syphilis.
- C. leukoplakia.
- D. localized melanosis.
- E. lichen planus and leukoplakia.

Question nr 83

Which of the following can be used for the treatment of homogenous leukoplakia with no dysplasia after elimination of possible causative factors?

- A. antibiotics.

- B.** vitamin A based medicines.
- C.** anti-inflammatory drugs.
- D.** pain killers.
- E.** corticosteroids.

**Question nr 84**

Which of the following drugs applied locally into periodontal pockets contains chlorhexidine?

- A.** Chlosite.
- B.** Arestin.
- C.** Atridox.
- D.** Ligosan.
- E.** Periodontal Plus AB.

**Question nr 85**

Which of the following is a primary lesion in the course of shingles?

- A.** papule.
- B.** nodule.
- C.** vesicle.
- D.** erosion.
- E.** macule.

**Question nr 87**

The non-modified risk factors of periodontal disease are:

- A.** diabetes and genetic factors.
- B.** diabetes and smoking.
- C.** age and genetic factors.
- D.** gender and osteoporosis.

E. race and obesity.

Question nr 88

Which primary lesion is typical of oral *herpes simplex virus* infections?

A. papule.

B. vesicle.

C. macule.

D. ulcer.

E. nodule.

Question nr 89

Which of the following sentence describing orthodontic treatment in patients with periodontitis **is false**?

A. recreates interproximal contacts and corrects the position of pathologically migrated teeth.

B. when periodontal regenerative procedures are planned, orthodontic treatment should begin 6-9 month after the surgical procedure.

C. it takes longer than in periodontally healthy individuals.

D. it requires life-long retention after active treatment.

E. implants can be used to anchor the elements of the orthodontic appliance.

Question nr 90

Which of the following **does not** belong to the group of potentially malignant disorders characterized by moderate probability of malignant transformation?

A. leukoplakia.

B. actinic cheilitis.

C. acanthosis nigricans.

D. persistent ulcers.

E. oral lichen planus.

Question nr **91**

Which antiseptics are used in FMD protocol?

- A. phenolic compounds.
- B. quaternary ammonium compounds.
- C. oxygenating agents.
- D. herbal extracts.
- E. bisbiguanides.

Question nr **93**

Which of the following **does not** belong to the group of precancerous conditions characterized by the moderate probability of malignant transformation?

- A. leukoplakia.
- B. persistent ulcer.
- C. actinic cheilitis.
- D. senile keratosis.
- E. syphilis and tuberculosis.

Question nr **96**

The dysfunction of innate humoral and cellular immune response (e.g. an increase in CD25+ cells) is present in:

- A. lichen planus.
- B. recurrent aphthous stomatitis.
- C. recurrent herpes labialis.
- D. herpes zoster.
- E. pemphigus.

Question nr **97**

*Aggregatibacter actinomycetemcomitans* type A belongs to:

- A. red complex.
- B. yellow complex.
- C. orange complex.
- D. green complex.
- E. purple complex.

Question nr **98**

Which disease is characterized by the presence of Koplik's spots?

- A. rubella.
- B. measles.
- C. hand, foot and mouth disease.
- D. mumps.
- E. shingles.

Question nr **100**

Desquamative gingivitis **is not** a symptom of:

- A. oral lichen planus.
- B. pemphigoid.
- C. lupus erythematosus.
- D. Behçet's disease.
- E. pemphigus.

Question nr **101**

Disease entity that occurs in the oral cavity **only** in the course of HIV infection is named:

- A. hairy leukoplakia.
- B. pseudomembranous candidiasis.
- C. genital warts.

D. ulcerative periodontitis.

E. linear gingival erythema.

Question nr **102**

Stratum granulosum is present in the anatomical part of the oral cavity named:

A. epithelial attachment of the gingiva.

B. bottom of the vestibulum oris.

C. lip area inside the vermilion border.

D. hard palate.

E. mucosa of the cheeks.

Question nr **103**

Vitamin A in a solution and vitamin A acid are used in the treatment of:

A. herpetic stomatitis.

B. oral candidiasis.

C. erythema multiforme.

D. leukoplakia.

E. all of the above disorders.

Question nr **104**

Which of the following are the most appropriate factors to differentiate between gingivitis and periodontitis?

A. probing depth and gingival bleeding.

B. loss of alveolar bone and clinical attachment level.

C. gingival bleeding, root exposure, radiography.

D. gingival bleeding, purulent exudate from the pockets, root exposure, tooth mobility.

E. tooth mobility.

Question nr **105**

Paul-Bunnell-Davidsohn test confirms the diagnosis of:

- A. leukoplakia.
- B. lichen planus.
- C. hand, foot and mouth disease.
- D. recurrent aphthous stomatitis.
- E. mononucleosis.

Question nr **106**

Human herpes virus 8 causes:

- A. Burkitt's lymphoma.
- B. CMV infection.
- C. roseola.
- D. Kaposi sarcoma.
- E. condylomata acuminata.

Question nr **107**

Clonazepam might be used for the treatment of:

- A. leukoplakia.
- B. recurrent aphthous stomatitis.
- C. burning mouth syndrome.
- D. oral candidiasis.
- E. erythema multiforme.

Question nr **108**

Which of the following is characterized by a streaky fading of the dorsal surface of the tongue while putting it?

- A. black, hairy tongue.

- B. acute myeloid leukaemia.
- C. pernicious anemia.
- D. orofacial granulomatosis.
- E. acute erythematous candidosis.

Question nr **109**

Twenty-five-year-old male presented with fever, arthralgia and painful oral and lip lesions. Medical history revealed the use of paracetamol 2 days before the onset of the oral lesions. Clinically, multiple erythematous and erosive lesions on non-keratinized oral mucosa were present, together with lip edema and bullous exudative lesions. Additionally, conjunctivitis and lachrymation were visible. Which is a probable diagnosis?

- A. recurrent intraoral HSV infection.
- B. Behçet's disease.
- C. pemphigus vulgaris.
- D. erythema multiforme.
- E. systemic lupus erythematosus.

Question nr **110**

What is a typical clinical feature of pemphigus vulgaris:

- A. Wickham stria.
- B. Köbner phenomenon.
- C. Nikolsky's sign.
- D. positive Schiller's test.
- E. all the above.

Question nr **111**

Indicate the **false** statement concerning aggressive periodontitis:

- A. lack of symmetry and bone loss as in mirror image (X-ray).

**B.** in generalized presentation lesions affect most teeth, but as a rule with a higher intensity in the area of the first molars and incisors.

**C.** deep (over 3 mm in depth) arc-shaped bone defects are present.

**D.** family history of the disease is typical.

**E.** spontaneous remissions occur.

**Question nr 112**

Acantholysis with intraepithelial bulla formation is typical of:

**A.** pemphigoid.

**B.** linear IgA bullous dermatosis.

**C.** pemphigus.

**D.** lichen planus.

**E.** Duhring's disease.

**Question nr 113**

Socransky red (bacterial) complex includes:

**A.** *P. intermedia*, *T. forsythia*, *T. denticola*.

**B.** *P. gingivalis*, *T. denticola*, *A. actinomycetemcomitans*.

**C.** *A. actinomycetemcomitans*, *P. gingivalis*, *T. forsythia*.

**D.** *C. rectus*, *T. forsythia*, *T. denticola*.

**E.** *P. gingivalis*, *T. forsythia*, *T. denticola*.

**Question nr 114**

Which of the following drugs applied locally into periodontal pockets contains chlorhexidine?

**A.** Ligosan.

**B.** Arestin.

**C.** Atridox.

**D.** Periodontal Plus AB.

**E.** Periochip.

**Question nr 115**

Toxic epidermal necrolysis is a variant of:

**A.** lichen planus.

**B.** recurrent aphthous stomatitis.

**C.** erythema multiforme.

**D.** leukoplakia.

**E.** pemphigus vulgaris.

**Question nr 116**

Which of the following is not a secondary lesion:

**A.** erosion.

**B.** crust.

**C.** ulcer.

**D.** pustule.

**E.** scale.

**Question nr 117**

The symptoms of Miescher's syndrome are confined to:

**A.** granulomatous cheilitis.

**B.** glandular cheilitis.

**C.** erosive cheilitis.

**D.** sun-induced cheilitis.

**E.** chronic cheilitis.

**Question nr 118**

The detection of serum antinuclear antibodies Ro (anti-SS-A) or La (anti-SS-B) points to the diagnosis of:

- A. lichen planus.
- B. pemphigoid.
- C. pemphigus.
- D. Sjögren's syndrome.
- E. erythema multiforme.

Question nr **119**

Which of the following is a rare oral manifestation of AIDS?

- A. oral candidiasis.
- B. Kaposi's sarcoma.
- C. necrotizing gingivitis.
- D. hairy leukoplakia.
- E. lichen planus.

Question nr **120**

EBV **is not** a causative factor of:

- A. Burkitt's lymphoma.
- B. infectious mononucleosis.
- C. hairy leukoplakia.
- D. Kaposi's sarcoma.
- E. nasopharyngeal carcinoma.

Question nr **121**

Wickham striae are typical of:

- A. leukoplakia.
- B. herpetic stomatitis.

- C. oral lichen planus.
- D. recurrent aphthous stomatitis.
- E. Behçet's disease.

Question nr **123**

Which of the following **does not** belong to Socransky's orange complex:

- A. *P. intermedia*.
- B. *P. nigrescens*.
- C. *S. constellatus*.
- D. *F. nucleatum*.
- E. *T. denticola*.

Question nr **124**

Periostat contains doxycycline at a dose of:

- A. 10 mg.
- B. 20 mg.
- C. 50 mg.
- D. 100 mg.
- E. 200 mg.

Question nr **125**

Ulcers (which affect the submucosa) are **not** present in:

- A. tuberculosis.
- B. erythema multiforme.
- C. OSCC.
- D. syphilis.
- E. minor RAS.

Question nr **126**

Which of the following **is not** a symptom of severe periodontitis?

- A. clinical attachment loss.
- B. bone loss.
- C. tooth mobility.
- D. furcation involvement.
- E. spontaneous gingival bleeding.

Question nr **128**

Kaposi's sarcoma is caused by:

- A. cytomegalovirus.
- B. Varicella zoster virus.
- C. human herpes virus type 6.
- D. human herpes virus type 8.
- E. Herpes simplex virus.

Question nr **129**

Which lesion is typical of the majority of oral viral diseases?

- A. ulcer.
- B. crust.
- C. bulla.
- D. vesicle.
- E. nodule.

Question nr **131**

Kobner's sign is positive in:

- A. herpetic gingivostomatitis.

- B. leukoplakia.
- C. lichen planus.
- D. recurrent aphthous stomatitis.
- E. pemphigus.

Question nr **132**

Which of the following periodontal indices is used for the evaluation of gingivitis extension?

- A. CPI.
- B. PI.
- C. Papilla Bleeding Index.
- D. BOP.
- E. measurement of the volume of gingivocrevicular fluid with Periotest .

Question nr **134**

Retroviridae might cause:

- A. rubella.
- B. hand, foot and mouth disease.
- C. AIDS.
- D. Kaposi's sarcoma.
- E. focal epithelial hyperplasia.

Question nr **135**

Which two diseases are most commonly accompanied by desquamative gingivitis?

- A. lichen planus and psoriasis.
- B. pemphigus and pemphigoid.
- C. lichen planus and pemphigoid.

D. pemphigoid and multiform exudative erythema.

E. lichen planus and multiform exudative erythema.

Question nr **136**

Grinspan's syndrome is characterized by the presence of:

A. oral lichen planus and hypertension.

B. oral lichen planus and diabetes.

C. recurrent aphthous ulcers associated with vitamin B<sub>12</sub> deficiency.

D. oral lichen planus with hypertension and diabetes.

E. oral lichen planus and peptic ulcer disease.

Question nr **137**

Indicate the **false** statement concerning oral candidiasis:

A. wide-spectrum antibiotics usually cause chronic hyperplastic candidiasis.

B. secondary candidiasis occurs in Addison's disease.

C. diagnostics can include cytological smear and Gram staining.

D. inhaled steroids may predispose to median rhomboid glossitis.

E. acute forms of candidiasis are painful.

Question nr **138**

Which of the following diseases could be manifested by tense blisters on the lining mucosa?

A. pemphigus vulgaris.

B. pemphigoid.

C. bullous lichen planus.

D. Stevens-Johnson syndrome.

E. herpetic gingivostomatitis.

Question nr **139**

The highest risk of malignant transformation is associated with:

- A. lesions in the floor of the mouth and the lateral surface of the tongue.
- B. lesions on the buccal mucosa.
- C. lesions on the palate.
- D. lesions in the vestibular mucosa.
- E. all the above pose a similar risk.

Question nr **140**

The specific form of extraoral recurrent HSV infection is Bell's palsy that affects:

- A. glossopharyngeal nerve.
- B. facial nerve.
- C. 2<sup>nd</sup> and 3<sup>rd</sup> branch of the trigeminal nerve.
- D. lingual nerve.
- E. none of the above.

Question nr **141**

Peri-implantitis **is not** characterized by:

- A. clinical attachment loss.
- B. presence of inflammatory exudate.
- C. alveolar bone loss.
- D. bleeding.
- E. gingival lesions.

Question nr **143**

Kobner's sign is typical of:

- A. leukoplakia.
- B. recurrent aphthous stomatitis.

- C. pemphigoid.
- D. lichen planus.
- E. multiform exudative erythema.

Question nr **145**

Epstein-Barr virus causes:

- A. papilloma.
- B. Kaposi's sarcoma.
- C. Burkitt's lymphoma.
- D. Ramsay-Hunt syndrome.
- E. roseola.

Question nr **146**

What is the earliest radiological sign of periodontitis?

- A. alveolar bone level decrease of 1 mm below CEJ.
- B. fuzziness and a break in the continuity of lamina dura.
- C. radiolucency in the furcation area.
- D. widening of periodontal ligament space.
- E. bone dehiscence visible on CBCT.

Question nr **147**

Which of the curettes possesses two cutting edges and the working end curved at an angle of 90° in relation to the terminal shank?

- A. Graceya 17/18.
- B. After Five 1/2.
- C. Mini Five 5/6.
- D. Mini 13/14.

**E.** Langer 3/4.

**Question nr 148**

When is the clinical attachment loss (CAL) bigger than the probing depth (PD)?

- A.** in the interproximal surfaces.
- B.** in young individuals.
- C.** when CEJ is exposed.
- D.** when periodontal pockets are subcrestal.
- E.** in the presence of subgingival calculus.

**Question nr 149**

Which type of leukoplakia is characterized by a very high risk of malignant transformation?

- A.** homogenous.
- B.** severe.
- C.** cracked.
- D.** granulomatous.
- E.** speckled.

**Question nr 151**

Candidal leukoplakia is a kind of:

- A.** acute pseudomembranous candidiasis.
- B.** acute atrophic candidiasis.
- C.** chronic atrophic candidiasis.
- D.** chronic mucocutaneous candidiasis.
- E.** chronic hyperplastic candidiasis.

**Question nr 152**

What is a primary lesion in lichen planus?

- A. papule.
- B. macule.
- C. vesicle.
- D. erosion.
- E. ulcer.

Question nr **153**

Gingivitis **is not** characterized by:

- A. presence of the lesions on the gingiva.
- B. lack of bone loss.
- C. reversibility following the elimination of causative factors.
- D. specific bacterial plaque as a causative factor.
- E. change in the color, shape, consistence of the gingiva and presence of bleeding.

Question nr **154**

Which of the following lip diseases can be caused by allergic reaction?

- A. glandular exudative cheilitis.
- B. glandular purulent cheilitis.
- C. sun-induced cheilitis.
- D. granulomatous cheilitis.
- E. angular cheilitis.

Question nr **155**

Desquamative gingivitis is associated with:

- A. plaque-induced gingivitis.
- B. diabetes.
- C. gingival diseases modified by systemic factors.

**D.** mucocutaneous disorders.

**E.** viral diseases.

Question nr **156**

Which type of leukoplakia is characterized by the highest risk of malignant transformation?

**A.** homogenous leukoplakia of the buccal mucosa.

**B.** homogenous leukoplakia of the palate.

**C.** homogenous leukoplakia of the tongue.

**D.** non-homogenous leukoplakia of the tongue.

**E.** non-homogenous leukoplakia of the buccal mucosa.

Question nr **157**

In which pathology is CAL always higher than PD?

**A.** chronic periodontitis.

**B.** aggressive periodontitis.

**C.** exfoliating gingivitis.

**D.** secondary occlusal trauma.

**E.** any gingival recession.

Question nr **158**

Glucocorticosteroids and tacrolimus may be used in the treatment of:

**A.** leukoplakia.

**B.** lichen planus.

**C.** fungal infections.

**D.** all the above.

**E.** none of the above.

Question nr **160**

Chronic hyperplastic candidiasis is a synonym of:

- A. leukokeratosis.
- B. acute atrophic candidiasis.
- C. chronic atrophic candidiasis.
- D. candidal leukoplakia.
- E. acute pseudomembranous candidiasis.

Question nr **163**

Which of the following statements describing junctional epithelium are correct?

- 1) it is a part of connective tissue attachment;
- 2) it proliferates apically during gingivitis;
- 3) its turnover is 4-6 weeks;
- 4) it is non-keratinized, and it is composed of the basal and subbasal layers;
- 5) its part is epithelial attachment.

The correct answer is:

- A. all the above.
- B. 1,5.
- C. 3,4.
- D. 2,3.
- E. 4,5.

Question nr **164**

Necrotizing ulcerative gingivitis is induced by:

- A. *P. gingivalis*.
- B. *A. actinomycetemcomitans*.
- C. Socransky red complex.
- D. *Fusobacterium* and spirochetes.
- E. *P. gingivalis* and *A. actinomycetemcomitans*.

Question nr **165**

Necrotizing gingivitis **is not** characterized by:

- A. spontaneous bleeding.
- B. pain.
- C. lymphadenopathy.
- D. fever.
- E. clinical attachment loss.

Question nr **166**

What is the first-choice treatment for nonhomogeneous leukoplakia?

- A. vitamin A.
- B. adapalene.
- C. fluocinolone.
- D. tacrolimus.
- E. surgical excision.

Question nr **167**

Which of the following compounds can be used in toothpastes only to decrease cervical dentin hypersensitivity?

- A. 1% chlorhexidine.
- B. strontium chloride.
- C. stannous fluoride stabilized with 5% pyrophosphate.
- D. triclosan with copolymer.
- E. glycine in grains with a diameter of about 60  $\mu\text{m}$ .

Question nr **168**

In which of the following disorders of oral mucosa is papule a primary lesion?

- A. secondary herpetic stomatitis.

- B.** leukoplakia.
- C.** lichen planus.
- D.** acute erythematous candidiasis.
- E.** allergic contact stomatitis.

Question nr **169**

Indicate the true statement concerning the effect of smoking on the periodontal tissues:

- A.** indexes of inflammation intensity are lower in smokers than in non-smokers.
- B.** smoking always leads to deterioration of interproximal hygiene.
- C.** smoking is not responsible for higher incidence of tooth loss from periodontological causes.
- D.** smoking enhances inflammatory processes by dilating blood vessels and increasing neutrophil chemotaxis towards periodontal pockets.
- E.** smoking cessation has no effect on the progression of periodontal inflammation in the future.

Question nr **171**

Which of the following groups requires specific preventive periodontal care and treatment?

- A.** children around 10 years of age.
- B.** individuals with API 70%.
- C.** patients with a level of glycosylated hemoglobin higher than 7%.
- D.** individuals with incorrect class II dental restorations.
- E.** women during perimenopause.

Question nr **172**

Arndt's sign is positive in:

- A.** geographic tongue.
- B.** Hunter's glossitis.

- C. hairy tongue.
- D. fissured tongue.
- E. rhomboid glossitis.

Question nr 174

Qualifying a patient for specified stage of periodontal disease **does not** depend on:

- A. PD.
- B. BL.
- C. CAL.
- D. BoP.
- E. number of teeth.

Question nr 175

In what concentration is povidone-iodine used in FMD while performing SRP?

- A. 0.5% PVP.
- B. 0.1% PVP.
- C. 0.3% PVP.
- D. 3% PVP.
- E. 5% PVP.

Question nr 176

What clinical feature is related to cancerous ulcer of oral mucosa?

- A. palpable infiltration of the substrate.
- B. distinct inflammatory border.
- C. soreness of surrounding lymph nodes.
- D. occurrence in keratinized epithelium.
- E. positive diascopy test.

Question nr 177

In case of which suspected diagnosis, serological testing towards specific antibodies **does not** have diagnostic meaning?

- A. CREST syndrome.
- B. cutaneous lupus erythematosus.
- C. Grinspan syndrome.
- D. CUS.
- E. Sjogren's syndrome.

Question nr 178

A healthy 20-year-old male after administration of acetylsalicylic acid experienced rapid development of polymorphic lesions in oral cavity and genitals, accompanied by fever of 39.0°C, joint manifestations and cutaneous lesions on extremities. What clinical diagnosis should be anticipated?

- A. pemphigus vulgaris.
- B. lichen-like lesions.
- C. chronic ulcerative stomatitis.
- D. erythema exsudativum multiforme major.
- E. recurrent herpetic gingivostomatitis.

Question nr 179

In case of which oral mucosa disease Koebner's phenomenon is considered pathognomic?

- A. pemphigus vulgaris.
- B. mucous membrane pemphigoid.
- C. cutaneous lupus erythematosus.
- D. Stevens-Johnson syndrome.
- E. oral lichen planus.

Question nr **180**

The group of bacteria that are the most strongly associated with periodontitis **do not** include:

- A. *Porphyromonas gingivalis*.
- B. *Tannerella forsythia*.
- C. *Eubacterium nodatum*.
- D. *Treponema denticola*.
- E. *Prevotella intermedica*.

Question nr **181**

Indicate the clinical diagnosis which **does not** show the symptoms of reaction in submandibular lymph nodes and mobility towards the base:

- A. Sutton's disease.
- B. necrotizing periodontitis.
- C. Zahorsky herpangina.
- D. cancerous ulceration.
- E. syphillis ulcer.

Question nr **182**

Gracey curette 5/6 are dedicated to:

- A. anterior teeth.
- B. buccal surface of the molars.
- C. lingual surface of the molars.
- D. mesial surface of the molars.
- E. distal surface of the molars.

Question nr **183**

A patient with gingival pain, spontaneous bleeding, elevated temperature and unpleasant breath reported to the dental practice. Which diagnosis should be made?

- A. gingivitis as a complication of diabetes.
- B. periodontitis.
- C. gingivitis associated with dental plaque.
- D. necrotizing gingivitis.
- E. all of the above mentioned.

Question nr **184**

In the treatment of necrotizing ulcerative gingivitis, the first-choice medication is/are:

- A. amoxicillin/clavulanic acid.
- B. NSAIDs.
- C. metronidazole.
- D. metronidazole with amoxicillin/clavulanic acid.
- E. none of above mentioned.

Question nr **185**

The risk of periodontitis progression **does not** depend on:

- A. loss of CAL.
- B. loss of bone.
- C. depth of probing.
- D. patient's phenotype.
- E. nicotineism.

Question nr **186**

Choose **false** statement regarding the occurrence of lymphomas in oral cavity:

- A. lymphomas of the oral cavity are usually in the form of tumours and large, resistant to treatment, ulcerations.
- B. the most common localization of oral lymphomas is the palatal-retromolar region.

**C.** in not immunocompetent patients, Burkitt's lymphoma is caused by HHV8.

**D.** occurrence of oral lymphomas is significantly more frequent in HIV positive patients and patients receiving immunosuppressive therapy.

**E.** common occurrence of non-Hodgkin lymphoma is confirmed in course of some collagenoses.

**Question nr 187**

Method of choice in treatment of non-homogenous leukoplakia with epithelial dysplasia is/are:

1) surgical treatment;

2) 0,05% isotretinoin, used locally;

3) carbon dioxide laser;

4) steroids, used locally;

5) photodynamic therapy.

Correct answer is:

**A.** 1, 2.

**B.** 1, 3.

**C.** 1, 4.

**D.** 1, 5.

**E.** 2, 3.

**Question nr 188**

Dryness syndrome, characterized by decrease in saliva secretion, dryness of mucosa, occurs in the course of:

**A.** non-Hodgkin's tumours.

**B.** Hodgkin's tumours.

**C.** Pigmented tumours.

**D.** Papillomas.

**E.** Sarcomas.

**Question nr 189**

Cancerous ulceration is characterized by:

- A. pain and unevenness of the margins.
- B. infiltration of the base and enlargement of the lymph nodes.
- C. painful lymph nodes and hypertrophic lesions in the base of the ulceration.
- D. no mobility of teeth and no changes in the radiological image.
- E. not movable lymph nodes and short time of lesion development.

Question nr **190**

Which diseases can predispose to the development of carcinomas?

- A. leukemia and agranulocytosis.
- B. bullous diseases.
- C. Plummer-Vinson disease and tuberculosis luposa.
- D. Sjögren syndrome and parchment skin.
- E. Lichen Planus - striae form and hairy leukoplakia.

Question nr **191**

Oral erythroplakia is characterized by:

- A. occurrence of epithelial dysplasia or carcinoma in situ.
- B. occurrence of red acanthotic lesions in women during menopause.
- C. cell atypia and orthokeratotic acanthosis.
- D. occurrence of red erosions on the gingiva.
- E. occurrence of excessive red acanthosis of the tongue.

Question nr **192**

The location of high-risk malignant transformation of leukoplakia is:

- A. tongue, gingiva, retromolar trigone.
- B. gingiva, tongue surface.
- C. buccal region, hard palate, floor of oral cavity.

**D.** soft palate, intra-lateral surface of the tongue, floor of oral cavity.

**E.** all oral mucosa surfaces.

**Question nr 193**

What feature distinguishes cancerous ulcer from traumatic one?

**A.** cancerous ulcer involves superficial layers of epithelium.

**B.** cancerous ulcer does not cause teeth mobility.

**C.** cancerous ulcer occurs more often in women.

**D.** cancerous ulcer heals spontaneously.

**E.** cancerous ulcer infiltrates the tissues and has no tendency for healing.

**Question nr 194**

Which feature increases the risk of cancer development in precancerous lesion?

**A.** location of the lesion.

**B.** duration of the lesion.

**C.** stage of tissue dysplasia.

**D.** patient's age.

**E.** xerostomia.

**Question nr 195**

A 60-year-old patient, overall healthy, without history of taking any medicines, smoker (approximately 20 cigarettes a day) reported to the dentist. Clinical examination revealed oval shaped lesion, located in the floor of oral cavity, red in colour, clearly separated from its surroundings, of furrowed surface. The lesion was not painful, not diminishing under pressure, with no possibility of removing it with gauze. No triggering factors in the sublingual region were identified. Mycological examination was negative. Histopathological examination revealed increased epithelial dysplasia. Probable clinical diagnosis is:

**A.** leukoplakia.

**B.** erythroplakia.

- C. chronic atrophic candidiasis.
- D. lichen planus.
- E. oral submucous fibrosis (OSMF).

Question nr **196**

Volkman disease is:

- A. suppurative type of cheilitis glandularis.
- B. superficial purulent type of cheilitis glandularis.
- C. deep purulent type of cheilitis glandularis.
- D. granulomatous cheilitis.
- E. actinic cheilitis.

Question nr **197**

Indicate **false** statements regarding the precancerous state:

- A. It can last from few weeks to several years.
- B. Duration of precancerous state and its possible metastatic transformation are influenced by endogenous factors.
- C. Duration of precancerous state and its possible metastatic transformation are influenced by exogenous factors.
- D. Overlap of factors increases the probability of precancerous state development.
- E. Precancerous state always is subject to metastatic transformation irrespective of its duration.

Question nr **198**

Main parameter which allows for classifying a certain stadium of periodontitis is:

- A. pocket depth.
- B. bleeding index.
- C. loss of connective tissue attachment.
- D. hygiene index.

E. all of the above-mentioned.

Question nr **199**

Long-term observations revealed that leukoplakia is subject to malignant transformation in:

A. around 1%.

B. 2%.

C. 4%.

D. 4%-6%.

E. >6%.

Question nr **200**

Risk of high transformation occurs in:

A. homogenous leukoplakia.

B. all of leukoplakia types.

C. cracked leukoplakia.

D. verrucous leukoplakia.

E. speckled leukoplakia.

Question nr **201**

Which features are characteristic of oral erythroplakia:

A. occurrence of squamous carcinoma cells and carcinoma *in situ*.

B. occurrence of red acanthotic lesions in women during menopause.

C. cell atypia and orthokeratotic acanthosis.

D. occurrence of recurring ulcers of gingiva and floor of the mouth.

E. occurrence of white plaques of the tongue.

Question nr **202**

Oral cavity complications in the course of Sjögren syndrome are:

- A. dryness, recurrent aphthosis and candidosis.
- B. dryness, leukoplakia and candidosis.
- C. mucous retention cysts of the salivary glands and candidosis.
- D. dryness, excessive gingival bleeding and candidosis.
- E. dryness of oral cavity and infections of oral mucosa.

Question nr **203**

Choose the most important factor in gingivitis etiopathogenesis:

- A. nonspecific plaque.
- B. general health condition and patient's nutrition.
- C. trauma trigger and malocclusion.
- D. impairment of organism's defence system.
- E. parafunctions.

Question nr **204**

Level of fasting glycated haemoglobin in plasma of venous blood in patients in preclinical diabetes state amounts to:

- A. <3,9 mmol/L.
- B. 3,9-5,5 mmol/L.
- C. 5,6-6,9 mmol/L.
- D. 7,0 mmol/L.
- E. >7,0 mmol/L.

Question nr **205**

Indicate **false** statement regarding the complications post COVID-19. After taking into consideration the influence of age, sex, diabetes, comorbidity and nicotine addiction, it has been demonstrated that with coexisting II to IV stages of periodontitis:

- A. risk of complications was almost 3 times higher.

- B. mortality was 4 times higher.
- C. mortality was 8 times higher.
- D. necessity for hospitalization in intensive care unit was 3.5 times higher.
- E. risk of assisted lungs ventilation was 4.5 times higher.

Question nr **206**

Indicate active substance in Ligosan:

- A. minocycline.
- B. doxycycline.
- C. tetracycline.
- D. chlorhexidine.
- E. metronidazole.

Question nr **207**

In recession type 3 (RT3) according to Cairo:

- A. interproximal loss of bone amounts to 3 mm.
- B. interproximal loss of bone is less than or equal to CAL on buccal surface.
- C. thin biotype.
- D. thick biotype.
- E. interproximal loss of CAL exceeds the loss of CAL on vestibular surface.

Question nr **208**

Qualifying the patient to a specific stage of disease progression **does not** determine:

- A. the ratio of age to bone loss.
- B. loss of CAL as a function of time.
- C. number of smoked cigarettes.
- D. depth of gingival pockets (PD).

E. level of glycated hemoglobin.

Question nr **209**

In which type of leukoplakia medium risk of malignant transformation occurs?

- A. non-homogeneous granular.
- B. non-homogeneous thick.
- C. non-homogeneous speckled.
- D. homogeneous.
- E. true answers are A and B.

Question nr **210**

Choose **false** sentence regarding the Burkitt lymphoma:

- A. it is caused by HHV-4 virus.
- B. it occurs more often in patients with AIDS.
- C. it is a malignant tumor.
- D. it is considered an NHL.
- E. it derives from T cells.

Question nr **211**

In which ulceration does base infiltration occur:

- A. non-specific.
- B. tuberculosis-associated.
- C. cancerous.
- D. syphilis-associated.
- E. cancerous and syphilis-associated.

Question nr **212**

In which ulceration the surrounding lymph nodes are mobile against the base, following

their softening and merging into bundles?

- A. tuberculosis-associated.
- B. syphilis-associated.
- C. cancerous.
- D. traumatic.
- E. Sutton's ulcers.

Question nr **213**

Which of these is the strongest indication for regenerative surgical treatment of periodontitis?

- A. gingival pocket with baseline pre-treatment parameters of positive BoP, PD 10 mm, CAL 8 mm.
- B. bone craters.
- C. intrabony supportive defects of an appropriate depth and radiographic angle.
- D. suprabony defects in the course of IIIB periodontitis.
- E. IIIB furcation defects in the mandible.

Question nr **214**

According to the current periodontal disease classification, what is the category for necrotic lesions in the periodontium in a female patient with multiple myeloma treated with high-dose IV infusions of zoledronic acid?

- A. non-plaque induced gingival lesions.
- B. IVC periodontitis.
- C. cancers causing periodontitis.
- D. necrotising periodontitis.
- E. the current periodontal disease classification does not include such lesions.

Question nr **215**

What oral manifestations can be seen 100 days after allogeneic stem cell transplantation?

- A. severe aphthosis.
- B. chronic ulcerative stomatitis (CUS).
- C. Stevens-Johnson syndrome.
- D. lichenoid lesions.
- E. gingival hyperplasia.

Question nr **216**

Select the most appropriate diagnosis in a non-smoking 70-year-old woman with the following gingival lesions: over 5-year history of recurrent white, flat, slightly papillomatous lesions on both sides of the mandible that involve the free and attached gingiva:

- A. hyperplastic papillomatous leukoplakia.
- B. white sponge nevus.
- C. leukokeratosis due to overbrushing.
- D. linear gingival erythema associated with not using HAART.
- E. desquamative gingivitis in the course of lichen planus.

Question nr **217**

What risk factors are common for squamous cell carcinoma of the tongue, the floor of the mouth and the lip?

- A. many-year history of severe tobacco and alcohol abuse.
- B. male sex, advanced age and low socioeconomic status.
- C. frequent oral HPV superinfections.
- D. pharmacologic immunosuppression.
- E. mechanical trauma associated with prostheses.

Question nr **218**

The use of enamel matrix proteins during a surgical procedure will bring greatest clinical benefits, such as PD reduction and CAL improvement, for which periodontal bone defects?

- A. suprabony defect.
- B. one-wall intrabony defect.
- C. two-wall intrabony defect.
- D. interradicular defect.
- E. dehiscence defect.

Question nr **219**

Which drugs have been used as LDDs for treating periodontal inflammation?

- 1) piperacillin and tazobactam;
- 2) amoxicillin and metronidazole;
- 3) azithromycin;
- 4) probiotics;
- 5) omega-3 polyunsaturated fatty acids;
- 6) toluidine blue;
- 7) statins;
- 8) metformin;
- 9) zoledronic acid.

The correct answer is:

- A. all the above.
- B. 2,4,7,8.
- C. 1,7,8,9.
- D. 3,5,6,7.
- E. 2,7,8,9.

Question nr **220**

Which hypothesis concerning the bacterial pathogenesis of periodontal disease called for a shift from eubiotic to dysbiotic microbiome due to periopathogens capable of dysregulating certain elements of inflammation and immune response?

- A. the specific plaque hypothesis.
- B. the opportunistic infection hypothesis.
- C. the ecological plaque hypothesis.

**D.** the key pathogen hypothesis.

**E.** the Inflammation-Mediated Polymicrobial Emergence and Dysbiotic Exacerbation (IMPEDE) model.