



**BDS FINAL PROFESSIONAL EXAMINATION 2007**  
**OPERATIVE DENTISTRY (MCQs)**

**Model Paper**

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 approximal box.
  - D. Approximal 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

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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

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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 facialcervical  
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 H<sub>2</sub>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

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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

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22. **A patient presents with 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, protruding 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)<sub>2</sub>.
  - B. Pulpectomy followed by RCT.
  - C. Pulpotomy and fill with Ca (OH)<sub>2</sub>.
  - D. Smoothing of ledges and restore with composite.
  - E. Restoration with Glass ionomer cement.

**Key: C**

**Topic:** Endodontic

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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

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**Model Paper**

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

**Topic:** Peadodontic

31. **The walking bleach technique is:**
- A. Use heat treatment.
  - B. Requires patients to report in 24 hours.
  - C. Can be done in poorly obtwated 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. 2nO Engenol.
  - B. Cortico-steroids.
  - C.  $\text{Ca}(\text{OH})_2$ .
  - D. Silver-points.
  - E. Zinc phosphate.
- Key: C**

**Topic:** Endodontic



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34. **In aesthetic dentistry, colour of the tooth is:**

- A. Hue.
- B. Chroma.
- C. Value.
- D. Translucency.
- 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  $\text{Ca(OH)}_2$ .
- D. Surgical removal of apical segment.
- E. Post retained crown.

**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

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**38. In patients showing generalized attrition, normal treatment prior to crown preparation is:**

- A. Desensitization of crown of tooth.
- B. Periodontal surgery.
- C. Sealing.
- D. Conventional root canal treatment.
- 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

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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 dentition.
- 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:** Paedodontic