Horizontal, vertical, mixed erasure corresponds to the classification:

• a) according to the depth of the lesion

• b) by stage of development

+ c) along the plane of the lesion

• d) by the extent of the lesion

• e) according to the sensitivity of dentin

Etiological factors of increased erasability associated with functional overload of teeth

+ a) malocclusion

• b) alimentary insufficiency

• c) chemical effects

• d) physical impact

• e) direct bite

The form of increased erasability of the hard tissues of the teeth depends on

• a) from the shape of the dentition

+ b) from the type of bite

• c) depending on the size of the teeth

• d) from the type of teeth

• e) all answers are correct

With increased erasability of hard tissues of teeth of the first degree: orthopedic treatment is carried out

+ a) in one stage

• b) in two stages

• c) in three stages

• d) more than three stages

• e) all answers are correct

Localized, generalized erasability corresponds to the classification:

• a) according to the depth of the lesion

• b) by stage of development

• c) along the plane of the lesion

• d) according to the sensitivity of dentin

+ e) by the extent of the lesion

With a direct bite, the form of increased erasability of the hard tissues of the teeth:

+ a) horizontal

• b) vertical

• c) mixed

• d) compensated

• e) decompensated

At the first degree of erasability , the depth of damage to hard tissues is

+ a) up to 1/3 of the tooth crown

• b) from 2/3 of the length of the crown to the neck

• c) from 1/3 to 2/3 of the crown length

• d) from 1/3 to 1/2 of the crown length

• e) all answers are correct

The endogenous factors of the occurrence of increased erasability include:

• a) violation of the function of the parathyroid glands

• b) thyroid dysfunction

• c) violation of the function of the genital glands

+ d) all the answers are correct

• e) there is no correct answer

Physiological, transient and increased erasability corresponds to the classification:

• a) according to the depth of the lesion

+ b) by stage of development

• c) along the plane of the lesion

• d) by the extent of the lesion

• e) according to the sensitivity of dentin

The endogenous factors of the occurrence of increased erasability include:

• a) imperfect dentinogenesis

• b) Capdepon syndrome

• c) thyroid diseases

+ d) all the answers are correct

• e) there is no correct answer

The form of increased erasability of the hard tissues of the teeth, in which the bumps and cutting edges of the teeth are affected, is called

• a) decompensated

• b) vertical

• c) compensated

+ d) horizontal

• e) mixed

With all forms of increased erasability, orthopedic structures are shown:

+ a) solid cast

• b) stamped

• c) metal-ceramic

• d) metal-plastic

• e) all answers are correct

With the second degree of erasability , the depth of the lesion of hard tissues is

+ a) half the size of the tooth crown

• b)half the length of the root

• c)2/3 of the tooth crown

• d) 1/3 of the tooth crown

• e) all answers are correct

The form of increased erasability of the hard tissues of the teeth, which is characterized by the absence of a decrease in the height of the lower third of the face, is called

• a) decompensated

• b) horizontal

• c) vertical

• d) mixed

+ e) there is no correct answer

The endogenous factors of the occurrence of increased erasability include:

• a) violation of the function of the parathyroid glands

• b) thyroid dysfunction

• c) violation of the function of the genital glands

 d) all the answers are correct

• e) there is no correct answer

The form of increased erasability of the hard tissues of the teeth, which is characterized by the absence of a decrease in the height of the lower third of the face, is called

+ a) compensated

• b) horizontal

• c) vertical

• d) mixed

• e) decompensated

With II and III degrees of increased erasability, the use of crowns is contraindicated

• a) solid cast

+ b) stamped

• c) metal-ceramic

• d) metal-plastic

• e) all answers are correct

The form of increased erasability of the hard tissues of the teeth, in which the bumps and cutting edges of the teeth are affected, is called

• a) decompensated

• b) vertical

• c) compensated

• d) mixed

+ e) there is no correct answer

The form of increased erasability of the hard tissues of the teeth depends on

• a) from the shape of the dentition

• b) from the type of teeth

• c) depending on the size of the teeth

• d) all answers are correct

+ e) there is no correct answer

Exogenous factors of the occurrence of increased erasability include:

• a) chemical exposure

• b) physical impact

• c) alimentary insufficiency

+ d) all the answers are correct

• d) there is no right answer

Etiological factors of increased erasability associated with functional overload of teeth

• a) alimentary insufficiency

+ b)partial adentia

• c)chemical effects

• d) physical impact

• e) all answers are correct

The form of increased erasability of the hard tissues of the teeth, in which the vestibular and (or) oral surfaces of the teeth are affected, is called

• a) decompensated

+ b) vertical

• c) compensated

• d) horizontal

• e) mixed

Hyperesthesia of hard tissues of teeth with increased erasability occurs .

• a) in all patients

• b) never

+ c) sometimes

• d) in the elderly

• e) young

Additional methods of investigation of patients with decompensated form of increased erasability of hard tissues of teeth

• a) clinical blood test

+ b) tomography of the temporomandibular joint

• c) biochemical blood analysis

• d) biochemical analysis of urine

• e) allergic tests

The elements of the TMJ are

• a) articular process of the mandible and articular fossa of the temporal bone

• b) articular ligaments

• c) joint capsule

• d) the interarticular disk

+ d) all the answers are correct

When moving laterally, the head of the lower jaw on the shear side makes movements:

• a) downward

• b) go ahead

+ c) around its own axis

• d) down and forward

• e) down, forward and around its own axis

A decrease in the interclusal space and a decrease in the height of the lower third of the face is:

+ a) decreasing bite

• b) non-fixed bite

• c) reduced bite

• d) all answers are correct

• e) there is no correct answer

Depulpation of teeth with increased erasability is carried out:

• a) always

• b) never

• c) at 1 degree

• d) at 2 degrees

+ d) at 3 degrees

In the decompensated form , there may be

• a) mobility of teeth

• b) dentoalveolar elongation

+ c) distal shift of the lower jaw

• e) gum inflammation

• d) all answers are correct

A characteristic symptom of TMJ dysfunction

+ a) clicks in the TMJ area

• b) difficulty opening the mouth

• c) redness in the TMJ projection area

• d) edema in the TMJ projection area

• e) aching pain in the TMJ area

Physiological erasability is

+ a) compensated, slow-flowing process of loss of the enamel cover of the teeth, not passing to the dentine layer

• b) the absence of tooth erasure under the influence of chewing load, leading to pathological changes in the periodontal

• c) rapidly progressive loss of enamel of hard tissues of teeth, accompanied by pathological changes in the parotid tissues, masticatory muscles and temporomandibular joints

• d) compensated, fast-flowing process of loss of enamel covering of teeth, passing to the dentine layer

• e) absence of tooth erasure under the influence of chewing load, which does not lead to pathological changes in the periodontal

The clinical methods of diagnosis of increased erasability include

• a)orthopantomogram

• b) radiography

• c) telerentgenography

• d) all answers are correct

+ e) there is no correct answer

Complications of generalized increased erasability with a decrease in the height of the lower face

• a) mobility of teeth

• b)bleeding gums

• c) pain from cold, hot

• d) all answers are correct

+ e) there is no correct answer

External examination of patients with decompensated form of increased tooth abrasion reveals:

+ a) deepening of nasolabial folds, senile facial expression

• b) facial asymmetry

• c) "bird" face

• d) does not change

• e) all answers are correct

What movements are carried out in the human TMJ

• a) vertical

• b) sagittal

• c) transversal

+ d) all the answers are correct

• e) there is no correct answer

Complications of generalized increased erasability with a decrease in the height of the lower face

• a) mobility of teeth

+ b) TMJ dysfunction

• c) pain from cold, hot

• d) bleeding gums

• e) all answers are correct

Characteristic complaints of patients with decompensated form of increased erasability

+ a) change in appearance

• b) bleeding gums

• c) night pains

• d) aching pains

• e) all answers are correct

Additional methods of investigation of patients with decompensated form of increased erasability of hard tissues of teeth

• a) clinical blood test

• b) palpation of the temporomandibular joint

• c) biochemical blood analysis

+ d) x-ray examination of teeth and jaws

• e) allergic tests

Which muscle is attached to the TMJ disk

• a) temporal

• b) zygomatic

• c) medial pterygoid

+ d) lateral pterygoid

• e) actually chewing

The magnitude of the sagittal articular pathway is equal to

+ a) 330

• b) 310

• c) 400

• d) 170

• d) 270

The shape of the temporomandibular joint:

• a) block-shaped

+ b) complex ellipsoid

• c) spherical

• d) rectangular

• e) oval

Characteristic complaints of patients with decompensated form of increased erasability

• a) mobility of teeth

• b) pain from cold, hot

+ c) congestion in the corners of the mouth

• d) mobility of teeth

• e) there is no correct answer

Prosthetics of patients with a compensated form, without distal displacement of the lower jaw, is carried out without special preparation when the height of the lower face is reduced:

• a) up to 3 mm

+ b) up to 6 mm

• c) more than 6 mm

• d) all answers are correct

• e) there is no correct answer

Depulpation of teeth with increased erasability is carried out:

• a) always

• b) never

• c) at 1 degree

• d) at 2 degrees

+ d) there is no right answer

With the maximum opening of the mouth, the articular heads of the lower jaw are installed relative to the slope of the articular tubercle:

• a) at the base

• b) in the lower third

• c) in the middle

+ d) at the top

• e) in the upper third

Common factors of the occurrence of pathological erasability include

• a) osteochondrosis

+ b) metabolic disorders

• c) the presence of depulpated teeth

• d) all answers are correct

• e) there is no correct answer

A decrease in the interclusal space and a decrease in the height of the lower third of the face is:

• a) low bite

• b) non-fixed bite

• c) reduced bite

• d) all answers are correct

+ e) there is no correct answer

One of the forms of pathological erasability along the lesion plane

+ a) horizontal

• b) medial

• c) distal

• d) angular

• e) circular

The absence of a decrease in the height of the lower third of the face with a compensated form of increased tooth abrasion is due to:

• a) displacement of the lower jaw

+ b) vacant hypertrophy of the alveolar process

• c) changing the relationship of the elements of the TMJ

• d) teeth extension

• e) all answers are correct

The absence of a decrease in the height of the lower third of the face with a compensated form of increased tooth abrasion is due to:

• a) displacement of the lower jaw

+ b) vacant hypertrophy of the alveolar process

• c) changing the relationship of the elements of the TMJ

• d) teeth extension

• e) there is no correct answer

With a compensated form of increased erasability, the height of the lower part of the face

+ a) does not change

• b) decreases

• c) increases

• d) depends on age

• e) depends on gender

The principle of restructuring the myotatic reflex

• a) the smaller the lower jaw droop, the less stretching of the masticatory muscles

+ b) the greater the lowering of the lower jaw, the greater the stretching of the masticatory muscles

• c) the smaller the lower jaw droop, the greater the stretching of the chewing muscles

• d) all answers are correct

• e) there is no correct answer

The clinical methods of diagnosis of increased erasability include

+ a) survey

• b) radiography

• c) telerentgenography

• d) all answers are correct

• e) there is no correct answer

An increase in the interalveolar height on the bite plate in the treatment of a compensated form of increased tooth abrasion is carried out using

• a) wax

+ b) fast-hardening plastic

• c) articulation paper

• d) light-cured composite

• e) all answers are correct

One of the forms of pathological erasability along the lesion plane

• a) medial

+ b) vertical

• c) distal

• d) angular

• d) there is no right answer

With the compensated form: generalized increased erasability of hard tissues of teeth, the method of orthodontic treatment is shown

• a) gradual deocclusion

• b) correction of the shape of the dentition

• c) restructuring of the myotatic reflex

• d) all answers are correct

+ e) there is no correct answer

The compensated form of increased erasability is characterized by

• a) by reducing the height of the lower part of the face

+ b) maintaining the height of the lower part of the face

• c) increasing the height of the lower part of the face

• d) all answers are correct f

• e) there is no correct answer

With the compensated form: generalized increased erasability of hard tissues of teeth, the method of orthodontic treatment is shown

• a) gradual deocclusion

• b) correction of the shape of the dentition

+ c) sequential deocclusion

• d) restructuring of the myotatic reflex

• e) there is no correct answer

The clinical methods of diagnosis of increased erasability include

+ a) external inspection

• b) TMJ MRI

• c) AOCO

• d) orthopantomogram

• e) restoration of interclusal height

The absence of a decrease in the height of the lower third of the face with a compensated form of increased tooth abrasion is due to:

• a) displacement of the lower jaw

• b)teeth extension

• c) changing the relationship of the elements of the TMJ

• d) all answers are correct

+ e) there is no correct answer

An increase in the interalveolar height on the bite plate in the treatment of a compensated form of increased tooth abrasion is carried out using

• a) wax

+ b) fast-hardening plastic

• c) articulation paper

• d) light-cured composite

• e) all answers are correct

The absence of a decrease in the height of the lower third of the face with a compensated form of increased tooth erasability is due to

• a) displacement of the lower jaw

+ b) the growth of the alveolar process of the jaws

• c) changing the relationship of the elements of the TMJ

• d) teeth extension

• e) there is no correct answer

The clinical methods of diagnosis of increased erasability include

• a) personal hygiene training

• b) TMJ tomography

+ c) determination of the height of the lower part of the face

• d) restoration of interclusal height

• e) all answers are correct

To rebuild the myotatic reflex according to Rubinov , it is necessary

+ a) a plate with a bite pad

• b) plate with screw and sagittal saw

• c) plate with an inclined plane

• d) all answers are correct

• e) there is no correct answer

With a localized form of increased erasability

• a) there is not a single pair of antagonists without increased erasability

• b) erasability extends to one of the jaws

+ c) individual teeth or a group of teeth are involved in the process

• d) all answers are correct

• e) there is no correct answer

The preparatory stage of orthopedic treatment of increased erasability may include:

+ a) restoration of the height of the lower part of the face

• b) production of solid crowns

• c) alveolotomy

• d) all answers are correct

• e) there is no correct answer

With a compensated form of generalized increased erasability of the hard tissues of the teeth, the method of orthodontic treatment is shown:

• a) gradual deocclusion

• b) correction of the shape of the dentition

+ c) sequential deocclusion

• d) restructuring of the myotatic reflex

• e) there is no correct answer

The methods of diagnosis of increased erasability include

• a) personal hygiene training

• b) rehabilitation of inflammatory foci

+ c) study of diagnostic models

• d) all answers are correct

• d) there is no right answer

Delayed erasability is

• a) compensated, slow-flowing process of loss of the enamel cover of the teeth, not passing to the dentine layer

+ b) the absence of tooth erasure under the influence of chewing load, leading to pathological changes in the periodontal

• c) rapidly progressive loss of enamel of hard tissues of teeth, accompanied by pathological changes in the parotid tissues, masticatory muscles and temporomandibular joints

• d) compensated, fast-flowing process of loss of enamel covering of teeth, passing to the dentine layer

• e) absence of tooth erasure under the influence of chewing load, which does not lead to pathological changes in the periodontal

Local factors of the occurrence of pathological erasability include

• a) depulpation of teeth

+ b) loss of lateral teeth

• c) composite seals

• d) all answers are correct

• e) there is no correct answer

The decompensated form of increased erasability is characterized by

+ a) by reducing the height of the lower part of the face

• b) maintaining the height of the lower part of the face

• c) increasing the height of the lower part of the face

• d) all answers are correct

• e) there is no correct answer

The absence of a decrease in the height of the lower third of the face with a compensated form of increased tooth abrasion is due to:

• a) displacement of the lower jaw

+ b) vacant hypertrophy of the alveolar process

• c) changing the relationship of the elements of the TMJ

• d) teeth extension

• e) there is no correct answer

The purpose of permanent prosthetics with increased erasability of teeth

+ a) restoration of the anatomical shape of teeth

• b) improving oral hygiene

• c) elimination of tooth mobility

• d) all answers are correct

• e) there is no correct answer

The form of increased erasability of the hard tissues of the teeth, which is characterized by the absence of a decrease in the height of the lower third of the face, is called

+ a) compensated

• b) horizontal

• c) vertical

• d) mixed

• e) decompensated

On the orthopantomogram, the following are obtained:

• a) an X-ray image of the TMJ

• b) expanded X-ray image of the lower jaw

+ c) expanded X-ray image of the upper and lower jaw

• d) expanded X-ray image of the upper and lower jaw and TMJ

• e) there is no correct answer

One of the stages of manufacturing a bite plate in the treatment of a compensated form of increased tooth erasability

• a) removal of double refined impressions

+ b) removal of anatomical impressions

• c) removal of functional impressions

• d) all answers are correct

• e) there is no correct answer

In orthopedic treatment of increased tooth erasability, diagnostic errors are possible

• a) perforation of the root wall

• b) the height of the lower part of the face has not been restored

+ c) diagnostic models have not been studied

• d) all answers are correct

• e) there is no correct answer

Special training in the treatment of increased erasability is carried out using

• a) Larin's apparatus

+ b) bite plate

• c) Edgewise systems

• d) all answers are correct

• e) there is no correct answer

In orthopedic treatment of increased erasability with fixed structures , preference is given

+ a) solid-cast structures

• b) stamped structures

• c) composite tabs

• d) plastic crowns

• e) removable dentures

With the third degree of increased erasability, restoration of the stump is preferable

• a) anchor pins with composite seal

+ b) stump pin tabs

• c) Inlay type tabs

• d) all answers are correct

• e) there is no correct answer

Restoration of the stump part of the crowns with increased erasability can be carried out using

+ a) stump pin tabs

• b) composite seals

• c) veneers

• d) plastic crowns

• e) there is no correct answer

In the treatment of 1 degree of increased erasability , it is used

+ a) remtherapy

• b) depulpation of teeth

• c) clasp prosthetics

• d) all answers are correct

• e) there is no correct answer

Tomography is a method used most often to study the condition

• a) the pulp chamber of the tooth

+ b) temporomandibular joint

• c) the alveolar process of the lower jaw

• d) teeth of the upper and lower jaw

• e) there is no correct answer

Fast-hardening plastic to increase the height on the bite plate

• a) protacril

+ b) acrodent

• c) fluorax

• d) all answers are correct

• e) there is no correct answer

Counter prosthetics is called

• a) simultaneous prosthetics of the right side of one jaw and the left side of the other jaw

• b) simultaneous prosthetics of the right and left sides of the same jaw

+ c) simultaneous prosthetics of antagonists' teeth

• d) prosthetics of the right and left sides of the lower jaw

• e) there is no correct answer

Treatment with a bite plate is carried out

• a) under EDI control

• b) under the control of an odontoparodontogram

+ c) under the control of TMJ radiography

• d) under the control of the patient

• e) all answers are correct

An increase in the interalveolar height on the bite plate in the treatment of a compensated form of increased tooth abrasion is carried out using

• a) wax

+ b) fast-hardening plastic

• c) articulation paper

• d) light-cured composite

• e) all answers are correct

With permanent prosthetics with 3 degrees of increased erasability , they must be used

+ a) pin structures

• b) bridges

• c) clasp prostheses

• d) plastic crowns

• e) there is no correct answer

The use of stamped structures with increased erasability

• a) possible with any degree of erasability

+ b) excluded

• c) possible with 1 degree of erasability

• d) possible with 2 degrees of erasability

• e) possible with 3 degrees of erasability

To provide a place for prosthetics in the treatment of a compensated form of increased erasability of teeth, it is used

+ a) medical bite plate

• b) partial removable prosthesis

• c) jaw resection

• d) all answers are correct

• e) there is no correct answer

An increase in the interalveolar height on the bite plate in the treatment of a compensated form of increased tooth abrasion is carried out using

• a) wax

+ b) fast-hardening plastic

• c) articulation paper

• d) light-cured composite

• e) all answers are correct

Central occlusion is determined by the signs:

• facial, swallowing, dental

+ dental, articular, muscular

• lingual, muscular, dental

• dental, swallowing, facial

• facial, lingual, articular

The presence of a periodontal pocket is characteristic of:

+ Periodontitis

• periodontal disease

• gingivitis

• epulisa

• fibromatosis

Hyperbalancing contacts include occlusal contacts:

+ on the balancing side, interfering with the closure of the teeth of the working side in lateral occlusion

• on the working side, separating teeth on the balancing side

• on the balancing side

• on the working side

• on the working or balancing side

The deocclusion method is used when:

+ I form of dental alveolar elongation

• II form of dental alveolar elongation

• I and II forms of dental alveolar elongation

• for periodontal diseases

• with periodontitis

The method of deocclusion is indicated for persons no older than:

• 18 years old

• 25 years old

+ 40 years old

• 50 years old

• 60 years old

The method of sanding is used when:

• I form of the Popov-Hodon phenomenon

• II form of the Popov-Hodon phenomenon

+ I and II forms of the Popov-Hodon phenomenon

• increased abrasion of hard tooth tissues

• true 1) and 4)

The method of deocclusion involves the separation of teeth by:

• 5 mm

+ 2 mm

• 7 mm

• 8 mm

• true 3) and 4)

Note the positive qualities of a partial removable plate prosthesis:

• a) the ability to restore any defect of the dentition;

• b) elimination of the need for preparation of teeth;

• c) aesthetics and ease of manufacture;

+ d) 1, 2 and 3.

• e) cause inflammatory changes in the mucosa of the prosthetic bed;

• f) cause the development of cervical caries of teeth adjacent to the prosthesis

Violation of the occlusal plane, accompanied by the location of a tooth or a row of teeth above or below in relation to adjacent teeth, occurs when:

• loss of antagonists

• localized form of increased abrasion of the hard tissues of the teeth

• abrasion of the occlusal surface of plastic dentures

• true 1) and 2)

+ true 1), 2) and 3)

Dental alveolar elongation is more typical for:

• chewing teeth of the upper jaw

• frontal teeth of the upper jaw

• front teeth of the lower jaw

• chewing teeth of the lower jaw

+ the same for both jaws (regardless of the group of teeth)

Contraindications to the use of orthodontic methods of treatment of the Popov-Hodon phenomenon:

+ chronic periodontitis

• intact teeth and healthy periodontal

• partial absence of teeth on both jaws

• dental caries

• true 2) and 3)

Partial absence of teeth, complicated by the Popov-Hodon phenomenon, should be differentiated from:

• partial absence of teeth, complicated by a decrease in occlusal height and distal displacement of the lower jaw

• partial absence of teeth, complicated by increased erasure of the hard tissues of the teeth and a decrease in occlusal height

• partial absence of teeth in both jaws, when not a single pair of antagonizing teeth has been preserved

+ true 1), 2) and 3)

• true 1) and 2)

Deformations of the dentition can lead to:

• increased abrasion of hard tooth tissues

• enamel erosion

• periodontitis

• fluorosis

+ true 1) and 3)

The ratio between the extra- and intraalveolar parts of the tooth remains unchanged with vertical deformations of the dentition according to the classification of V.A. Ponomareva, related to:

+ I form

• II form, 2nd group

• II form, 1st group

• III form

• true 2) and 3)

The odontoparodontogram makes it possible to judge:

+ the state of the periodontal bone tissue

• about the condition of the oral mucosa

• about the degree of mobility of teeth

• about the presence of exostoses

• about the presence of non-removed teeth roots

The most objective method of determining the height of the lower part of the face is

• anatomical

+ anatomical and physiological

• anthropometric

• all answers are correct

• there is no correct answer

The height of the lower part of the face at the central ratio of the jaws compared to the height at relative physiological rest:

• is equal to the height of relative physiological rest

• greater height of relative physiological rest

+ less than the height of relative physiological rest

• less bite height

• there is no correct answer

With increased erasability of the hard tissues of the teeth, the tooth cavity:

• increases

+ decreases

• does not change

• decreases only when erasability is vertical

• decreases only at 1 degree of erasability

When the main antagonist is lost, the tooth moves

• strictly in the vertical direction

+ in vertical and medial

• distal

• medial

• palatal/lingual

When dissecting an artificial supporting crown in a bridge prosthesis, cooling of the hard tissues of the depulpated tooth:

+ necessarily

• optional

• at the discretion of the doctor

• at the request of the patient

• preferably

Is it possible to manufacture plastic bridges?

+ yes

• yes, if one tooth is missing

• yes, if two teeth are missing

• yes, if three teeth are missing

• no

Occlusion is a special case of articulation characterized by:

• a) all movements of the lower jaw

+ b) closing of teeth

• c) separation of dentition

• d) wide opening of the mouth

• e) lateral movements of the lower jaw

Occludator - an apparatus reproducing:

• a) all movements of the lower jaw

+ b) closing and opening of the jaws

• c) movements of the lower jaw to the left

• d) movements of the lower jaw to the right

• e) movements of the lower jaw forward

To normalize the activity of the gastrointestinal tract, prosthetics of the dentition in case of Agapov lesion is absolutely indicated:

• a) by 10%

• b) by 15%

• c) by 25 %;

• d) 25-50 %;

+ e) by 50%.

What are the indications for the use of a metal base?

• a) allergy to plastic prostheses;

• b) epilepsy;

• c) frequent breakdowns of plastic prostheses;

+ d) all of the above.

• e) there is no correct answer

• f) bruxism

Articulation is a concept that includes the ratio of the jaws when:

• a) central occlusion

• b) lateral occlusion

• c) anterior occlusion

+ d) all possible positions of the lower jaw

• e) the state of physiological rest

• f) in the state of having the maximum number of contacts with teeth antagonists

What are the most common symptoms in the clinic of secondary partial

adentia?

• a) impaired function of chewing and speech;

• b) violation of aesthetics;

• c) impaired function of the masticatory muscles;

• d) TMJ disorders;

+ d) 1, 2, 3, 4.

Articulators are devices that reproduce:

• a) central occlusion

• b) lateral occlusion

• c) anterior occlusion

+ d) all positions and movements of the lower jaw

• e) the state of physiological rest

The clinical picture of partial secondary adentia depends on:

• a) the location of the teeth in the dentition;

• b) their role in chewing;

• c) the type of ratio of dentition;

• d) from the condition of the periodontal and hard tissues of the preserved teeth;

+ d) all the answers are correct

During what period after tooth extraction is the most intensive resorption of the alveolar ridge?

• a) 1 week

• b)1 month

+ c)6 months;

• d) 12 months;

• e) 14-18 months.

• f) 2-3 weeks

Note the negative effect of CHSPP:

• a) cause inflammatory changes in the mucosa of the prosthetic bed;

• b) cause the development of cervical caries of teeth adjacent to the prosthesis;

• c) violate tactile, taste, temperature sensitivity;

+ d) 1, 2 and 3.

• e) restore the function of chewing

What advantage do emergency reinforced prostheses have in comparison with partial removable plate ones?

• a) allow you to save the terms of adaptation;

• b) increase the fracture strength;

• c) reduce the negative effect on adjacent tissues;

+ d) 1, 2 and 3.

• e) enhance the aesthetics of the design

The device that allows you to transfer the correct position of the upper jaw to the articulator is called:

• occluder

+ facial arc

• apexlocator

• Larin's apparatus

• transfer

The device reproducing all the movements of the lower jaw is called:

• occluder

+ articulator

• facial arc

• Bromine-strome

• Neisha

The reserve forces of the periodontal in relation to the functional capabilities of the tooth are:

• a) 25 %;

+ b) 50 %;

• c) 75 %;

• d) 100%.

• f) there are no correct answers

The magnitude of the periodontal reserve forces depends on:

• a) age;

• b) gender;

• c) atrophy of the walls of the alveoli;

• d) conditions of periapical tissues;

+ e) from all the listed factors.

With atrophy of the bone well by 1/4 | 3, the reserve forces are:

+ a) 25 %;

• b) 50 %;

• c) 75 %

• d) 35%

• d) 45%