1. Maxillofacial orthopedics is one of the sections:

A. Orthopedic dentistry.=

B. Surgical dentistry.

V. General practice dentistry.

G. Maxillofacial surgery.

D. There is no correct answer.

2. There are two sections in maxillofacial orthopedics:

A. Maxillofacial traumatology and maxillofacial prosthetics.=

B. Maxillofacial orthopedics and maxillofacial surgery.

B. Maxillofacial surgery and maxillofacial traumatology.

G. Maxillofacial orthopedics and maxillofacial prosthetics.

D. There is no correct answer.

3. The subject of maxillofacial orthopedics are:

A. All possible answers are correct.=

B. Congenital and acquired defects of the hard palate.

B. Congenital and acquired defects of the soft palate .

G. Defects of the jaws and face.

d. Fractures of the jaws and bones of the face.

4. The task of maxillofacial orthopedics:

A. Elimination of deformities of the maxillary system by orthopedic methods.=

B. Surgical treatment of fractures of the jaws and their consequences.

B. There is no correct answer.

G. Correction of pathological closure of the dentition.

D. Correct answer options A and B.

5. Reposition:

A. Matching and moving the fragments to the correct position.=

B. Fixing the fragments in the correct position.

B. Fusion of fragments.

G. Medical treatment aimed at preventing complications.

D. There is no right answer.

6. Immobilization:

A. Fixing fragments in the correct position.=

B. Matching and moving fragments to the correct position.

B. Fusion of fragments.

G. Medical treatment aimed at preventing complications.

D. There is no right answer.

7. Consolidation:

A. Fusion of fragments.=

B. Fixing fragments in the correct position.

B. Matching and moving fragments to the correct position.

D. Medical treatment aimed at preventing complications.

d. There is no right answer.

8. The solution of the main problem in the treatment of patients with jaw fractures includes:

A. All possible answers are correct.=

B. Immobilization.

V. Drug treatment aimed at preventing complications.

G. Physical methods of treatment.

D. Reposition

9. The classification of gunshot injuries to the tissues of the maxillofacial region includes the division into injuries:

A. Correct answer options B, C, D.=

B. By the nature of the injury.

C. By the type of wounding weapon.

D. There are no correct answer options.

D. By the type of damaged tissue.

10. Treatment of gunshot fractures includes:

A. All the answers are correct.=

B. Reposition and immobilization of fragments.

B. Measures to combat infection.

G. Bone and soft tissue plastics.

D. Primary wound treatment.

11. The features of wounds and injuries to the face and jaws are as follows:

A. All possible answers are correct.=

B. High regenerative capacity.

B. Proximity of vital organs.

G. In special care and nutrition.

D. Inconsistency between the type and severity of injury.

12. The features of wounds and injuries to the face and jaws are as follows:

A. Inconsistencies between the type and severity of injury.=

B. Low regenerative capacity.

V. Remoteness of vital organs.

G. In standard care and nutrition.

D. The possibility of using an oxygen mask or gas mask.

13. The features of wounds and injuries to the face and jaws are as follows:

A. High regenerative capacity.=

B. Correspondence between the type and severity of injury.

B. Remoteness of vital organs.

G. In standard care and nutrition.

D. The possibility of using an oxygen mask or gas mask.

14. The features of wounds and injuries to the face and jaws are as follows:

A. Proximity of vital organs.=

B. Low regenerative capacity.

B. Correspondence between the type and severity of injury.

G. In standard care and nutrition.

D. The possibility of using an oxygen mask or gas mask.

15. The features of wounds and injuries to the face and jaws are as follows:

A. In special care and nutrition.=

B. Low regenerative capacity.

V. Remoteness of vital organs.

G. Correspondence between the type and severity of injury.

D. The possibility of using an oxygen mask or gas mask.

16. The classification of fractures of the alveolar process includes a fracture:

A. All answers are correct.=

B. Comminuted

V. Complete

G. With a bone defect

D. Partial / incomplete

17. Fractures depending on the direction of the fracture gap and its shape can be:

A. Transverse, longitudinal and helical.=

B. Transverse, longitudinal and arcuate.

V. Oblique, perforated and longitudinal.

G. Perforated, zigzag and double.

D. All answers are incorrect.

18. Fractures depending on the direction of the fracture gap and its shape can be:

A. Perforated, zigzag and helical.=

B. Transverse, longitudinal and double

B. Oblique, perforated and longitudinal.

G. Transverse, longitudinal and arcuate.

d. All answers are incorrect.

19. Fractures depending on the direction of the fracture gap and its shape can be:

A. Perforated, zigzag and arch-shaped.=

B. Transverse, longitudinal and double

. Oblique, perforated and longitudinal.

G. Transverse, longitudinal and arcuate.

D. All answers are incorrect.

20. Fractures depending on the direction of the fracture gap and its shape can be:

A. All answers are correct.=

B. Longitudinal, oblique and perforated.

B. Perforated, arch-shaped and helical.

D. Arch-shaped, helical and zigzag-shaped.

d. Transverse, longitudinal and oblique.

21. In case of a fracture of the upper Fore-lower:

A. Only the dental arch of the upper jaw is movable together with the palatine process.=

B. The entire upper jaw is movable together with the nose and zygomatic bones.

V. The entire upper jaw and nose are movable.

G. There is no mobility.

D. There is no correct answer.

22. In case of a Le Fore-middle fracture:

A. The entire upper jaw and nose are movable.=

B. Only the dental arch of the upper jaw is movable together with the palatine process.

B. The entire upper jaw is movable together with the nose and zygomatic bones.

D. There is no mobility.

d. There is no correct answer.

23. With a fracture of the upper Fore-upper:

A. The entire upper jaw is movable along with the nose and zygomatic bones.=

B. Only the dental arch of the upper jaw is movable along with the palatine process.

B. The entire upper jaw and nose are movable.

G. There is no mobility of the alveolar process of the upper jaw.

D. There is no correct answer.

24. With a fracture of the angle of the lower jaw:

A. There is no mobility of the alveolar process of the upper jaw.=

B. Only the dental arch of the upper jaw is mobile together with the palatine process.

B. The entire upper jaw and nose are mobile.

G. The entire upper jaw is mobile, along with the nose and zygomatic bones.

d. There is no correct answer.

25. The main reasons for the displacement of the fragments of the upper jaw during a fracture:

A. The intrinsic gravity of the fragments, the pull of the medial pterygoid muscle, masticatory muscles, the force of impact.=

B. The force of impact provokes a shift in the direction of the vector of force application.

B. The force of impact, the intrinsic gravity of the fragment and temporal muscles.

G. The intrinsic gravity of fragments, the pull of the medial pterygoid muscle, the force impact, temporal muscles.

d. Impact force - in the direction of the force vector, the self-gravity of the fragment - down.

26. The main reasons for the displacement of the fragments of the lower jaw during a fracture:

A. The applied force (primary displacement), the gravity of the fragment, the pull of the muscles attached to the fragment, depending on the direction of the fracture line and the bevel of the fracture plane (secondary displacement).=

B. The applied force (primary displacement), the gravity of the fragment, the pull of the muscles attached to the fragment.

B. The force of contraction of the muscles attached to the fragment, depending on the direction of the fracture line and the bevel of the fracture plane (secondary displacements).

G. Traction of the muscles attached to the fragment, facial muscles (secondary displacements), own weight of the fragment.

d. There is no correct answer.

27. According to the therapeutic purpose, there are devices:

A. Main devices, auxiliary.=

B. Supporting, retaining.

V. Intraoral, extraoral, combined

G. All answers are correct.

D. There is no correct answer among the proposed ones.

28. What types of devices, according to their functional purpose, are not distinguished:

A. Stimulating devices.=

B. Replicating devices.

V. Forming devices.

G. Fixing devices.

D. Replacement devices.

29. What types of devices, according to their functional purpose, are not distinguished:

A. Medical devices.=

B. Preventive devices.

V. Combined devices.

G. Replicating devices.

D. Fixing devices.

30. What types of devices are not distinguished by their functional purpose:

A. Physical devices.=

B. Fixing devices.

V. Combined devices.

G. Forming devices.

D. Preventive devices.

31. What types of devices, according to their functional purpose, are not distinguished:

A. Devices of variable action.=

B. Replicating devices.

V. Fixing devices.

G. Forming devices.

D. Preventive devices.

32. According to the method of fixation and location, the devices are divided into:

A. Removable and non-removable.=

B. Single-jawed, double-jawed, combined.

V. Bone, skin, combined.

G. Intraoral, extraoral and overhead.

D. There is no correct answer among the proposed ones.

33. According to the method of fixation and the location of the devices are divided into:

A. Supra-oral, dental, dental.=

B. All the proposed answers are correct.

B. Single-jawed, double-jawed, combined.

G. Intraoral, extraoral and overhead.

D. Bone, skin, combined.

34. According to the method of fixation and location, the devices are divided into:

A. Intraoral, extraoral, intra-extraoral.=

B. There is no correct answer among the proposed ones.

V. Single-jawed, double-jawed, combined.

G. Bone, skin, combined.

D. Intraoral, extraoral and overhead.

35. According to the method of fixation and the location of the devices are divided into:

A. Dentate, supra-gingival, dentate, bone.=

B. Single-jawed, double-jawed, combined.

V. Bone, cutaneous, combined.

G. There is no correct answer among the proposed ones.

D. All the suggested answers are correct.

36. According to the technology and materials of manufacture, the devices are divided into:

A. Standard and individually manufactured.

B. Polymer, metal, biological.

B. Biological, chemical, physical.

G. Polymerizable, synthesized.

D. All answers are correct.

37. According to the technology and materials of manufacture, the devices are divided into:

A. Polymer, metal, combined=

B. Polymer, metal, biological.

B. Biological, chemical, physical.

G. Polymerizable, synthesized.

D. All answers are correct.

38. According to the technology and materials of manufacture, the devices are divided into:

A. Plastic, metal, metal-plastic and metal-composite.=

B. Polymer, metal, biological.

B. Biological, chemical, physical.

G. Polymerizable, synthesized.

D. All answers are correct.

39. Indications for temporary immobilization:

A. All the proposed answers are correct.=

B. Lack of conditions for the implementation of therapeutic immobilization.

B. Lack of specialized personnel capable of performing therapeutic immobilization.

G. Lack of time for therapeutic immobilization. This is usually observed during the period of hostilities or other emergencies (earthquake, accidents with a large number of victims, etc.), when there is a large flow of victims.

d. A mild general somatic condition (traumatic shock, coma, intracranial hematoma, etc.), which is not a temporary relative contraindication to medical immobilization.

40. Indications for temporary immobilization:

A. Lack of conditions for the implementation of therapeutic immobilization.=

B. All the proposed answers are correct.

B. Availability of specialized personnel capable of performing therapeutic immobilization.

d. Sufficient time for therapeutic immobilization. This is usually observed during hostilities or other emergencies (earthquake, accidents with a large number of victims, etc.), when there is a large flow of victims.

d. A mild general somatic condition (traumatic shock, coma, intracranial hematoma, etc.), which is not a temporary relative contraindication to medical immobilization.

41. Indications for temporary immobilization:

A. The lack of specialized personnel capable of performing therapeutic immobilization.=

B. All the proposed answers are correct.

B. The availability of conditions for the implementation of therapeutic immobilization.

G. Sufficient time for therapeutic immobilization. This is usually observed during the period of hostilities or other emergencies (earthquake, accidents with a large number of victims, etc.), when there is a large flow of victims.

D. A mild general somatic condition (traumatic shock, coma, intracranial hematoma, etc.), which is not a temporary relative contraindication to therapeutic immobilization.

42. Indications for temporary immobilization:

A. Lack of time for therapeutic immobilization. This is usually observed during the period of hostilities or other emergencies (earthquake, accidents with a large number of victims, etc.), when there is a large flow of victims.=

B. All the proposed answers are correct.

B. Availability of specialized personnel capable of performing therapeutic immobilization.

d. Availability of conditions for therapeutic immobilization.

d. Mild general somatic condition (traumatic shock, coma, intracranial hematoma, etc.), which is not a temporary relative contraindication to therapeutic immobilization.

43. Indications for temporary immobilization:

A. Severe general somatic condition (traumatic shock, coma, intracranial hematoma, etc.), which is a temporary relative contraindication to therapeutic immobilization.=

B. All the proposed answers are correct.

c. Availability of specialized personnel capable of performing therapeutic immobilization.

d. Availability of conditions for the implementation of therapeutic immobilization.

d. Sufficient time for therapeutic immobilization. This is usually observed during the period of hostilities or other emergencies (earthquake, accidents with a large number of victims, etc.), when there is a large flow of victims.

44. Pressure dressings are indicated for:

A. To stop bleeding.=

B. Malocclusion.

B. After primary surgical treatment of the wound.

G. The absence of consciousness in the patient.

d. There is no correct answer.

45. Pressure bandages are indicated for:

A. For all fractures of the upper jaw with the preservation of a sufficient number of teeth that will allow the fragments to be placed in the correct articulation. This prevents additional trauma to the brain, its membranes and contributes to the reduction of liquorrhea.=

B. Lack of consciousness in the patient.

B. Malocclusion pathology.

G. After primary surgical treatment of the wound.

D. There is no correct answer.

46. Pressure dressings are indicated for:

A. Fractures of the lower jaw outside the dental arch.=

B. After the initial surgical treatment of the wound.

B. Malocclusion pathology.

G. Lack of consciousness in the patient.

D. There is no correct answer.

47. Parietal-chin bandage according to Hippocrates:

a.In fractures of the lower jaw, it fixes fragments to the intact upper jaw. In case of fractures of both jaws, the bandage supports and prevents the displacement of fragments of damaged jaws, thereby significantly limiting their mobility.=

b. It is indicated for fractures of the base of the skull, it fixes the fragments.

B. It is indicated for fracture of the zygomatic bones, it acts as an alternative to surgical jamming of fragments for their further fixation.

g. It is indicated for bruises, sprains of the ligamentous apparatus of the CHLO and hematomas, to restrain an increase in volume.

D. There is no correct answer among the proposed ones.

48. Parietal-chin bandage according to Hippocrates:

A. There is no correct answer among the proposed ones.=

B. It is indicated for fractures of the base of the skull, it fixes fragments.

B. It is indicated for fracture of the zygomatic bones, it acts as an alternative to surgical jamming of fragments for their further fixation.

g. It is indicated for bruises, sprains of the ligamentous apparatus of the CHLO and hematomas, to restrain an increase in volume.

d. For fractures of the jaws, the bandage causes displacement of fragments, thereby providing functional reposition.

49. Limberg plaque:

A. Fixed with bandages or with rubber bands (rubber traction) to the headband or cap.=

B. Shown in fractures of the base of the skull, it fixes the fragments.

B. It is indicated for fracture of the zygomatic bones, it acts as an alternative to surgical jamming of fragments for their further fixation.

g. It is indicated for bruises, sprains of the ligamentous apparatus of the CHLO and hematomas, to restrain an increase in volume.

d. For fractures of the jaws, the bandage causes displacement of fragments, thereby providing functional reposition.

50. Ligature dental bandages are applied to the fast for no more than \_\_\_ days, due to the prevention of loosening of teeth:

A. 1-3=

B. 3-5

V.5-7

G. 7-10

D. 10-15

51. During immobilization in case of incomplete dislocation, a minimum of \_\_ healthy teeth must be included in the tire.

A. 2=

B. 3

V. 4

G. 5

D. 6

52. The tire during immobilization in case of incomplete dislocation is applied for a period of at least \_\_\_ weeks.

A. 5-6=

B. 6-7

V. 7-8

G. 8-9

D. 9-10

53. Tooth replantation is performed no later than \_\_ days after dislocation.

A. 2=

B. 3

V. 4

G. 5

D. 1

54. Contraindications to replantation are:

A. Destruction of the walls of the well and the inflammatory process that has begun.=

B. Initial caries.

B. Minor destruction of a dislocated tooth.

G. All possible answers are correct.

D. There is no correct answer among the presented ones.

55. Contraindication to replantation is:

A. Periodontitis=

B. Integrity of the tooth well.

B. Minor destruction of a dislocated tooth.

g. Initial caries.

d. There is no correct answer among the presented ones.

56. Contraindication to replantation is:

A. Pronounced destruction of dislocated tooth.=

B. Initial caries.

V. Initial caries.

G. Minor destruction of dislocated tooth.

D. There is no correct answer among the presented.

57. When the alveolar process is immobilized with a smooth splint-brace in the frontal section, at least \_\_ stable teeth / teeth on each side of the fracture are included.

A. 2-3=

B. 3-4

V. One

G. 5-6

D. There is no correct answer.

58. When immobilized with a smooth splint-brace in the lateral section, a minimum of \_\_ stable teeth from the intact side are included in the splint.

A. 4=

B. 3

V. 6

G. 7

D. There is no correct answer.

59. Indications for the use of a smooth tire-brace.

A. All answers are correct.=

B. Unilateral linear fracture of the mandible located within the dentition, without displacement or with easily adjustable fragments within the frontal group of teeth.

B. Fractures of the alveolar part of the mandible and the alveolar process of the upper jaw.

G. Fractures and dislocations of teeth when there are stable teeth on both sides of the intact areas of the jaw.

d. For the prevention of pathological fractures of the mandible, before sequestrectomy, cystectomy, cystotomy, resection of a part of the jaw, etc.

60. Dentoadesnevaya splint M.M. Vankevich

A. Represents a dental-gingival splint with support on the alveolar part of the upper jaw and a hard palate with downward-facing support planes.It is used in combination with a chin sling.=

B. The author made a rubber tire, currently it is made of acrylic plastics, cold and hot. They are used with the preservation of the dentition or if there are defects in it.

C. There are two varieties of this tire: with a fixed and removable inclined plane.

d. In this tire, the maxillary base is replaced by a metal arc.

D. There is no correct answer among the presented ones.

61. Weber's dental splint

A. The author made a rubber tire, currently it is made of acrylic plastics, cold and hot. It is used with the preservation of the dentition or in the presence of defects in it.=

B. Is a dental splint with support on the alveolar part of the upper jaw and a hard palate with downward-facing support planes.It is used in combination with a chin sling.

c. There are two varieties of this tire: with a fixed and removable inclined plane.

d. In this tire, the maxillary base is replaced by a metal arc.

D. There is no correct answer among the submitted ones.

62. Weber's dentoadditional splint with an inclined plane

A. There are two varieties of this splint: with a non-removable and removable inclined plane, which allows you to adjust the degree of displacement of the reponsible fragment as needed.=

B. Is a dentoadditional splint with support on the alveolar part of the upper jaw and a hard palate with downward-facing support planes. It is used in combination with a chin sling.

V. The author made the tire from rubber, currently it is made from acrylic plastics, cold and hot. It is used with the preservation of the dentition or in the presence of defects in it.

d. In this tire, the maxillary base is replaced by a metal arc, which facilitates its introduction, accelerates adaptation, increases hygiene, does not change the taste, does not cause a gag reflex.

D. There is no correct answer among the presented ones.

63. Tire M.M.Vankevich modified by A.I.Stepanov

A. In this splint, the maxillary base is replaced by a metal arc, which facilitates its introduction, accelerates adaptation, increases hygiene, does not change the taste perception, does not cause a gag reflex.=

B. Is a dental-gingival splint supported by the alveolar part of the upper jaw and a hard palate with downward-facing support planes.It is used in combination with a chin sling.

V. The author made a rubber tire, currently it is made of acrylic plastics, cold and hot. It is used with the preservation of the dentition or if there are defects in it.

D. There are two varieties of this tire: with a fixed and removable inclined plane.

d. There is no correct answer among the presented ones.

64. The causes leading to acquired defects of the maxillofacial region:

A. Everything is true.=

B. Sports injury.

V. Household injury.

G. Oncological diseases.

D. Gunshot injury.

65. Congenital defects of the maxillofacial region are:

A. Cleft palate.=

B. Malignant neoplasms.

B. Hematoma.

G. Postresection defects.

D. All answers are correct.

66. Diseases leading to defects in the maxillofacial region:

A. All answers are correct.=

B. Osteomyelitis.

V. Tuberculosis.

G. Syphilis.

D. Malignant neoplasms.

67. The toothless tire is

A. Weber=

's tire. B. Tigerstedt's tire.

V. Vasiliev's tire.

G. Port's tire.

D. There is no correct answer.

68. The toothless tire is:

A. Vankevich tire.=

B. Tigerstedt tire.

V. Vasiliev tire.

G. Port Tire.

D. There is no correct answer.

69. Supergingival tires are

A. Port Tire.=

B. Weber tire.

V. Vasiliev tire.

G. Tigerstedt tire.

D. There is no correct answer.

70. The reposing orthopedic devices are:

A. Kurlandsky tire.=

B. Port's tire.

V. Vasilyev's tire.

G. Weber's tire.

D. All answer options are correct.

71. . The reponent orthopedic devices are:

A. Shina Vankevich.=

B. Shina Port.

V. Shina Vasilieva.

G. Weber's tire.

D. All the answer options are correct.

72. With a bilateral fracture of the mandible, the median fragment shifts:

A. Back + down.=

B. Back + up.

V. Forward + down.

G. Forward + up

. There is no correct answer.

73. With a bilateral fracture of the mandible, the lateral fragments shift:

A. Up + inwards.=

B. Up + outwards.

B. Down+ inwards.

G. Down+ outwards.

D. The correct answer is not provided.

74. The type of closure of the front teeth in a bilateral fracture of the lower jaw body is:

A. Open.=

B. Prognatic.

V. Progenic.

G. Cross.

D. Distal.

75. Treatment of wounded with jaw fractures:

A. Complex.=

B. Surgical.

V. Orthopedic.

G. Therapeutic.

D. Physiotherapeutic.

76. To provide first aid for fractures of the jaws, use:

A. Standard transport tire.=

B. Ilizarov apparatus.

V. Reposition of fragments.

G. Tigerstedt wire tire.

D. There is no correct answer.

77. Defects of the hard and soft palate can be divided into:

A. Congenital + acquired.=

B. Congenital+ traumatic.

V. Acquired+ traumatic.

G. Traumatic.

D. There is no correct answer.

78. V.Y. Kurlandsky divided the defects of the hard and soft palate by topography into:

A. 4 groups.=

B. 2 groups.

V. 3 groups.

G. 5 groups.

D. There is no correct answer.

79. The 1st group of defects of the palate according to V. Y. Kurlandsky include:

A. A defect of the hard palate in the presence of supporting teeth on both jaws (the upper jaw is paired).=

B. Defect of the hard palate in the presence of supporting teeth on one half of the upper jaw.

B. Defect of the palate in the toothless upper jaw.

G. Defects of the soft palate or hard and soft palate.

D. There is no correct answer.

80. The 2nd group of defects of the palate according to V. Y. Kurlandsky include:

A. A defect of the hard palate in the presence of supporting teeth on one half of the upper jaw.=

B. A defect of the hard palate in the presence of supporting teeth on both jaws (the upper jaw is paired).

B. A defect of the palate with a toothless upper jaw.

G. Defects of the soft palate or hard and soft palate.

D. There is no right answer.

81. The 3rd group of defects of the palate according to V. Y. Kurlandsky include:

A. A defect of the palate with a toothless upper jaw.=

B. A defect of the hard palate in the presence of supporting teeth on both jaws (the upper jaw is paired).

B. A defect of the hard palate in the presence of supporting teeth on one half of the upper jaw.

G. Defects of the soft palate or hard and soft palate.

D. There is no right answer.

82. The 4th group of defects of the palate according to V. Y. Kurlandsky include:

A. Defects of the soft palate or hard and soft palate.=

B. A defect of the hard palate in the presence of supporting teeth on both jaws (the upper jaw is paired).

C. Defect of the hard palate in the presence of supporting teeth on one half of the upper jaw.

d. Defect of the palate in the toothless upper jaw.

d. There is no correct answer.

83. The etiological factors of acquired palate defects include:

A. All answers are correct.=

B. Specific infectious diseases.

B. Oncological diseases.

G. Injuries.

D. Inflammatory processes.

84. With defects of the palate, respiration is formed:

A. Weak superficial.=

B. Deep strong.

V. Whistling.

G. Cheyne-Stokes.

D. With a high tympanic sound.

85. Immediate prosthesis:

A. Is applied at the time of surgery.=

B. Is applied 14 days after the operation.

B. Is made of hypoallergenic materials.

G. Is conditionally removable.

D. Does not transmit chewing load.

86. Immediate prosthesis:

A. Is made before surgery.=

B. Is applied 14 days after surgery.

B. Is made of hypoallergenic materials.

G. Is conditionally removable.

D. Does not transmit chewing load.

87. Obturator prostheses for the treatment of patients with defects of the palate should:

A. Fit tightly into the defect of the palate.=

B. Do not enter into the defect of the palate.

B. Improve aesthetics.

G. Splint teeth.

D. There is no right answer.

88. In case of defects of the palate of the first group according to V.Y. Kurlandsky, the following are used:

A. A separating removable plate with a clamp fixation.=

B. A metal-ceramic bridge prosthesis.

V. A floating obturator Keze.

G. A clasp prosthesis with a clamp fixation.

D. A clasp prosthesis with a lock fixation.

89. In case of defects of the soft palate, the following are used:

A. Floating obturator Keze.=

B. Disconnecting removable plate with clamp fixation.

B. Metal prosthesis.

G. Metal-ceramic bridge prosthesis.

D. Clasp prosthesis with lock fixation.

90. With a large lateral defect of the hard palate and alveolar process and the absence of teeth on the upper jaw, prostheses with fixation are used:

A. By tightly strengthening the obturating part in the defect.=

B. By repulsive magnetic fixators.

B. Due to the formation of a vestibular roller on the prosthesis to strengthen the folds of the cheek mucosa.

G. by a Cadsen spring.

D. There is no correct answer.

91. The basic principle of prosthetics of patients with a false jaw joint:

A. The parts of the prosthesis located on the fragments of the jaw are connected movably.=

B. The parts of the prosthesis located on the fragments of the jaw are connected motionlessly.

B. The prosthesis has an obturating part.

G. The prosthesis is made of elastic materials.

D. There is no correct answer.

92. The possible cause of the formation of a false joint:

A. Diseases that reduce the reactivity of the body.=

B. Timely reposition and immobilization of fragments.

B. The imposition of a pressure bandage during temporary immobilization.

G. The use of fixed structures in the treatment of the patient.

D. All possible answers are correct.

93. Possible cause of the formation of a false joint:

A. Untimely reduction of fragments, insufficient immobilization=

B. Timely reposition and immobilization of fragments.

V. Applying a pressure bandage during temporary immobilization.

g. The use of fixed structures in the treatment of the patient.

d. All possible answers are correct.

94. Possible cause of the formation of a false joint:

A. Extensive ruptures of soft tissues and their insertion (interposition) between=

fractures B. Timely reposition and immobilization of fragments.

B. Applying a pressure bandage during temporary immobilization.

G. The use of fixed structures in the treatment of the patient.

D. All answer options are correct.

95. A possible cause of the formation of a false joint:

A. Long-term traumatic osteomyelitis of the jaw.=

B. Timely reposition and immobilization of fragments.

B. Applying a pressure bandage during temporary immobilization.

G. The use of fixed structures in the treatment of the patient.

D. All possible answers are correct.

96. Complete or partial restriction of joint mobility due to pathological changes in soft tissues, bones or muscle groups functionally related to this joint is:

A. Contracture.=

B. Reposition.

V. Dislocation.

G. Dislocation.

D. Arthrosis.

97. Classification of obturators by the type of connection of the fixing and obturating parts includes

A. 5 types.=

B. 4 types.

V. 3 types.

G. 2 types.

D. 6 types.

98. Correction of the Immediate prosthesis must be carried out from \_\_\_ day of use.

A. Fourteenth=

B. Second.

V. Tenth.

G. Thirtieth.

D. There is no correct answer.

99. The manufacture of a permanent prosthesis with an obturator can be started \_\_ months / ev after the operation.

A. Six.=

B. Twelve.

V. Ten.

G. Three.

D. Twenty-four.

100. For the manufacture of an immediate prosthesis on the model:

A. A future defect is simulated.=

B. The bite roller is modeled.

B. Undercuttings are isolated.

G. Teeth are placed on a wax basis.

D. There is no correct answer.