

ONȚŪSTİK QAZAQSTAN MEDISINA AKADEMIASY «Оңтүстік Қазақстан медицина академиясы» АҚ		SOUTH KAZAKHSTAN MEDICAL ACADEMY АО «Южно-Казахстанская медицинская академия»
Кафедра Хирургической и ортопедической стоматологии КОНТРОЛЬНО – ИЗМЕРИТЕЛЬНЫЕ СРЕДСТВА		45/11 1 стр. из 6

КОНТРОЛЬНО – ИЗМЕРИТЕЛЬНЫЕ СРЕДСТВА

Вопросы программы для промежуточной аттестации

Название дисциплины: Дентальная имплантология и цифровые технологии

Код дисциплины: DICT 6301

Название и шифр ОП: 6В10114- «Стоматология»

Объем учебных часов/кредитов: 150/5

Курс и семестр изучения: 6 курс, XI

ШЫМКЕНТ

2025-2026 уч.год

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Протокол: № 11 от « 23 » 06 20 25 г.

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Тестовые вопросы программы для промежуточной аттестации №1

<question>Osteointegration is:

- <variant>direct structural and functional connection between highly differentiated living bone and the implant surface
- <variant>the body's reaction to the introduction of a foreign body with the formation of a fibrous capsule
- <variant>the process of formation of connective tissue on the implant surface
- <variant>reduction in bone volume after tooth extraction
- <variant>integration of bone tissue

<question>Bioinert materials include:

- <variant>titanium, zirconium
- <variant>cast iron
- <variant>stainless steel
- <variant>silver-palladium alloys
- <variant>hydroxyapatite

<question>Xenogeneic osteoplastic material is:

- <variant>material of animal origin
- <variant>the patient's own bone
- <variant>specially processed cadaveric bone
- <variant>material of synthetic origin
- <variant>substance for the manufacture of dental implants

<question>The permissible rate of bone resorption around a screw implant in each subsequent year after the first year of operation is:

- <variant>0.2 mm
- <variant>8 mm
- <variant>1.5 mm
- <variant>2.2 mm
- <variant>0.02 mm

<question>The minimum safe distance to the wall of the mandibular canal when placing dental implants in the lateral parts of the lower jaw is:

- <variant>2 mm
- <variant>0.01 mm
- <variant>0.5 mm
- <variant>1 mm
- <variant>10 mm

<question>An abutment is:

- <variant>a superstructure
- <variant>an implant analogue

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<variant>an impression transfer

<variant>a fixing screw

<variant>a plug

<question>The choice of the option for performing sinus lifting is made on based on:

<variant>existing bone tissue level

<variant>payment level

<variant>number of missing teeth

<variant>type of implants

<variant>bone density

<question>The tightening force of the screw fixing the superstructure to the implant is determined by:

<variant>torque wrench readings

<variant>tactile sensations of the doctor

<variant>degree of mobility of the superstructure

<variant>instructions for use of the elements of the implant system

<variant>X-ray image

<question>Allogenic material is:

<variant>pecially processed cadaveric bone

<variant>osteoplastic material of synthetic origin

<variant>material of animal origin

<variant>substrate for the manufacture of implants

<variant>corals

<question>After implantation, the sutures are removed after:

<variant>7-8 days

<variant>not removed

<variant>3 weeks

<variant>2-3 days

<variant>14-16 days

<question>Which parts of the jaws are suitable for intraosseous implantation:

<variant>all parts of the jaws in which an implant can be placed without the risk of damaging certain anatomical structures

<variant>branch of the lower jaw and tubercles of the upper

<variant>only the alveolar process

<variant>anterior part of the upper and lower jaw

<variant>only the distal parts of the upper and lower jaw

<question>The maximum number of implants that can be installed in one patient:

<variant>no restrictions

<variant>less than 20

<variant>one

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<variant>two or three

<variant>no more than six

<question>The function of osteoblasts is:

<variant>bone tissue formation

<variant>resorption bones

<variant>immune function

<variant>hematopoiesis function

<variant>protect function

<question>The function of osteoclasts is:

<variant>bone resorption

<variant>bone tissue formation

<variant>bone regeneration

<variant>immune function

<variant>hematopoiesis function

<question>What anatomical structures should be taken into account when performing intraosseous implantation on the lower jaw:

<variant>maxillary sinus

<variant>incisive foramen

<variant>zygomatic process

<variant>mental foramina

<variant>inferior nasal meatus

<question>Is there adaptation or adhesion of epithelial tissue to the implant surface:

<variant>yes

<variant>absent

<variant>not studied

<variant>only for titanium implants

<variant>only for steel implants

<question>A favorable surface of an implant in the gum area is:

<variant>smooth

<variant>rough

<variant>porous

<variant>porous with a ledge

<variant>loose

<question>Which of the implants are widely used today:

<variant>intraosseous screw implants

<variant>intraosseous plate

<variant>intramucosal implants

<variant>subperiosteal implants

<variant>plate implants

<question>One of the features of the upper jaw is the presence of:

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<variant>sinuses

<variant>gums

<variant>alveoli

<variant>salivary glands

<variant>teeth

<question>The thinnest part of the outer cortical plate on the lower jaw is localized in the area of:

<variant>46-36 teeth

<variant>48-38 teeth

<variant>33-43 teeth

<variant>13-23 teeth

<variant>only within the chewing group of teeth

<question>The lower jaw can perform movements:

<variant>sagittal and transverse

<variant>sagittal and vertical

<variant>sagittal, vertical, horizontal

<variant>sagittal, vertical, transverse

<variant>unclear

<question>Local contraindications for dental implantation include:

<variant>poor oral hygiene

<variant>mental illness

<variant>history of endocarditis

<variant>taking cytostatics

<variant>absence of teeth

<question>Local contraindications for dental implantation include:

<variant>localized periodontitis

<variant>complete adentia

<variant>pathological abrasion of hard dental tissues with a decrease in the bite height

<variant>absence of one tooth

<variant>increase in the alveolar process

<question>A linear incision of the mucous membrane and periosteum during dental implantation is:

<variant>preferable to others

<variant>less effective

<variant>traumatic

<variant>unacceptable

<variant>low-traumatic

<question>When placing implants on the lower jaw, special care is taken due to:

<variant>risk of damage to the inferior alveolar nerve

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<variant>density of the cortical layer

<variant>good blood supply

<variant>increase in the alveolar process

<variant>presence of Schneider's membrane

<question>Dental implants after installation should be:

<variant>immobile

<variant>inclined

<variant>mobile 1-2 degrees

<variant>fixed with screws

<variant>straight

<question>The surgical template must clearly convey:

<variant>the planned position of the implants

<variant>the width of the alveolar process

<variant>the vertical axis of the bone bed

<variant>information about the location of infiltration anesthesia

<variant>the emotions of the dental technician

<question>The depth of the bone bed must:

<variant>be equal to the length of the implant

<variant>be shorter than the length of the implant

<variant>be formed in two levels

<variant>necessarily end at the level of the apex of the adjacent tooth

<variant>be equal to the diameter of the implant

<question>Marking of the cortical plate is carried out for the purpose of:

<variant>convenience of the doctor

<variant>ensuring reliable adhesion of the instrument to the bone

<variant>determining the depth

<variant>not carried out at all

<variant>determining the width

<question>Dental implantation is indicated patients who:

<variant>complex anatomical conditions in the oral cavity make it difficult to fix traditional removable dentures

<variant>severe atrophy of the jaw bone caused by an endocrine disease

<variant>impaired blood supply to the tissues of the jaw

<variant>diseases of the blood system have been identified

<variant> diseases of the muscul system

<question>For successful implantation, there must be on each side of the implant:

<variant>at least 1.5-2 mm of bone reserve

<variant>at least 0.5 mm of bone reserve

<variant>a lot of mobile mucosa

<variant>a lot of immobile mucosa

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<variant>this is not important

<question>When installing screw implants, primary fixation depends on:

<variant>the degree of contact of the implant with the surrounding bone tissue

<variant>the quality of the sutures

<variant>the timing of suture removal

<variant>the thickness of the periosteum

<variant>the quality of the installed implant

<question>The incision of the mucous membrane when dental implantation is performed:

<variant>scalpel

<variant>raspatory

<variant>scissors

<variant>knife

<variant>trowel

<question>Healthy mucous membrane of the alveolar process is usually:

<variant>moist and has a uniform pale pink color

<variant>hyperemic

<variant>sharply painful on palpation

<variant>has areas of hyperkeratosis

<variant>cyanotic

<question>When applying a suture, an atraumatic needle is fixed:

<variant>in a needle holder

<variant>in a clamp

<variant>by hand

<variant>tweezers

<variant>fingers

<question>To apply a suture, you need the following tools:

<variant>needle with ligature, needle holder, tweezers, scissors

<variant>needle with ligature, needle holder

<variant>needle holder, tweezers, scissors

<variant>tweezers, scissors

<variant>only scissors

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Тестовые вопросы программы для промежуточной аттестации №2

1. <question>The patient is implanted through the tooth canal into the bone, and it is a pin with different elements for its fixation. Type of implantation:
 - <variant>endodontic-endosteous
 - <variant>endosteous
 - <variant>subperiosteal
 - <variant>endosteous-subperiosteal

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<variant>endodontic-subperiosteal

2. <question>The patient was implanted with a plate implant. Type of implantation performed:

<variant>endosteous

<variant>endodontic-endosteous

<variant>subperiosteal

<variant>endosteous-subperiosteal

<variant>periosteal

3. <question>After skeletonization of the alveolar process of the jaw, an impression was taken from the patient and a metal implant with support bands was made according to the bone relief. Type of implantation performed:

<variant>subperiosteal

<variant>endodontic-endosteous

<variant>endosteous

<variant>endosteous-subperiosteal

<variant>subosteous

4. <question>The patient is offered implantation using a cylindrical ceramic implant. Type of implantation performed:

<variant>endosteous

<variant>endodonto-endosteous

<variant>subperiosteal

<variant>endosteous-subperiosteal

<variant>transgingival

5. <question>WHO announced the beginning of the covid-19 pandemic–

<variant>March 11, 2020

<variant>February 20, 2020

<variant>January 13, 2020

<variant>April 13, 2020

<variant>May 19, 2020

6. <question>These organisms are natural hosts of many coronaviruses:

<variant>mammals

<variant>voids

<variant>reptiles

<variant>aquatic organisms

<variant>insects

7. <question>COVID-19-does not apply to the routes of approach infection:

<variant>transmission

<variant>air through droplets

<variant>air-through dust

<variant>communication through a handshake

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<variant>communication through used

8. <question>Maximum incubation period for COVID-19 infection:

<variant>14 days

<variant>1.5 months

<variant>7 days

<variant>21 days

<variant>one-how many hours

9. <question>Diagnosis of acute respiratory distress syndrome (ARVI) is based on:

<variant>Berlin clinical criteria for determining

<variant>SMART-COP /SMRT-CO scale

<variant>Gina's recommendations

<variant>Gold suggestions

<variant>CURB/65 CRB/65 scale

10.<question>Tactics for managing a patient with a severe form of coronavirus infection complicated by viral pneumonia and ARVI:

<variant>in an isolated box intensive care unit and intensive care unit of an infectious diseases hospital under the supervision of an infectious diseases specialist and an intensive care specialist

<variant>leave for outpatient treatment in an infectious diseases hospital, a ward department under the supervision of an infectious diseases specialist under daily supervision of a local therapist and consultation with an infectious diseases specialist

<variant>under the supervision of an infectious diseases specialist in a ward-type department

<variant>in an intensive care unit under the supervision of a intensive care specialist and a therapist

<variant>outpatient observation

11.<question>Specify the phases of the febrile phase of the infectious process in Covid-19, the duration of which:

<variant>early mild - 8-14 days and late mild - 15-28 days

<variant>primary (flu-like) 1-7 and late mild - 15-28 days

<variant>phase of virus replication 2-14 and primary (flu-like) 1-7 days

<variant>reconvolution period 14 days-3-6 months and early mild-8-14 days

<variant>incubation 2-14 days and initial (flu-like) phase 1-7 days

12.<question>Implantation titanium, aka:

<variant>BT-10

<variant>BT-7

<variant>BT-64

<variant>BT-87

<variant>BT-32

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13.<question>Temperature range for shape recovery for implantation nickellide titanium:

- <variant>-20 – +15
- <variant>-15 – +25
- <variant>-70 – +10
- <variant>+25 – +35
- <variant>+1 – +7

14.<question>The most common type of implantation:

- <variant>endodontic-endosteous
- <variant>endosteous (intraosteous)
- <variant>intramucosal (insert implantation)
- <variant>submucosal (submucosal)
- <variant>subperiosteal

15.<question>Non-separable structures of intraosteous implants are used in:

- <variant>two-stage implantation technique
- <variant>intramucosal implantation
- <variant>one-stage implantation technique
- <variant>subperiosteal implantation
- <variant>submucosal implantation

16.<question>The technique of immediate implantation consists of:

- <variant>installation of an implant in a fresh socket of an extracted tooth
- <variant>installation of only one type of implant
- <variant>installation of an implant 3 weeks after tooth extraction
- <variant>installation of an implant after complete healing of the bone wound as a result of tooth extraction
- <variant>installation of an implant in the area of an existing defect

17.<question>The developer of the screw design of implants is:

- <variant>Ch. Weiss
- <variant>J. Majillo
- <variant>P.I. Branemark
- <variant>E. Vares
- <variant>L. Linkov

18.<question>The area of contact between the implant and the bone is increased by:

- <variant>acid treatment
- <variant>lyophilization
- <variant>degreasing
- <variant>threading
- <variant>alloying

19.<question>The phenomenon of osseointegration was discovered by:

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<variant>J. Majillo

<variant>Ch. Weiss

<variant>L. Linkov

<variant>E. Vares

<variant>P.I. Branemark

20.<question>Primary stability of the installed implant is achieved due to:

<variant>"tight fit" of the implant in the bone

<variant>physicochemical properties of the implantation material

<variant>compliance with the rules of asepsis and antisepsis during surgery

<variant>correct choice of the implantation technique

<variant>individual characteristics of the body

21.<question>Direct contact between the structural elements of bone tissue (osteons and trabeculae) and the implant, established after healing and structural reorganization of the bone, in which the surface of the implant and the bone tissue itself are separated by a thin, 100 to 200 A thick, layer of partially mineralized bone matrix is:

<variant>osteomalacia

<variant>distant osteogenesis

<variant>osteointegration

<variant>osteoporosis

<variant>fibroosteointegration

22.<question>Indirect contact between the structural elements of the bone and the

surface of the implant, when there is a layer of connective tissue, which can be represented by a layer of non-mineralized organic bone matrix, more than 200 A thick, or fibrous tissue is:

<variant>osteomalacia

<variant>fibroosteointegration

<variant>contact osteogenesis

<variant>osteointegration

<variant>osteoporosis

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