Chapter 2: Orofacial Injury and Reactive Disorders

Multiple (Identify the	Choice e choice that best completes the statement or answers the question.
	 Which of the following is best classified as a <i>physical</i> trauma? A. Surgical trauma B. Infection C. Exposure to a caustic agent D. Burn
	 2. The response to a stimulus in which there is an increase in the size of an <i>organ</i> or <i>tissue</i> due to an increase in the number of cells is known as: A. Hypertrophy B. Hyperplasia C. Dystrophy D. Aplasia
	 3. An increase in size of a body part or tissue due to the increase in the size of individual cells is known as: A. Hyperplasia B. Metaplasia C. Hypertrophy D. Atrophy
	 Increased size of the shoulder muscles in a weight-lifter is an example of: A. Pathological hypertrophy B. Pathological hyperplasia C. Physiological hyperplasia D. Physiological hypertrophy
:	 5. Loss of filiform papillae on the tongue following a long-standing fungal infection is considered an example of: A. Pathological atrophy B. Physiological aplasia C. Pathological metaplasia D. Physiological atrophy
	 The transformation of the normal ciliated columnar epithelium of the respiratory tract to stratified squamous epithelium in response to the stress of chronic exposure to tobacco smoke is an example of: A. Anaplasia B. Metaplasia C. Neoplasia D. Desmoplasia
	7. Melanocytes are located in which layer of the epithelium?A. Keratin layer

		B. Granular layerC. Spinous layerD. Basal layer
	8.	Hemosiderin is a pigment derived from hemoglobin and contains: A. Ferric oxide B. Ferric sulphate C. Copper chloride D. Silver dibromide
	9.	Restriction in blood supply generally due to damaged blood vessels is called: A. Necrosis B. Ischemia C. Hypoplasia D. Hyperplasia
	10.	Hypoxic damage of the kidney is a classic example of: A. Fibrinoid necrosis B. Caseous necrosis C. Coagulative necrosis D. Liquefactive necrosis
	11.	Tissues take on a "cheese-like" appearance in which of the following forms of necrosis? A. Fat necrosis B. Liquefactive necrosis C. Coagulative necrosis D. Caseous necrosis
	12.	The process of programmed or planned cell death is called: A. Apoptosis B. Aplasia C. Atrophy D. Anaplasia
	13.	Free radicals can form after exposure to all of the following EXCEPT: A. Radiation B. Antioxidants C. Tobacco smoke D. Environmental toxins
	14.	Metastatic calcification is associated with all EXCEPT: A. Renal failure B. Vitamin D disorders C. Hypothyroidism D. Hypercalcemia
	15.	Senescence refers to the: A. Free radical formation leading to cell death B. Areas of necrosis when blood calcium levels are elevated

	C. Areas of necrosis when blood calcium is at normal levelsD. Fixed number of normal divisions before cells die
 16.	Which of the following is NOT characteristic of chronic inflammation? A. Proliferation of cells B. Vasoconstriction C. Neovascularization D. New connective tissue
17.	Which of the following is NOT one of the cardinal signs of inflammation? A. Heat B. Swelling C. Infection D. Pain
 18.	An abnormally large amount of leakage of fluid from the bloodstream into the surrounding tissues causing tissue distortion is known as: A. Agglutination B. Opsonization C. Migration D. Edema
 19.	Narrowing of blood vessels and signal transmission between nerve cells is facilitated by: A. Serotonin B. Plasma proteases C. Histamine D. Thrombin
 20.	 Kallidin is a blood protein that serves to dilate blood vessels and is part of the: A. Central nervous system B. Kinin system C. Fibrinolytic system D. Complement system
21.	Which of the following converts fibrinogen to fibrin to assist in clot formation? A. Serotonin B. Heparin C. Thrombin D. Bradykinin
 22.	Which of the following best describes how polymorphonuclear leukocytes (neutrophils) stain?A. They lack staining.B. They stain red.C. They stain blue.D. They stain brown.
 23.	Neutrophils, considered the first line of defense in acute inflammation, comprise what percentage of circulating leukocytes? A. 30%–40%

	B. 50%-70% C. 5%-10% D. 20%-25%
 24.	Eosinophils form the first line of defense against parasites using: A. IgG receptors B. IgM receptors C. IgE receptors D. IgA receptors
 25.	Which of the following are the precursor cells for mast cells? A. Eosinophils B. Neurophils C. Macrophages D. Basophils
 26.	Macrophages present in connective tissue are also known as: A. Histiocytes B. Neutrophils C. Platelets D. Erythrocytes
 27.	Platelets make an important contribution in injury, inflammation, and repair by playing a role in all of the following EXCEPT: A. Binding immune complexes B. Production of antibodies C. Enhancing vascular permeability D. Coagulation cascade
 28.	Corticosteroids are produced by the adrenal gland in response to stress. Which of the following is NOT a function of this hormone? A. Increases blood glucose B. Aids in carbohydrate metabolism C. Activates the immune system D. Suppresses the immune system
 29.	Formation of tiny new vascular channels to aid in reconstruction after injury is known as: A. Fibrinolysis B. Anticoagulation C. Lymphadenopathy D. Neovascularization
 30.	The most common location in the oral cavity for a pyogenic granuloma is on the: A. Gingiva B. Tonsillar pillars C. Anterior tongue D. Junction of hard and soft palate
 31.	Healing associated with a paper cut is commonly classified as healing by:

	A. Primary intentionB. Secondary intentionC. Tertiary intentionD. Subtraction
32.	Surgical and trauma cases where there is removal of significant portions of tissue without infection result in what type of healing? A. Primary intention B. Approximate intention C. Secondary intention D. Tertiary intention
33.	Wounds infected with microorganisms result in what type of healing? A. Primary intention B. Extravasation C. Secondary intention D. Tertiary intention
34.	Hyperkeratotic lesions appear white due to absorption of: A. Moisture B. Hemosiderin C. Serum D. White blood cells
35.	Linea alba is a specific form of frictional keratosis that is seen as a thin, slightly raised white keratotic line on the: A. Hard palate B. Buccal mucosa C. Floor of the mouth D. Tongue
 36.	Morsicatio labiorum is a form of frictional keratosis caused by habitual chewing or nibbling on the: A. Tongue B. Buccal mucosa C. Lips D. Hard palate
 37.	Amalgam tattoos in the mouth can be a result of all the following EXCEPT: A. Placement or removal of amalgam restorations B. Fracture of dental amalgams via trauma or tooth extraction C. Endodontic treatment that involved placing amalgam at the apex of the tooth D. Accidental implantation of graphite from a pencil
 38.	Oral postinflammatory pigmentation is associated with which of the following disorders? A. Oral lichen planus B. Tetanus C. Polio D. Herpes simplex

39.	Melanoacanthosis is seen almost exclusively in people of which descent? A. Caucasian B. Asian C. African D. Latino
 40.	Smoker's melanosis is a condition of excessive melanin pigmentation found in the gingiva of what percentage of smokers? A. 5% B. 10% C. 15% D. 20%
 41.	The best method to diagnose any pigmented lesion other than amalgam tattoo is: A. Biopsy B. Cytological smear C. Brush biopsy D. Radiographs
 42.	A common intraoral site for traumatic ulcers is the: A. Hard palate B. Lateral border of the tongue C. Attached gingiva D. Floor of the mouth
43.	Chronic traumatic ulcers called traumatic ulcerative granuloma develop raised, rolled borders and often mimic: A. Pyogenic granulomas B. Frictional keratosis C. Oral cancer D. Lichen planus
 44.	Anesthetic necrosis is an unusual traumatic ulceration seen in patients who receive an anesthetic injection for dental procedures and typically occurs adjacent to the: A. Mental foramen B. Incisive foramen C. Mandibular foramen D. Greater palatine foramen
 45.	Patients who misuse tablets or powders that contain acetylsalicylic acid by placing them directly on their oral tissues may experience an ulceration that is best described as a(n): A. Chemical burn B. Electric burn C. Thermal burn D. Idiopathic burn
 46.	Erythema migrans (geographic tongue) commonly affects the: A. Fungiform papillae

	B. Filiform papillaeC. Circumvallate papillaeD. Foliate papillae
 47.	Granuloma gravidarum are pyogenic granulomas observed in: A. Elderly women B. Children and adolescents C. Infants D. Pregnant women
48.	Verruciform xanthoma is a form of epithelial hyperplasia frequently misdiagnosed clinically as a: A. Papilloma B. Pyogenic granuloma C. Fibroma D. Traumatic eosinophilic ulceration
49.	The calcification present in peripheral ossifying fibromas is primarily deposited by: A. Cementoblasts B. Osteoblasts C. Ameloblasts D. Osteoclasts
 50.	Which of the following may produce resorption of underlying bone with a cupped pattern observed radiographically? A. Pyogenic granuloma B. Operculum C. Peripheral giant cell granuloma D. Epulis granulomatosa
51.	Three of the following lesions all have similar clinical features in the oral cavity. Which of the following is NOT one of The Three Ps? A. Pyogenic granuloma B. Epulis granulomatosa C. Peripheral ossifying fibroma D. Peripheral giant cell granuloma
52.	Epulis granulomatosa is always associated with: A. A nonhealing extraction site B. A healing extraction site C. Chronically infected teeth D. Nonvital teeth
53.	Erupting teeth may be partially covered by a flap or hood of fibrotic tissue known as an operculum. This phenomenon is most often seen with: A. Maxillary incisors B. Mandibular premolars C. Maxillary premolars D. Mandibular molars

 54.	All the following medications are implicated in drug-induced gingival hyperplasia EXCEPT: A. Aspirin B. Phenytoin C. Cyclosporin D. Nifedipine
55.	Mucous extravasation phenomenon of the minor salivary glands is most commonly referred to as a: A. Pyogenic granuloma B. Mucocele C. Peripheral giant cell granuloma D. Ranula
 56.	Superficial mucoceles are typically caused by: A. Blockage of salivary duct B. Rupture of salivary duct C. Dilatation of salivary duct D. Mucosal inflammation
57.	Salivary gland duct cyst is a mucous retention phenomenon. It is also called: A. Sialocyst B. Sialoliths C. Sialogogues D. Sialorrhea
 58.	Cysts of Blandin-Nuhn are located on the: A. Labial lip mucosa B. Anterior ventral surface of the tongue C. Anterior dorsal surface of the tongue D. Posterior floor of the mouth
59.	What percentage of necrotizing sialometaplasia is associated with minor salivary glands in the posterior hard palate region? A. 10% B. 40% C. 75% D. 90%
60.	Sialoliths obstructing the Wharton's duct are present in which salivary gland? A. Sublingual B. Parotid C. Glands of Blandin-Nuhn D. Submandibular
 61.	Noninflammatory salivary gland enlargement generally associated with underlying systemic factors including endocrine disorders such as diabetes is known as: A. Sialadenosis B. Sialolithiasis C. Sialorrhea

	D. Benign sialometaplasia
 62.	All the following are associated with denture stomatitis EXCEPT: A. Poor denture hygiene B. Adenomatoid hyperplasia C. Candida albicans infection D. Allergic reaction to denture material
 63.	Inflammatory papillary hyperplasia is a form of denture stomatitis that most frequently occurs: A. As an allergic response to cinnamon or mint flavorings B. On the soft palate C. In association with an ill-fitting lower denture D. On the hard palate under complete upper or partial dentures
 64.	Ill-fitting dentures can result in all the following EXCEPT: A. Sialadenosis B. Fibroepithelial polyp C. Epulis fissuratum D. Inflammatory papillary hyperplasia
 65.	Chronic hyperplasic pulpitis is typically present in molars of children with: A. Premature closure of the apical foramen B. Immature root formation (open apical foramen) C. Pulpal necrosis D. Pulp stones
 66.	An abnormal channel originating deep within tissues and extending to the epithelial or mucosal surface is known as a(n): A. Sinus tract B. Ulcer C. Fibroepithelial polyp D. Parulis
 67.	In the maxilla, an untreated dental abscess can spread to the cavernous sinus of the brain and result in a life-threatening condition known as: A. Orofacial fistula. B. Ludwig's angina C. Infarction of Thoreau D. Cerebral infarction
 68.	Ludwig's angina is generally associated with an infection in the: A. Mandibular arch B. Maxillary arch C. Hard palate D. Soft palate
 69.	Apical scars most often occur as radiolucent lesions around the apices of teeth with a history of: A. Pulpal necrosis B. Root end resection and fill

	C. Abscess D. Cellulitis
 70.	Apical and lateral radicular cysts are commonly indicative of: A. Apical scar formation B. Abscess C. Nonvital teeth D. Space infections
 71.	Denticles are comprised of dentin with tubules surrounded by: A. Ameloblasts B. Cementoblasts C. Fibroblasts D. Odontoblasts
 72.	Localized areas of bone sclerosis or scarring adjacent to teeth with large caries or extensive restorations are known as: A. Bony sequestra B. Condensing osteitis C. Osteoradionecrosis D. Ankylosis
 73.	Osteomyelitis can result from all of the following EXCEPT: A. Dental infections B. Radiation therapy C. Subpontine hyperostosis D. Neoplastic conditions
 74.	A fragment of necrotic bone surrounded by vital bone is known as: A. Periostitis B. A sequestrum C. Osteomyelitis D. An involucrum
 75.	Fusion of cementum on tooth roots to the surrounding alveolar bone is called: A. Ankylosis B. Condensing cementitis C. Ankyloglossia D. Sclerosis
 76.	Early lesions of cemento-osseous dysplasia often mimic periapical pathology. The difference is that in cemento-osseous dysplasia: A. Dental abscess is the most prominent feature. B. The teeth are vital. C. Osteomyelitis does not occur. D. Ankylosis is the most prominent feature.
 77.	All the following are stages in cemento-osseous dysplasia EXCEPT: A. Maturation stage

	B. Osteolytic stageC. Cementoblastic stageD. Osteoblastic stage
 78.	Periapical cemental dysplasia is: A. A large cemento-osseous dysplasia B. A serious disorder with possible severe health consequences C. Closely resembles bone cancer. D. Located around the roots of the mandibular anterior teeth
 79.	Cemento-osseous dysplasia involving two or more quadrants is known as: A. Florid cemento-osseous dysplasia B. Focal cemento-osseous dysplasia C. Peripheral cemento-osseous dysplasia D. Periapical cemental dysplasia
 80.	Bisphosphonate therapy is used in the treatment of all of the following bone-related conditions EXCEPT: A. Paget disease B. Periapical cemental dysplasia C. Osteoporosis D. Multiple myeloma
 81.	Bisphosphonates attempt to preserve bone by: A. Stimulating osteoblasts to lay down new bone B. Preventing osteoclasts from laying down new bone C. Interfering with osteoclasts that normally resorb old bone D. Interfering with osteoblasts that normally resorb old bone
 82.	Central giant cell granuloma is associated with large numbers of multinucleated giant cells. Which of the following can present with an identical microscopic appearance? A. Hyperparathyroidism B. Pituitary adenoma C. Paget disease D. Hypothyroidism
 83.	Renal osteodystrophy: A. Results in kidney stones and thick strong bones B. Occurs in patients with end-stage kidney disease C. Reduces jaw size due to bone remodeling D. Produces few complications and is rarely a serious condition
 84.	Postsurgical hyperostosis: A. Occurs as a result of osteoblast stimulation in the periosteum B. Occurs as a result of osteoclast stimulation in the periodontal ligament C. Is comprised of abnormal dysplastic bone D. Is most often a serious complication of tooth extraction
 85.	Traumatic bone cavity, previously known as traumatic bone cyst, is not a true cyst because it:

		 A. Is not associated with a tooth B. Does not have an epithelial lining C. Is not associated with pulpal necrosis D. Is asymptomatic and does not enlarge
_	 86.	Which of the following resembles a blood-soaked sponge, and is associated with an increase in venous pressure and rupture of the local vascular network? A. Traumatic bone cavity B. Postsurgical hyperostosis C. Aneurysmal bone cyst D. Central giant cell granuloma
_	 87.	What type of tooth wear occurs as a result of tooth-to-tooth contact? A. Erosion B. Abfraction C. Abrasion D. Attrition
_	 88.	Loss of tooth hard tissue due to chemical exposure is called: A. Erosion B. Attrition C. Abrasion D. Abfraction
_	89.	Gastrointestinal reflux, vomiting during pregnancy, and bulimia can lead to: A. Abfraction B. Erosion C. Attrition D. Abrasion
_	 90.	Cysts and tumors adjacent to teeth can lead to: A. Internal resorption B. Attrition of teeth C. External resorption D. Abfraction

Chapter 2: Orofacial Injury and Reactive Disorders Answer Section

MULTIPLE CHOICE

1.	ANS:	A	PTS:	1
2.	ANS:	В	PTS:	1
3.	ANS:	C	PTS:	1
4.	ANS:	D	PTS:	1
5.	ANS:	A	PTS:	1
6.	ANS:	В	PTS:	1
7.	ANS:	D	PTS:	1
8.	ANS:	A	PTS:	1
9.	ANS:	В	PTS:	1
10.	ANS:	C	PTS:	1
11.	ANS:	D	PTS:	1
12.	ANS:	A	PTS:	1
13.	ANS:	В	PTS:	1
14.	ANS:	C	PTS:	1
15.	ANS:	D	PTS:	1
16.	ANS:	В	PTS:	1
17.	ANS:	C	PTS:	1
18.	ANS:	D	PTS:	1
19.	ANS:	A	PTS:	1
20.	ANS:	В	PTS:	1
21.	ANS:	C	PTS:	1
22.	ANS:	A	PTS:	
23.	ANS:	В	PTS:	1
24.	ANS:	C	PTS:	1
25.	ANS:	D	PTS:	1
26.	ANS:	A	PTS:	1
27.	ANS:	В	PTS:	1
28.	ANS:	C	PTS:	1
29.	ANS:	D	PTS:	1
30.	ANS:	A	PTS:	1
	ANS:		PTS:	1
	ANS:		PTS:	1
33.	ANS:	D	PTS:	1
	ANS:	A	PTS:	1
35.	ANS:		PTS:	1
36.	ANS:	C	PTS:	1
37.	ANS:	D	PTS:	1
38.	ANS:	A	PTS:	1

39.	ANS:	C	PTS:	1
40.	ANS:	D	PTS:	1
41.	ANS:	A	PTS:	1
42.	ANS:	В	PTS:	1
43.	ANS:	C	PTS:	1
44.	ANS:	D	PTS:	1
45.	ANS:	A	PTS:	1
46.	ANS:	В	PTS:	1
47.	ANS:	D	PTS:	1
48.	ANS:	A	PTS:	1
49.	ANS:	В	PTS:	1
50.	ANS:	C	PTS:	1
51.	ANS:	В	PTS:	1
52.	ANS:	A	PTS:	1
53.	ANS:	D	PTS:	1
54.	ANS:	A	PTS:	1
55.	ANS:	В	PTS:	1
56.	ANS:	D	PTS:	1
57.	ANS:	A	PTS:	1
58.	ANS:	В	PTS:	1
59.	ANS:	C	PTS:	1
60.	ANS:	D	PTS:	1
61.	ANS:	A	PTS:	1
62.	ANS:	В	PTS:	1
63.	ANS:	D	PTS:	1
64.	ANS:	A	PTS:	1
65.	ANS:	В	PTS:	1
66.	ANS:	A	PTS:	1
67.	ANS:	D	PTS:	1
68.	ANS:	A	PTS:	1
69.	ANS:	В	PTS:	1
70.	ANS:	C	PTS:	1
71.	ANS:	D	PTS:	1
72.	ANS:	В	PTS:	1
73.	ANS:	C	PTS:	1
74.	ANS:	D	PTS:	1
75.	ANS:	A	PTS:	1
76.	ANS:	В	PTS:	1
77.	ANS:	C	PTS:	1
	ANS:		PTS:	1
	ANS:		PTS:	1
	ANS:	В	PTS:	1
	ANS:		PTS:	1

82.	ANS:	A	PTS:	1
83.	ANS:	В	PTS:	1
84.	ANS:	A	PTS:	1
85.	ANS:	В	PTS:	1
86.	ANS:	C	PTS:	1
87.	ANS:	D	PTS:	1
88.	ANS:	A	PTS:	1
89.	ANS:	В	PTS:	1
90.	ANS:	C	PTS:	1