

Government Medical College and Hospital Sector 32, Chandigarh

Post: Senior Resident Dentistry

QUESTION BOOKLET

Time: 120 Minutes

Number of Question: 100

Maximum Marks: 100

Name of Candidate

Roll Number: In figure

In Words

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Signature of the Candidate: _____

DO NOT OPEN THE SEAL ON THE BOOKLET UNTIL ASKED TO DO SO

INSTRUCTIONS:-

1. Write your Roll Number on the Question Booklet and also on the OMR Sheet in the space provided. You will be required to give your thumb impression on the OMR sheet in the space provided.
2. This question booklet contains 100 MCQ's. Once you are permitted to open the Question Booklet, please check for any missing question / misprint etc. and in case of any discrepancy, inform the Assistant Superintendent / Invigilator within 10 minutes of the start of the test.
3. Each question has four alternative answer (A, B, C, D) out of which only one is correct. For each question, **darken only one bubble (A or B or C or D)**, whichever you think is the correct answer, on the OMR Answer sheet **with Black or Blue Ball Pen only**. Do not use any other Pen / Gel pen / Pencil etc. **Do not Tick ✓ or × on the OMR Sheet**. Darken the bubbles in the OMR Answer Sheet according to the Serial No. of the Questions given in the Question Booklet.
4. Each MCQ is of One (01) mark. There is no negative marking.
5. If you do not want to answer a question, leave all the bubbles corresponding to that question blank in the OMR Answer sheet.
6. The OMR Answer sheet is designed for computer evaluation. Therefore, if you do not follow the instructions given, it may make evaluation by the computer difficult. Any resultant loss to the candidates on the above account, i.e. not following instructions completely and properly, shall be the responsibility of the candidates only.
7. After the test, handover the Question Booklet and OMR sheet to the Invigilator on duty.
8. A Candidate who creates disturbance of any kind or changes his/her seat or is found in possession of any paper or the any assistance or found giving or receiving assistance or found using any other unfair means during the examination will be expelled from the examination by the Centre superintendent/Observer whose decision shall be final.
9. Telecommunication equipment such as pager, cellular phone, wireless, scanner, smart watch/ watch etc. is not permitted inside the examination hall. Use of calculators is not allowed.
10. Candidate should ensure accuracy of their personal details on the OMR Sheet i.e. Name and Roll No. as well as thumb impression. The personal details are to be filled in by the candidates with his/her own hand writing.

1. The muscle which is paralysed in facial palsy is:
 - A. Dilator Pupillae
 - B. Orbicularis oculi
 - C. Levator palpebrae superioris
 - D. Constrictor pupillae
2. The most common plasma protein is:
 - A. Keratin
 - B. Albumin
 - C. Fibrinogen
 - D. Globulin
3. Oxygen is transported in blood primarily as:
 - A. Free Oxygen radicals
 - B. Bicarbonate in plasma
 - C. Dissolved in plasma
 - D. Oxyhemoglobin
4. Respiratory acidosis is seen in:
 - A. Diabetic ketoacidosis
 - B. Nephrotic syndrome
 - C. Neuromuscular failure
 - D. Hyperventilation syndrome
5. The most common malignant lesion of bone is:
 - A. Osteosarcoma
 - B. Metastatic carcinoma
 - C. Osteogenic sarcoma
 - D. Osteochondroma
6. In untreated chronic myeloid leukaemia the characteristic finding is lack of:
 - A. Neutrophils
 - B. Platelets
 - C. Alkaline phosphatase in granulocytes
 - D. Acid phosphatase in granulocytes
7. Clostridium tetani infection toxin spreads through:
 - A. Blood
 - B. Lymphatics
 - C. Motor neurons
 - D. Sensory nerves
8. The first anaerobes to appear on a pellicle are:
 - A. Actinomyces
 - B. Clostridium
 - C. Propionibacterium
 - D. Veillonella
9. All are the methods of sterilising EXCEPT:
 - A. Autoclaving
 - B. Gamma rays
 - C. UV radiation
 - D. Ethylene oxide gas
10. The first permanent tooth to erupt in the oral cavity is:
 - A. Mandibular central incisor
 - B. Maxillary central incisor
 - C. Maxillary first molar
 - D. Mandibular first molar
11. In embryology the nerve of the first arch is:
 - A. Facial nerve
 - B. Mandibular nerve
 - C. Glossopharyngeal nerve
 - D. Vagus nerve
12. The upper lip is formed from:
 - A. Medial nasal process
 - B. Maxillary process
 - C. Medial nasal process and maxillary process
 - D. Lateral nasal process
13. The teeth with the most severe destruction in juvenile periodontitis are:
 - A. Incisors and first molars
 - B. Incisors and second molars
 - C. Incisors and first premolar
 - D. Incisors and second premolar
14. All are topical anaesthetic agents EXCEPT:
 - A. Dibucaine
 - B. Lignocaine
 - C. Tetracaine
 - D. Procaine
15. The maximum movement of drug occurs across the membrane when it is:
 - A. In cationic form
 - B. Completely ionised
 - C. Unionised
 - D. Partially ionised
16. The gingiva is attached to tooth by:
 - A. Connective tissue fibres
 - B. Periodontal ligament
 - C. Lamina propria
 - D. Epithelial attachment

17. The predominant connective tissue cells of the periodontal ligament are:
 - A. Osteoclasts
 - B. Fibroblast
 - C. Osteoblast
 - D. Epithelial rests of Malassez
18. The periodontal ligament space is widest at:
 - A. Apical region
 - B. Mid-root level
 - C. Alveolar crest
 - D. Fulcrum of rotation
19. The most common clinical sign of occlusal trauma is:
 - A. Resorption of alveolar ridge
 - B. Fracture of cusp
 - C. Widening of periodontal ligament
 - D. Tooth mobility
20. The gingival index of score 2 means:
 - A. No bleeding on probing
 - B. Bleeding on probing
 - C. Gingiva is healthy
 - D. Spontaneous bleeding
21. The three walled defects commonly occur:
 - A. On facial side
 - B. On lingual side
 - C. At furcation area
 - D. In interdental area
22. To distinguish gingivitis from periodontitis, the histopathology criteria used is:
 - A. Occlusal trauma
 - B. Bone resorption
 - C. Howship's lacunae
 - D. Materia alba
23. The first clinical sign of juvenile periodontitis is:
 - A. Pain and bleeding
 - B. Gingival enlargement and pus formation
 - C. Tooth mobility and bone loss
 - D. Pathological tooth migration and midline diastema
24. Sub gingival calculus is highest in:
 - A. Lower molar region
 - B. Lower Bicuspids region
 - C. Lower anterior region
 - D. Upper molar region
25. Window shaped alveolar defect on labial alveolar bone is called:
 - A. Dehiscence
 - B. Crater
 - C. Trough
 - D. Fenestration
26. Hyperplastic gingiva is found in all of the following condition EXCEPT:
 - A. Hereditary fibromatosis
 - B. Faulty tooth brushing
 - C. Hereditary fibromatosis
 - D. Nifedipine therapy
27. All of the following can cause Desquamative gingivitis EXCEPT:
 - A. Lichen planus
 - B. Pemphigoid
 - C. Herpes simplex
 - D. Pemphigus
28. The best way to detect bony defects is:
 - A. Surgical exposure
 - B. Probing
 - C. Measurement of pocket depth
 - D. Radiograph at different angulations
29. The non-surgical procedure which is indicated in early periodontitis is:
 - A. Gingivectomy
 - B. Scaling and root planning
 - C. Gingival curettage
 - D. Flap surgery
30. The re-epithelisation of sulcus occurs after curettage in about:
 - A. 2-7 days
 - B. 10-12 days
 - C. 16-20 days
 - D. 21-28 days
31. The enzyme present in saliva which causes cell wall lysis is:
 - A. Lysozyme
 - B. Lactoferrin
 - C. Peroxidase
 - D. Hyaluronidase
32. In Le Fort I fracture, the fracture fragment includes all of the following EXCEPT:
 - A. Nasal Spine
 - B. Bridge of the nose
 - C. Upper teeth and palate
 - D. Lower portions of the pterygoid processes

33. The common plunger cusp which causes food impaction is: -
- Mesio-lingual cusp of upper first molar
 - Disto-facial cusp of lower first molar
 - Disto-lingual cusp of upper second molar
 - Disto lingual cusp of lower second molar
34. The first step in Coronoplasty is elimination of:
- Working side contact pre maturities
 - Balancing side interferences
 - Excessive contact of anterior teeth
 - Retrusive contact prematurities
35. Mucogingival defect with recession beyond mucogingival line with no loss of bone or soft tissue is called:
- Class I defect
 - Class II defect
 - Class III defect
 - Class IV defect
36. The pain in cracked tooth syndrome is:
- Variable
 - Continuous in nature
 - Elicited when biting pressure is applied
 - Sharp pain on release of biting pressure
37. A well stabilised clamp on a rubber dam serves all EXCEPT:
- It provides a finger rest
 - Compresses the interdental gingiva
 - Prevents the movements of rubber dam
 - Help to maintain dry field
38. The crazing, cracking and wear fractures of the composites is due to:
- Low modules of resiliency
 - Low surface hardness
 - Low setting shrinkage
 - High modulus of elasticity
39. The bonding in porcelain fused to metal restorations is:
- Chemical and mechanical
 - Only chemical bonding
 - Metallic and adhesive
 - Only mechanical bonding
40. Pulp polyp is usually found in young teeth with:
- Chronic open pulpitis
 - Acute pulpitis
 - Apical abscess
 - Periapical infection
41. A patient undergoing fixed orthodontic treatment injured his upper central incisor which became non-vital. The treatment of choice will be to:
- Remove arch wire and perform endodontic therapy
 - Extract the tooth as orthodontic tooth movement is not possible in non-vital tooth
 - Prescribe antibiotics until orthodontic treatment is complete
 - Perform endodontic therapy without disturbing bands and arch wires
42. Internal resorption may result from all EXCEPT:
- Horizontal root fracture
 - Crown fracture
 - Trauma
 - Teeth treated with pulpectomy
43. The differentiation between periapical abscess and periodontal abscess is by:
- History and vitality test
 - Test cavity preparation
 - Palpation and radiographs
 - Radiographs and history
44. The flap design that limits accessibility and results in scar formation for peri-apical surgery is:
- Envelope
 - Triangle
 - Semilunar
 - Trapezoid

45. The fractures of tooth which have poor prognosis are:
- Vertical root fracture
 - Horizontal fracture at apical third of root
 - Horizontal fracture at middle third of root
 - None of the above
46. The common sequela of a replanted avulsed tooth is:
- Periapical cyst
 - Periapical granuloma
 - Internal resorption
 - Ankylosis and resorption of roots
47. The instrument that is likely to break in root canal during the root canal procedure when twisted at more than 90° degrees is:
- Broach
 - Reamer
 - Spreader
 - File
48. The most effective action of irrigating solutions in root canal procedure depends on the:
- Aspiration of solution
 - Anti-microbial action
 - Chelating action
 - Volume of solution
49. The root canal of maxillary first permanent molar which is difficult for instrumentation is:
- Disto lingual
 - Disto buccal
 - Mesio lingual
 - Mesio buccal
50. The usual location of the fourth canal (if found) in a maxillary permanent molar is:
- Under disto-buccal cusp
 - Adjacent to distobuccal canal
 - In between disto-buccal and palatal canal
 - Palatal to and in mesio-buccal root
51. The aging pulp is characterised by:
- Increased fibroblasts and pulp stones
 - Increased vascularity and fibroblasts
 - Increased fibrosis and pulp stones
 - Decreased vascular and increased fibroblasts
52. The perforation during root canal procedure which has poorest prognosis occurs at:
- Furcation
 - Coronal third
 - Apical third
 - Middle third of root
53. During root canal treatment the technique which is best suited for preparing fine and curved canals is:
- Step back technique
 - Crown down technique
 - Step down technique
 - Double flare technique
54. The most common perforation of Mandibular incisor during root canal procedure occurs in:
- Incisal direction
 - Labial direction
 - Lateral direction
 - Lingual direction
55. The working length of root canal during root canal procedure is:
- 0.1 mm to 0.25 mm short of radiographic apex
 - 0.5 mm to 1 mm short of radiographic apex
 - 1.5 mm to 2 mm short of radiographic apex
 - Exactly at apex
56. When a dentist is treating a cooperative child making the other child observe the treatment is an example of:
- Modelling
 - Association
 - Desensitization
 - Reinforcement

57. The dental examination of a two-year-old child in a dental office is done on:
- Dental assistants lap
 - The dentists lap itself
 - Mother's Lap
 - Dental chair separated from parents
58. The classical psychoanalytic theory was given by:
- Pavlov
 - Sigmoid Freud
 - Jean Piaget
 - Hertz
59. According to Frankel's behaviour rating scale a child who is reluctant to accept treatment is classified as:
- Definitely positive (++)
 - Positive (+)
 - Definitely negative (- -)
 - Negative (-)
60. A light blush dome shaped lesion on the inside of a lip of two-year-old child is:
- Mucoccele
 - Melanoma
 - Hematoma
 - Haemangioma
61. Absence of pulp canals, radiographically short roots and brown teeth discolouration is seen in:
- Dentinogenesis imperfecta
 - Ectodermal dysplasia
 - Congenital porphyria
 - Amelogenesis imperfecta
62. The common types of cerebral palsy are:
- Spasticity and rigidity
 - Ataxia and athetosis
 - Spasticity and athetosis
 - Rigidity and tremors
63. The recommended time period for splinting of an avulsed anterior tooth is:
- One Week
 - 2-3 Week
 - 6-8 Week
 - 3 Months
64. The best space maintainer for a decayed primary tooth is:
- Lingual arch
 - Band and loop
 - Properly restored tooth
 - Removable functional type
65. In comparison to adults the inferior alveolar nerve block in a child is given at the level:
- Lower than for adults
 - Higher than for adults
 - At the same level
 - More anteriorly
66. The common problem associated after a mandibular nerve block in children is:
- Lip biting
 - Syncope
 - Haematoma
 - Convulsions
67. The first dental visit of a child should be preferably
- Below 2 years
 - 2-3 years
 - 4-5 years
 - 6-7 years
68. According to Ellis classification of injuries to anterior teeth, the fracture of crown involving dentin but not the pulp is classified as:
- Class I
 - Class II
 - Class III
 - Class IV
69. In extrusion injury, the period of stabilisation of injured teeth is:
- 1 week
 - 2 week
 - 2-3 week
 - 4-6 week
70. A retained lower deciduous incisor will usually:
- Deflect permanent teeth lingually
 - Deflect permanent teeth labially
 - Deflect permanent teeth distally
 - Cause ankylosis of permanent teeth

71. The placing of beaks of forceps into the fureation of primary second molar during extraction in 6-year-old child is contraindicated because of:
- Possibility of fracture of crowns
 - Proximity of succedaneous tooth buds
 - Possibility of fracture of facial plates
 - Possibility of fracture of lingual plates
72. The eruption of teeth is delayed in all of the following EXCEPT:
- Acromegaly and hyperthyroidism
 - Cretinism and Dentigerous cyst
 - Rickets and cherubism
 - Hypothyroidism and cleidocranial dysplasia
73. The most documented evidence for aetiology of congenital anodontia is:
- Hereditary
 - Endocrine disturbance
 - Metabolic disturbance
 - Nutritional disturbance
74. The dental arch form is finally determined by:
- Growth pattern
 - Facial type
 - Angles classification
 - Balance between intra oral and extra oral muscle forces
75. "Ugly duckling" stage is seen at:
- 5-6 years
 - 7-8 years
 - 9-10 years
 - Above 12 years
76. The Frankfort horizontal plane is a reference plane constructed by joining:
- Nasion and sella
 - Porion and Nasion
 - Porion and Orbitale
 - Porion and sella
77. The localised gingival recession in the region of Mandibular incisors may be due to:
- Increased spacing of teeth
 - Idiopathic fibrosis
 - Abnormal frenal attachment
 - Dilantin therapy
78. In orthodontic treatment reverse head gear is used mainly to:
- Retract maxilla in maxillary skeletal protrusion
 - Induce the growth of maxilla in skeletal retrusion
 - Inhibit the growth of mandible in class III skeletal relation
 - Induce the growth of mandible in class III skeletal relation
79. The treatment of persistent fibrotic gingival margins six months after removal of orthodontic bands is:
- Curettage and root planning
 - Gingivoplasty
 - Oral hygiene instructions
 - Gingivectomy
80. The contraindications of serial extraction are all EXCEPT:
- Impacted canine teeth
 - Class II Div II with deep bite
 - Congenital absence of premolar
 - Severe crowding in mixed dentition
81. The posterior bite plane is used in correcting:
- Deep over bite
 - Anterior cross bite
 - Anterior open bite
 - Posterior cross bite
82. The best measure for central tendency in a highly skewed distribution is:
- Mode
 - Mean
 - Median
 - Range

83. Mandibular denture which is overextended will be dislodged as a result of function of:
- Buccinator
 - Masseter
 - Temporalis
 - Lateral pterygoid
84. The main disadvantage with relining and rebasing the complete denture is:
- Reduction of stability
 - Change in centric relation
 - Allergic response to reliner
 - Loss of retention
85. The primary stress bearing area in maxillary complete denture is:
- Edentulous ridges
 - Posterior palatal area
 - Buccal sulcus area
 - Anterior palate
86. The anatomic teeth which are used in complete dentures have cuspal inclines of:
- 0 degrees
 - 5 degrees
 - 25 degrees
 - 33 degrees
87. The patient's complaint of difficulty in swallowing after wearing a new complete denture is due to:
- Increased freeway space
 - Increased vertical dimension
 - Decreased vertical dimension
 - Overextension of the post dam area
88. The main disadvantage of metal ceramic restorations is:
- Poor colour matching
 - Less retentive
 - More porous compared to porcelain jacket crown
 - Less strength compared to porcelain jacket crown
89. The first step in tooth preparation for porcelain jacket crown is:
- Lingual reduction
 - Facial reduction
 - Incisal reduction
 - Proximal reduction
90. The least hygienic pontic is:
- Spheroidal
 - Bullet
 - Saddle
 - Sanitary
91. The Bennett shift exerts its influence mainly in:
- Protusive movements
 - Lateral movements
 - Retruded contact position
 - Opening and closing movements
92. The stability in complete denture is achieved by:
- Occlusion
 - Better adaptation of denture to the tissues
 - Selection of teeth
 - Articulation
93. The most important function of clasp in a denture is to:
- Give resiliency
 - Give strength
 - Give flexibility
 - Distribute stresses
94. Epulis fissuration is caused by:
- Chronic inflammation of gingiva
 - Chronic inflammation by broken tooth
 - Ill-fitting dentures
 - Retained roots
95. The commonly used impression material for diagnostic casts of removable partial denture is:
- Irreversible hydrocolloid
 - Impression paste
 - Elastomeric impressions
 - Reversible hydrocolloid
96. A Mucocoele of the lower lip should be treated by:
- Electrocautery
 - Incision
 - Excision including adjacent minor salivary gland
 - Incision and drainage followed by antibiotics

97. The fracture of mandible where full complement of teeth is present is best treated by:
- A. Intra oral open reduction
 - B. Circumferential wiring
 - C. Full cast splints
 - D. Closed reduction and intermaxillary fixation
98. A gunning's splint is used in the treatment of:
- A. Anterior dento-alveolar fracture
 - B. Fracture of the edentulous mandible
 - C. Fracture of condylar neck of a child
 - D. Fracture of dentulous mandible
99. To perform tracheostomy, the entry should be made at the:
- A. Thyroid notch
 - B. Thyroid membrane
 - C. Cricoid cartilage
 - D. Cricothyroid ligament
100. The most difficult Mandibular impacted third molar to remove is:
- A. Distoangular
 - B. Horizontal
 - C. Vertical
 - D. Mesioangular

ANSWER KEY

SUBJECT: SENIOR RESIDENT DENTISTRY 2023

1	B	21	D	41	D
2	B	22	C	42	D
3	D	23	D	43	A
4	C	24	C	44	C
5	B	25	D	45	A
6	C	26	B	46	D
7	C	27	C	47	A
8	D	28	A	48	D
9	C	29	C	49	D
10	D	30	A	50	D
11	B	31	A	51	C
12	C	32	B	52	A
13	A	33	C	53	D
14	D	34	D	54	B
15	C	35	B	55	B
16	D	36	D	56	A
17	B	37	B	57	C
18	C	38	A	58	B
19	D	39	A	59	D
20	B	40	A	60	A
61	A	81	B		
62	C	82	C		
63	A	83	B		
64	C	84	B		
65	A	85	A		
66	A	86	D		
67	A	87	B		
68	B	88	A		
69	C	89	D		
70	A	90	C		
71	B	91	B		
72	A	92	B		
73	A	93	D		
74	D	94	C		
75	C	95	A		
76	C	96	C		
77	C	97	D		
78	B	98	B		
79	B	99	D		
80	D	100	A		