



**Tests for Graduate Exam
at the Discipline of Orthodontics**

1. CS Mark the dento-maxillary anomalies that are determined by infantile swallowing:

- a) deep bite
- b) *open bite
- c) *protrusion of the upper frontal teeth
- d) dental rotations
- e) dental transpositions

2. CS Select the age when it is typical the infantile swallowing:

- a) *0-6 months
- b) 4-6 years
- c) 5-6 years
- d) 6-9 years
- e) 12-14 years

3. CM Enumerate the clinical features for mouth breathing:

- a) *lip incompetence
- b) *dry and chapped lips
- c) *backward position of the lower jaw
- d) forward position of the lower jaw
- e) short lingual frenum

4. CS Mark the clinical situations when the labio-mental fold is accentuated in:

- a) facial asymmetry
- b) *the lower third of the face is short
- c) the lower third of the face is long
- d) anterior crossbite
- e) open bite

5. CM Mark the clinical situations where the lower everted lip is encountered:

- a) *anterior crossbite
- b) open bite
- c) deep bite
- d) positive overjet
- e) *negative overjet

6. CS Mark the dento-maxillary anomalies accompanied by adenoidal face:

- a) I class
- b) *II/1 class
- c) II/2 class
- d) III class, skeletal form
- e) III class, functional form



7. CS Select the goal of the prenatal prophylactics:
- a) getting medical leave of absence at birth
 - b) *ensuring intrauterine development
 - c) ensuring the newborn development
 - d) loaded physical regime of pregnancy
 - e) diet full of carbohydrates for the pregnant woman
8. CS Select the dento-maxillary component that is taken the impression first in children:
- a) upper jaw dental arch
 - b) hard palate
 - c) *lower jaw dental arch
 - d) right half of the dental arch
 - e) left half of the dental arch
9. CM Select the components that the impression of the upper jaw should reproduce:
- a) *dental arch
 - b) *lip frenum
 - c) *oral vestibule
 - d) *hard palate
 - e) lingual space
10. CM Mark the clinical situations where the Pont's index can't be determined:
- a) the sum of incisors is 28 mm
 - b) *the crown of the 36 tooth is deteriorated
 - c) *inclusion of the 44 tooth
 - d) ectopia of the superior canine
 - e) ectopia of the inferior canine
11. CS Select the joined landmarks for Frankfurt horizontal plane:
- a) auriculare - gonion
 - b) *porion - orbitale
 - c) nasion - basion
 - d) nasion - pogonion
 - e) subnazale - pogonion
12. CS Select the value of the SNB angle in mandibular retrognathism:
- a) *75°
 - b) 80°
 - c) 85°
 - d) 90°
 - e) 100°
13. CM Name the clinical features typical for Angle class II/2 malocclusion:
- a) long lower third of face
 - b) *distal relationship of the first molar teeth



- c) mesial relationship of the first molar teeth
- d) protrusion of upper central incisors
- e) *retrusion of upper central incisors

14. CS Select the surface reserved for one chair in orthodontic department:

- a) 5 m²
- b) *7 m²
- c) 10 m²
- d) 12 m²
- e) 14 m²

15. CM Mark the main rooms of the dental laboratory:

- a) *modeling room
- b) wardrobe
- c) bathroom
- d) *soldering – welding room
- e) *cast room

16. CM Mark the factors that contribute to the occurrence of diastema:

- a) *abnormal attachment of upper lip frenum
- b) *supernumerary teeth mesiodens
- c) macrodontia
- d) breathing disorders
- e) infantile type of swallowing

17. CM Mark the orthodontic appliances that are used in diastema treatment:

- a) Balters appliance
- b) Frankel appliance
- c) *fixed orthodontic appliance
- d) *removable appliance with hand-form springs
- e) removable appliance with protraction springs

18. CM Name the main factors in growth and development of the facial bones:

- a) *biologic growth potential
- b) *functional factor
- c) *tooth eruption process
- d) tooth brushing
- e) physiognomic factor

19. CM Mark the effects of the early loss of temporary teeth:

- a) bone growth acceleration
- b) *dento-maxillary growth imbalance
- c) *deep bite
- d) *teeth extrusions
- e) *teeth mesial inclinations



20. CS Identify the physiological types of occlusion:

- a) crossbite
- b) open bite
- c) distal occlusion
- d) mesial occlusion
- e) *orthognatic

21. CM Mark the periods of physiologic rise of the occlusion, determined with the teeth eruption:

- a) temporary incisors
- b) temporary canines
- c) *temporary molars
- d) *the first permanent molars
- e) *the second permanent molar and the canine

22. CS Identify the method of analysis used in transversal modifications of the dental arch:

- a) Korkhaus
- b) *Pont
- c) Snaghina
- d) Tweed- Merrifield
- e) Van der Linder

23. CS Select the facial profile in malocclusion of II/1 class, skeletal form:

- a) concave
- b) *convex
- c) biconcave
- d) biconvex
- e) straight

24. CM Identify the methods of space creation on the dental arch in Angle class I malocclusion:

- a) myogimnastics
- b) *aproximal stripping
- c) *premolarisation
- d) *expansion of the upper jaw
- e) selective grinding of the non-erased cusps

25. CM Select the deviations of the tooth eruption process:

- a) *impacted teeth
- b) *native teeth
- c) macrodentia
- d) *early eruption
- e) *late eruption

26. CS Select the characteristics of dental transposition:

- a) abnormal dental eruption
- b) mesial dental displacement



- c) distal dental displacement
- d) dental rotation around its longitudinal axe
- e) *teeth change their places in the dental arch

27. CS Select the characteristics of hypodontia:

- a) dental anomaly of shape
- b) dental anomaly of structure
- c) dental rotation around the long axis
- d) supernumerary teeth
- e) *numerical reduction of teeth

28. CM Select the methods of diagnosis for the anomalies of occlusion in sagittal plane:

- a) *biometric study of casts
- b) *panoramic X-ray of jaws
- c) *lateral cephalometrics
- d) axial cephalometrics
- e) facial cephalometrics

29. CM Specify others names of the deep occlusion syndrome:

- a) *deep bite
- b) *over bite
- c) progenic syndrome
- d) *syndrome of incisive overlap
- e) *molar infraalveolie

30. CM List the retaining elements of the removable orthodontic appliance:

- a) arch Coffin
- b) *clasps Adams
- c) *occlusion overlap
- d) *clasps Stahl
- e) *clasps Schwarz

31. CS Mark the malocclusion when regulator of function Fränkel, type III is used to treat:

- a) Angle class I
- b) Angle class II/1
- c) *Angle class III
- d) deep bite
- e) crossbite

32. CS Bionator Balters type II is used to treat:

- a) deep bite
- b) *open bite
- c) crossbite
- d) Angle class I malocclusion
- e) Angle class III malocclusion



33. CM Mark the types of congenital facial clefts:

- a) *slanting cleft of the face
- b) *transversal cleft of the face
- c) *fissure of a lip-alveolar and the palate
- d) early eruption
- e) late eruption

34. CS Select the contention appliances:

- a) orthodontic plate with screw
- b) orthodontic appliance with brackets
- c) *Hawley appliance
- d) trainer
- e) palatal expander

35. CS Specify what means a tooth shift along its longitudinal axis:

- a) extrusion
- b) intrusion
- c) *rotation
- d) tipping
- e) translation

36. CS Select what means shift of the tooth root in the vertical direction:

- a) distal shift
- b) *intrusion
- c) rotation
- d) translation
- e) tipping

37. CS Specify the active element, used for the oral inclination of the front teeth:

- a) Coffin arch
- b) clasps
- c) *retraction vestibular arch
- d) occlusion overlaps
- e) orthodontic screw

38. CM Mark the orthodontic element used for the upper jaw expansion:

- a) *Coffin arch
- b) *orthodontic screw
- c) hand-shaped spring
- d) retraction vestibular arch
- e) protraction spring

39. CM Choose the appliances used for the treatment of the sagittal malocclusions:

- a) Balters type II appliance
- b) *trainer



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Pag.7/ 20

- c) *bracket-system
- d) *removable orthodontic appliances
- e) orthodontic space maintainers

40. CM Choose the component parts of the removable prostheses:

- a) *acrylic plate
- b) *artificial teeth
- c) brackets
- d) *clasps
- e) occlusion overlaps

41. CM Select the measures of interceptive treatment in dento-maxillary anomalies:

- a) *breaking mouth breathing
- b) *breathing functional re-education
- c) *breaking bad habits
- d) *swallowing functional re-education
- e) health education

42. CM Determine the cases in which removable partial prosthesis is indicated:

- a) *partial adentia
- b) *early loss of temporary teeth
- c) *stimulation of permanent teeth eruption
- d) functional re-education
- e) normalization of the occlusal curve Spee

43. CS Define the relapse:

- a) functional disturbance
- b) pathological dental mobility
- c) complication during the orthodontic treatment
- d) maintaining of the postorthodontic result
- e) *imbalance between the shape and function appeared postorthodontic treatment

44. CM List the possible complications as the result of the application of strong forces:

- a) dental decay
- b) *gingival recessions
- c) *apical root resorptions
- d) *lateral root resorptions
- e) *pathological dental mobility

45. CM Mark the clinical features of distal occlusion:

- a) facial assymetry
- b) *convex profile
- c) *Sn (subnasion) before N-Pg plane
- d) everted lower lip
- e) *increased overjet



46. CM Mark the dental arch characteristic in narrowed jaws:

- a) *elongate
- b) *narrowed symmetrically
- c) *narrowed asymmetrically
- d) shortened
- e) widened

47. CM Specify the measure for prevention of jaws narrowing:

- a) ensuring a correct diet during pregnancy
- b) diversity of food additives in the first year of life
- c) *breaking bad habits
- d) *breathing functional re-education
- e) *elimination of pathological changes in nasopharynx

48. CM Choose the consequences in abnormal attachment of labial frenum:

- a) gingival hyperplasia
- b) *gingival recession
- c) tooth hypoplasia
- d) teeth crowding
- e) *teeth spacing

49. CM Select the favoured processes by the breastfeeding of the newborn:

- a) first rise of the occlusion
- b) *first mesialisation of the mandible
- c) second mesialisation of the mandible
- d) *balanced development of the facial muscles
- e) imbalanced development of the child

50. CM Specify the indications of dental extraction in orthodontics:

- a) *supernumerary teeth
- b) *primary dento-alveolar disharmony
- c) *ensuring the normal evolution of the permanent teeth
- d) endoalveolia with a space deficit of 5-6 mm
- e) incisivo-canine cramps accompanied by lateral breaches

51. CM Select the types of orthodontic appliances according to the anchoring method:

- a) *fixed
- b) *mobile
- c) *removable
- d) non-functional
- e) mixed

52. CS Mark the method of action of the fixed orthodontic appliance with brackets:

- a) functional
- b) intermittent



- c) * mechanical
- d) mixed
- e) pasive

53. CM Indicate the varieties of steel used to make metal brackets:

- a) * austenite
- b) ferrite
- c) martensite
- d) carbon steel with nickel
- e) * nickel-free stainless steel

54. CS Specify the high-precision bracket manufacturing technology of the slot:

- a) * CAD / CAM milling
- b) milling of metal plates
- c) "lost wax" microselection
- d) injection molding of the metal
- e) turret technology

55. CS Mark the vertical movement of the tooth from the occlusal plane:

- a) extraction
- b) extrusion
- c) * intrusion
- d) protrusion
- e) retraction

56. CS Name the element of the mobilizable orthodontic appliance that has a tooth retraction function:

- a) * vestibular arch
- b) the "mushroom" bow
- c) the Coffin arch
- d) splint
- e) the retroincisive plate

57. CS Indicate the constructive parts of the labial bow:

- a) central curvature, loop and retaining tails
- b) "S" loop and retention tails
- c) central curvature and two loops
- d) central curvature and retention tails
- e) *central curvature, two loops and retaining tails

58. CS Specify the indication for prosthetic treatment in children:

- a) macrodentition
- b) microdentition
- c) hyperdentition
- d) *partial or extensive anodontia
- e) early tooth eruption



59. CS Specify the interval of time indicated for changing the partially removable prostheses in children:

- a) 2 months
- b) * 6-8 months
- c) 1.5 years
- d) 2 years
- e) 2.5 years

60. CM Name the group that Andresen-Häupl activator belongs to:

- a) mechanical device
- b) functional device
- c) * functional directional device
- d) * intraoral appliance
- e) monobloc with mixed action

61. CM Indicate the component parts of the Andresen-Häupl activator:

- a) * labial bow
- b) * palatal plate
- c) * lingual plate
- d) retroincisive inclined plane
- e) * interocclusal acrylic mass

62. CS Determine the activation frequency of the orthodontic screw:

- a) * 1 week
- b) 2 weeks
- c) 3 weeks
- d) 1 month
- e) 2 months

63. CM Specify the action of the anterior inclined plane in an orthodontic appliance:

- a) maxillary expansion
- b) * mandible propulsion
- c) * mandibular retropulsion
- d) lateral guidance of the mandible
- e) maintaining canine guidance

64. CM Select orthodontic appliances used in the treatment of class II/1 Angle malocclusion:

- a) * palatal plate with screw
- b) * Andresen-Häupl activator
- c) * fixed device with brackets
- d) * trainer
- e) space maintainer

65. CM List the orthodontic appliances used in the treatment of class III Angle malocclusion:

- a) * Bruckl-Reichenbach appliance
- b) * fixed device with brackets



- c) * Fränkel functional regulator, type III
- d) Fränkel functional regulator, type II
- e) space maintainer

66. CM Select the component parts of the orthodontic plate with maxillary expansion effect:

- a) * Coffin bow
- b) vestibular arch
- c) the "mushroom" bow
- d) the retroincisive plate
- e) * orthodontic screw

67. CM Indicate the biomaterials used for making orthodontic wires in a fixed bracket appliance:

- a) * Ni-Ti alloy
- b) *TMA alloy
- c) *stainless steel
- d) polymers
- e) melot

68. CM Identify the specific clinical signs of the mandibular laterodeviation:

- a) * facial symmetry at physiological rest
- b) facial asymmetry at physiological rest
- c) * chin deviation at occlusal contact
- d) deviation in the mandible opening path
- e) limitation of the mandibular opening

69. CM Mark the situations of use of orthodontic appliances for prophylactic purposes:

- a) * prevention of dento-maxillary anomalies
- b) * early loss of temporary teeth - space maintainer
- c) interceptive treatment of dento-maxillary anomalies
- d) curative therapy of dento-maxillary anomalies
- e) retention period

70. CM Select the fixed appliance elements that are glued to the enamel:

- a) orthodontic wire
- b) *bracket
- c) *button
- d) metal ligature
- e) *orthodontic tube

71. CM Select the orthodontic appliances used in the treatment of dental ectopies:

- a) prophylactic
- b) * fixed
- c) * removable
- d) functional
- e) pasive



72. CM Indicate the devices used in the treatment of sagittal malocclusions:

- a) * the trainer
- b) * fixed appliance with brackets
- c) space maintainer
- d) Balters bionator, type II
- e) *Fränkel regulator, type II

73. CM Select the elements of the removable devices that stimulate the extrusion of permanent lateral teeth in the mixed dentition:

- a) lingual shield
- b) Schwartz clasp
- c) * retroincisive plate
- d) * unilateral splint in the area of temporary teeth
- e) * bilateral splints in the area of temporary teeth

74. CM Select the effects produced during the orthodontic treatment of upper jaw compression:

- a) * transverse displacement of the lateral teeth
- b) sagittal movement of the lateral teeth
- c) * flattening of the palatal vault
- d) deepening of the palatal vault
- e) * widening of the palatal suture

75. CM Mark the reactions of the alveolar bone in the orthodontic dental movements:

- a) * direct bone resorption in the pressure area
- b) * indirect bone resorption in the pressure area
- c) * osteoid formation in the tension zone
- d) * bone apposition in the tension zone
- e) bone repositioning

76. CM Name the active elements of the fixed orthodontic appliance:

- a) * wire
- b) * elastic chain
- c) button
- d) * metal ligature
- e) molar tube

77. CM Indicate the type of tooth movements produced by the removable orthodontic appliances:

- a) * egression
- b) * ingression
- c) * rotation
- d) * version
- e) torque

78. CM Determine the type of forces triggered by the removable orthodontic appliances:

- a) continuous



- b) * discontinuous
- c) * intermittent
- d) permanent
- e) extraoral

79. CM Select the theories that explain orthodontic dental movements:

- a) * bioelectric
- b) pressure
- c) tension
- d) * pressure-tension
- e) * blood flow

80. CM Indicate the types of orthodontic forces according to the rhythm of application:

- a) *continuous
- b) *discontinuous
- c) *intermittent
- d) permanent
- e) temporary

81. CM Mark the reactions of the alveolar bone in the orthodontic dental movements:

- a) * apposition
- b) hypercementosis
- c) * direct resorption
- d) * indirect resorption
- e) root buds

82. CM List the possible complications of tooth movements:

- a) * hypercementosis
- b) hypocementosis
- c) * root resorptions
- d) * root buds
- e) direct bone resorption

83. CM Indicate the factors that can cause the relapse:

- a) * teeth
- b) gum
- c) * bone
- d) * ligaments
- e) * muscles

84. CM Indicate the reasons for contention in orthodontics:

- a) facial appearance
- b) stability of post-treatment teeth
- c) * instability of the position of the teeth after treatment
- d) * periodontal reorganization



e) * post-treatment growth control

85. CS Select the mechanism dento-maxillary anomalies development caused by bad habits:

- a) occurrence of occlusal interferences
- b) lack of physiological dental abrasion
- c) insufficient muscle activity
- d) limitation of masticatory movements
- e) * changing the balance between antagonistic muscle forces

86. CM Select the orthodontic appliances indicated for breaking bad habits:

- a) * vestibular plate
- b) * lingual shield plate
- c) * the trainer
- d) Delaire mask
- e) twin block

87. CS Indicate the concept of harmonious development of the component parts of the dento-maxillary system:

- a) attitude determines form
- b) form determines the function
- c) the form appreciates the physiognomy
- d) * the function determines the form
- e) the mother determines the function

88. CS Specify the time period of the organogenesis of the dento-maxillary system:

- a) 0-2 intrauterine weeks
- b) * 0-12 intrauterine weeks
- c) 4 intrauterine months - birth
- d) 4 intrauterine months - 16 years postnatal
- e) 16-21 years

89. CM Determine the consequences of early loss of the second temporary molar:

- a) * early eruption of permanent first molar
- b) late eruption of permanent molars
- c) distalization of permanent first molar
- d) * mesialization of the permanent first molar
- e) vestibularization of the upper incisors

90. CM Select the constructive features of partially removable prostheses in children:

- a) * ensuring a space of 1-1.5 mm, vestibular, between the base and the alveolar ridge
- b) the edge of the base is sharp
- c) * the edge of the base is thickened
- d) * temporary clasps
- e) ceramic artificial teeth



91. CM Indicate the effects of mastication on the development of the dento-maxillary system:

- a) * stimulation of osteogenic growth centers
- b) inhibition of osteogenic centers
- c) development of the Gothic palatal vault
- d) * improving blood circulation in areas of muscle insertion
- e) * favoring the mesialization of the mandible in the temporary dentition

92. CM Name the main factors in the growth and formation of the facial skeleton:

- a) the physiognomic factor
- b) * functional factor
- c) * biological growth potential
- d) * the process of tooth eruption
- e) the tooth brushing process

93. CM Select the consequences of the persistence of temporary teeth:

- a) early eruption of the permanent successor
- b) * vicious eruption of the permanent successor
- c) * inclusion of the permanent tooth
- d) open bite
- e) * cross-bite

94. CM Indicate clinical-morphological signs of temporary physiological occlusion at the age of 2-3 years:

- a) * semicircular dental arches
- b) parabolic dental arches
- c) * incisive overlap of $\frac{1}{2}$
- d) * vertical terminal plane
- e) accentuated occlusal curves

95. CM Indicate clinical-morphological signs of temporary physiological occlusion at the age of 5-6 years:

- a) * spaced dental arches
- b) incisive overlap of $\frac{1}{3}$
- c) * minimum incisive overlap
- d) vertical terminal plane
- e) * terminal plane with mesialized step

96. CS Specify the intermaxillary relationship in newborns:

- a) superior retrognathia
- b) * lower retrognathia
- c) lower prognathia
- d) superior macrognathia
- e) lower micrognathia

97. CS Indicate the period of formation of the primary and secondary palate:

- a) 4-5 weeks i/u
- b) * 6-7 weeks i/u



- c) 12-14 weeks i/u
- d) at birth
- e) 1 year postnatal

98. CM Name the facial buds that merge to form the upper lip:

- a) frontal
- b) * internal nasals
- c) external nasals
- d) * maxillary
- e) mandibular

99. CM Select the entities determined by harmful actions in the period of morphogenesis of the dento-maxillary system:

- a) anodontia
- b) supernumerary teeth
- c) * dental dystrophies
- d) * dental shape anomalies
- e) * jaw shape anomalies

100. CM Indicate the phylogenetic tendencies of the dento-maxillary system:

- a) * poorly structured periodontium
- b) * reduction of tooth size
- c) * reduction of the number of teeth
- d) increase in the size of the jaws
- e) * modification of the neurocranial / viscerocranial ratio

101. CS Relapse in case of long-axis rotated teeth can be prevented by:

- a) * supracrestal circumferential fibrotomy
- b) frenectomy
- c) extraction of included teeth
- d) extractions for equilibrium
- e) maintaining the integrity of the arch

102. CM Mark the reactions of the alveolar bone in the orthodontic dental movements:

- a) * direct bone resorption in the pressure area
- b) * indirect bone resorption in the pressure area
- c) * formation of osteoid in the tension zone
- d) * bone apposition in the tension zone
- e) bone repositioning

103. CM Define orthodontic implants:

- a) * titan alloy
- b) * temporary anchorage device
- c) permanent anchorage device



- d) transdental insertion
- e) *monocortical insertion

104. CM Name the type of tooth movement specific to fixed orthodontic appliances:

- a) intrusion
- b) extrusion
- c) version
- d) * torque
- e) * body movement

105. CM Indicate alloys used for archwires in a fixed orthodontic appliance:

- a) carbon steel
- b) gaudent
- c) * nickel-titanium
- d) * stainless steel
- e) * titanium-molybdenum

106. CS Name the technique for fixing the retention elements of fixed appliances to enamel with composite:

- a) aggregation
- b) banding
- c) co-optation
- d) *collage
- e) takeoff

107. CM Select the constructive elements of the brackets:

- a) * base
- b) * clip
- c) clasps
- d) * slot
- e) * wings

108. CM Indicate biomaterials used for fixing brackets to enamel:

- a) amalgam
- b) * glass-ionomeric cement
- c) * light-curable composite
- d) thermopolymerizable composite
- e) polymethyl-meta-acrylate

109. CM Name treatment objectives for deep occlusion:

- a) frontal group extrusion
- b) * frontal group intrusion
- c) *extrusion of the molar group
- d) molar group intrusion
- e) * leveling the Spee curve



110. CM Select the complementary methods for diagnosing the deep occlusion:

- a) * the photographic exam
- b) * radiological examination
- c) * electromyography
- d) * biometric model study
- e) study of masticatory efficiency

111. CM List the stages of physiological elevation of the occlusion:

- a) 1st elevation by the eruption of temporary incisors
- b) * 1st elevation by the eruption of the first temporary molars
- c) 2nd elevation by eruption of permanent canines
- d) * 2nd elevation by the eruption of the first permanent molars
- e) * 3rd elevation by eruption of 12-year-old molars

112. CM Select the treatment methods of deep occlusion, associated with molar infraocclusion:

- a) * deconditioning the interposition of the tongue in the lateral areas
- b) * palatal plate with retroincisive plate
- c) palatal plate with expansion screw
- d) * application of intermaxillary elastics
- e) use of devices with splints in the premolar-molar area

113. CM Specify the persistent functional disorders in the covered deep occlusion:

- a) * predominance of closing-opening movements
- b) * deficiency of laterality movements
- c) * deficiency of propulsion movements
- d) * closed speech
- e) oral respiration

114. CM Indicate the devices used in the interceptive treatment of deep occlusion, roof type:

- a) * Andresen-Haupl activator
- b) Delaire mask
- c) fixed device with brackets
- d) * palatal plate with retroincisive plate
- e) * the trainer

115. CS Select the etiological factor for the collapsed occlusion:

- a) early eruption of permanent incisors
- b) early eruption of the lateral group of teeth
- c) late eruption of permanent incisors
- d) * early loss of teeth in the support area
- e) early extraction of temporary canines

116. CM Indicate the pathogenetic mechanisms of occurrence of deep occlusion:

- a) excessive growth of the mandible



- b) the presence of keloid scars that cause asymmetries
- c) cessation of the extrusion of the frontal group of teeth due to the interposition of the tongue
- d) * muscular interposition in the premolar-molar area with vertical growth disorder
- e) * absence of the phenomenon of dental extrusion in the molar region

117. CM Select factors that **do not** favor deep occlusion occurrence:

- a) oral respiration
- b) lip interposition
- c) * dental anomalies
- d) * tongue thrusting
- e) * torticollis

118. CM Identify the notions corresponding to deep occlusion:

- a) deficiency of embryogenesis of the dento-maxillary system
- b) vertical disorder characterized by the absence of covering the front teeth
- c) * disorder of growth and development of the jaws, with incisive overbiting of 5-9 mm
- d) * disorder of growth and development of the jaws, with total incisive overbiting
- e) disorder of growth and development of the jaws, with crossbite of 1-3 teeth

119. CM Highlight the advantages of orthodontic tooth extraction:

- a) * creates favorable conditions for the evolution of the third molar
- b) * overcomes the primary dento-alveolar incongruence
- c) * prevents the production of bimaxillary protrusion
- d) favors the occurrence of relapse
- e) * provides stability of the obtained result

120. CM Select the disadvantages of tooth extraction in orthodontics:

- a) prevents relapse
- b) * absence of action at the level of the maxillary bone bases
- c) * unfavorable dental displacements
- d) * failure, sometimes, of the balance of the occlusal surfaces
- e) * unfavorable consequences on the development of the dento-alveolar arch

121. CM Select cephalometric indexes, which indicate the need for orthodontic tooth extractions in the anterior sector of the arches:

- a) reduced \angle IMPA
- b) * increased \angle IMPA
- c) decreased \angle FMA
- d) * increased \angle FMA
- e) increased \angle Z



122. CS Highlight the contraindication of orthodontic tooth extraction:

- a) dental inclusion
- b) dental vestibuloversion
- c) malocclusion of class II / 2 Angle in permanent dentition
- d) dento-alveolar disharmony with medium crowding, the presence of three molars and hyperdivergent facial type
- e) * dento-alveolar disharmony with medium crowding, lack of three molars and hypodivergent facial type

123. CM Highlight the role of extraoral forces in orthodontics:

- a) * produce skeletal changes
- b) * increase the anchorage
- c) * prevent dental migrations
- d) * maintain the results obtained during treatment
- e) favors the closure of the diastema

124. CM Select the varieties of extraoral anchorage:

- a) * cervical
- b) * occipital
- c) * parietal
- d) palatal
- e) * vertical

125. CM Select the effects developed by the Delaire mask on the upper jaw:

- a) * vestibuloversion of the upper incisors
- b) * the anterior movement of the dental arch, with the sliding of the alveolar base on the bone base
- c) * transverse maxillo-palatine suture disjunction
- d) * orthopedic effect and stimulating the growth of the upper jaw in mixed dentition
- e) stimulating the eruption of the upper canines.

Șef de catedră
conf. univ., dr. șt. med.

Valentina Trifan

Șef de studii,
conf. univ., dr. șt. med.

Lucia Ciumeico