Following Paper ID and Roll No. to be filled in your Answer Book.								
PAPER ID: 2117	Roll No.	niw)	lbi.			0.0	ITE	

BDS Examination Dec. 2016

(Fourth Professional)

PERIODONTOLOGY

Time: 3 Hours]

[Maximum Marks: 70

- Note: (i) Attempt all questions.
 - (ii) All questions are to be answered in the same, serial order.
 - (iii) Make neat, well labelled diagrams where necessary.
- 1. (I) Multiple choice questions:

 $10 \times \frac{1}{2} = 5$

- (a) Periodontics is the branch of dentistry that deals with:
 - (i) Prevention of periodontal disease
- (ii) Periodontal tissues in diseases
 - (iii) Prevention and treatment of periodontal disease
 - (iv) Periodontium in health and disease *IP. T. O.*

- (b) The following group of fibre is absent in an incompletly formed root:
 - (i) Alveolar crest group
 - (ii) Oblique group
 - (iii) Horizontal group
- (iv) Apical group
 - (c) Vertical bone loss is associated with:
- (i) Suprabony pocket
- (ii) Flase procket
 - (iii) True pocket
 - (iv) Infrabony pocket
- (d) Epithelium has blood supply from:
 - (i) Facial artery
 - (ii) Arteries from periodontal ligament
- (iii) Supraperiostial artery
 - (iv) No blood supply

- (e) Clinical features of disguamative gingivitis are:
 - (i) Fiery red gingiva
 - (ii) Painful gingiva
 - (iii) Errosive gengiva
 - (iv) All of the above
- (f) False gingival enlargement is caused by:
 - (i) Epulis bas and so 2 (vi)
 - (ii) Underlying dental and osseous structure
 - (iii) Inflammation of periodontal ligament
 - (iv) Drug induced gingival enlargement
- (g) Ideal outcome of periodontal therapy is:
- (i) New attachment
- (ii) Long junctional attachment (II)
- Minimum (iii) Ankylosis massamantal (s)
 - (iv) Re attachment
- (h) Fremitus test measures:
- (i) Frenal pull

(ii)	Mo	hi	1tV
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- (iii) Bleeding on probing
- (iv) Trauma from occlusion
- ENAP is a mehtod of:
 - Curettage
 - (ii) Gingivectomy
 - (iii) Flap surgery
 - (iv) Scaling and root planning
- Which is not a periodontal surgical instrument:
- (i) Periosteal elevater
 - (ii) Gingivectomy knives
 - (iii) Bone files moonto labl. (g)
 - (iv) None the the above
 - (II) Write true / false: amagenod (ii)

5×1/2

- Inflammation of gingiva around a partially erupted tooth is called as pericoronitis.
- The most common sign of secondary trauma from occlusion is pathological migration.

(c)	The upper first molar teeth have maximum
	amount of supra gingival calculus.

- Punched out creater like gingival contoures are seen in acute herpetic gigivostomatitis.
- The most common cause of gingivitis is vitamin deficiency.

(III) Fill in the blanks: professioning applies $5 \times \frac{1}{2}$

- (a) The first incision is also called as
- Collag in has got helix structure.
- (c) Predominant immunoglobulin present in saliva is
- (d) Differential diagnosis of degramative gingivitis are and
 - (e) False pocket is also called as
- Write briefly:

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 $2 \times 5 = 10$

- Theories of calculus formation
- (b) Endo Perio lesions
- Write beiefly:

 $2 \times 5 = 10$

Etiopathogenesis of pocket formation

[P. T. O.

(b)	Ttreatment plan	
(0)	Tiredifficite piant	

- 4. Write briefly: $2 \times 5 = 10$
 - (a) Primary trauma from occlusion
 - (b) Conditioned gingival enlargement
- 5. Write briefly: $2 \times 5 = 10$
 - (a) Stages in plague formation ded at the stage of the st
 - (b) Rationale of periodontal treatment
- 6. Define aggressive periodontitis. Give the clinical features and radiographic findings for aggressive periodontitis.
- Define GCF. Discuss in detail the composition, methods of collection and clinical significance of gingival cervicular fluid.

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