

1. Which of the following does not determine the most optimal temporomandibular joint stability
 - a. Retrodisical Tissue
 - b. Lateral Pterygoids
 - c. Articular disc
 - d. Teeth
 - e. Articular Imminence

2. Centric relation is partially dictated by the masseter, lateral pterygoids, infra-hyoid, medial pterygoids and temporalis muscles
 - a. True
 - b. False

3. You complete a fixed prosthetic case on a patient consisting of a combination of crowns and bridges on teeth #2-15. You meticulously adjust the occlusion to obtain perfect canine guidance (canine rise, cuspid disclusion etc.). Your patient moves to California, then returns to your office 15 years later to rejoin your practice. It would be common to discover working and non-working contacts on the posterior teeth during lateral movements.
 - a. True
 - b. False

4. Defend your answer of #3 on the last sheet of this exam in the appropriate location. **DO NOT ANSWER HERE**

5. The typical 1 or 2 crowns fabricated in our clinic with all the patients teeth present, would be constructed at
 - a. none of the below
 - b. Centric relation
 - c. the most stable temporomandibular condyle position dictated by soft and hard tissue tissue, ligaments and muscles.
 - d. Centric Bite
 - e. ideal maximum tooth contact

Make sure to mark #5 in correct spot or your entire exam will be off

6. When is centric relation used
 - a. Complete Dentures
 - b. Some Removable Partial Dentures, i.e. Kennedy I
 - c. Complex Fixed Prosthodontics
 - d. all the above
 - e. none of the above

7. A centric relation interocclusal record ideally should have tooth contacts to guide the joint into centric relation; to assure a good centric relation interocclusal record; the use of a leaf gauge (aka anterior stop) is necessary.
 - a. First statement is true, second statement is true
 - b. First is true, second is false
 - c. First is false, second is true
 - d. First is false, second is false

8. The anterior occlusal plane as view in the frontal plane (looking at patient) is always parallel to the patients eyes.
 - a. True
 - b. False

9. List the 5 problems listed in class that could happen as a result of heavy maxillary anterior contact. Answer on the last page in the appropriate page. **DO NOT ANSWER HERE**

Make sure to mark #10 in correct spot or your entire exam will be off

10. When constructing a fixed prosthetic case, the ideal occlusal scheme is
a. Maximum intercuspation
b. Centric relation
c. Canine guidance/Cuspid disclusion
d. Group function occlusion
e. All the above
- It depends on the case*
11. The treatment of TMD includes clinical problems that involve
a. the masticatory musculature,
b. the TMJ
c. Back musculature
d. Head and neck
e. More than one of the above
12. 40-75% of non-TMD patients have at least one sign of joint dysfunction; Most of these patients do not require treatment
a. First Statement is True, Second Statement True
b. First Statement is True, Second Statement False
c. First Statement is False, Second Statement True
d. First Statement is False, Second Statement False
13. In class we stated, the base line radiograph required for treatment of TMD patients is
a. MRI
b. CT Scan
c. Panoramic radiograph
d. complete set of periapical and bitewing radiographs
e. all of the above
14. Irreversible Pulpitis is generally characterized by pain which occurs when a stimulus (usually cold or sweets) is applied to the tooth and when the stimulus is removed, the pain ceases within seconds; Whereas reversible Pulpitis is generally characterized by pain occurs spontaneously and/or lingers minutes after the stimulus is removed
a. First Statement is True, Second Statement True
b. First Statement is True, Second Statement False
c. First Statement is False, Second Statement True
d. First Statement is False, Second Statement False
15. Which of the following would not be consistent with a non-tooth related pain
a. Sharp pain
b. Dull Ache
c. Stabbing pain
d. Burning Pain
e. None of the above
16. The definition of centric relation comes from
a. A lecture from Dr. J. in which she said so
b. Rear Most, Upper Most, Mid Most or [R.U.M.]
c. dictated by head and face musculature
d. dictated by Muscles of mastication, soft and hard tissue
e. None of the above

17. A patient is in your office complaining of jaw pain, you detect on examination of the patient, a unilateral problem. The patient states in their history they can not chew on the right side because it causes severe temporomandibular joint pain.. Base on the information above, your most likely diagnosis is
- a. Right side muscle dysfunction
 - b. Right side Joint dysfunction
 - c. Left side muscle dysfunction
 - d. Left side Joint dysfunction
 - e. A and B
18. You examine a patient and record the following; maximum mandibular opening of 52mm; 6mm left lateral movement, 6mm right lateral movement. Which of the following are MOST true
- a. the patient exhibits normal range of motion
 - b. mandibular opening is normal
 - c. lateral movements are normal
 - d. both lateral movements and mandibular opening are normal
 - e. None of the above
19. In mandibular joint restriction you can assist and increase a patients opening from a limited opening to a normal opening, whereas in a muscle restriction you can not assist and increase the opening to normal because of muscle splinting.
- a. First Statement is True, Second Statement True
 - b. First Statement is True, Second Statement False
 - c. First Statement is False, Second Statement True
 - d. First Statement is False, Second Statement False
20. If a patient was diagnosed with a dental condition requiring treatment with the condyles in centric relation, which of the following would be true
- a. Placing crowns on all the maxillary teeth
 - b. a centric relation record taken with firm teeth contact
 - c. use of a leaf gauge or some other device to separate teeth when taking the interocclusal record
 - d. A and C
 - e. A and B
21. When adjusting crowns on teeth #6, 7, 8, 9, 10, 11, you should adjust the occlusion so that;
- a. The new anterior crowns contact heavier than the posterior teeth
 - b. The new anterior crowns contact the same as the posterior teeth
 - c. The new anterior crowns contact lighter than the posterior teeth
 - d. Out of contact
22. The most ideal occlusion for patients is
- a. Maximum intercuspation
 - b. Centric Relation
 - c. none of the above
 - d. Depends on the clinical situation
23. A burning type of pain is most consistent with
- a. muscle dysfunction
 - b. Jaw-joint dysfunction
 - c. a neuralgia
 - d. Migraine Pain

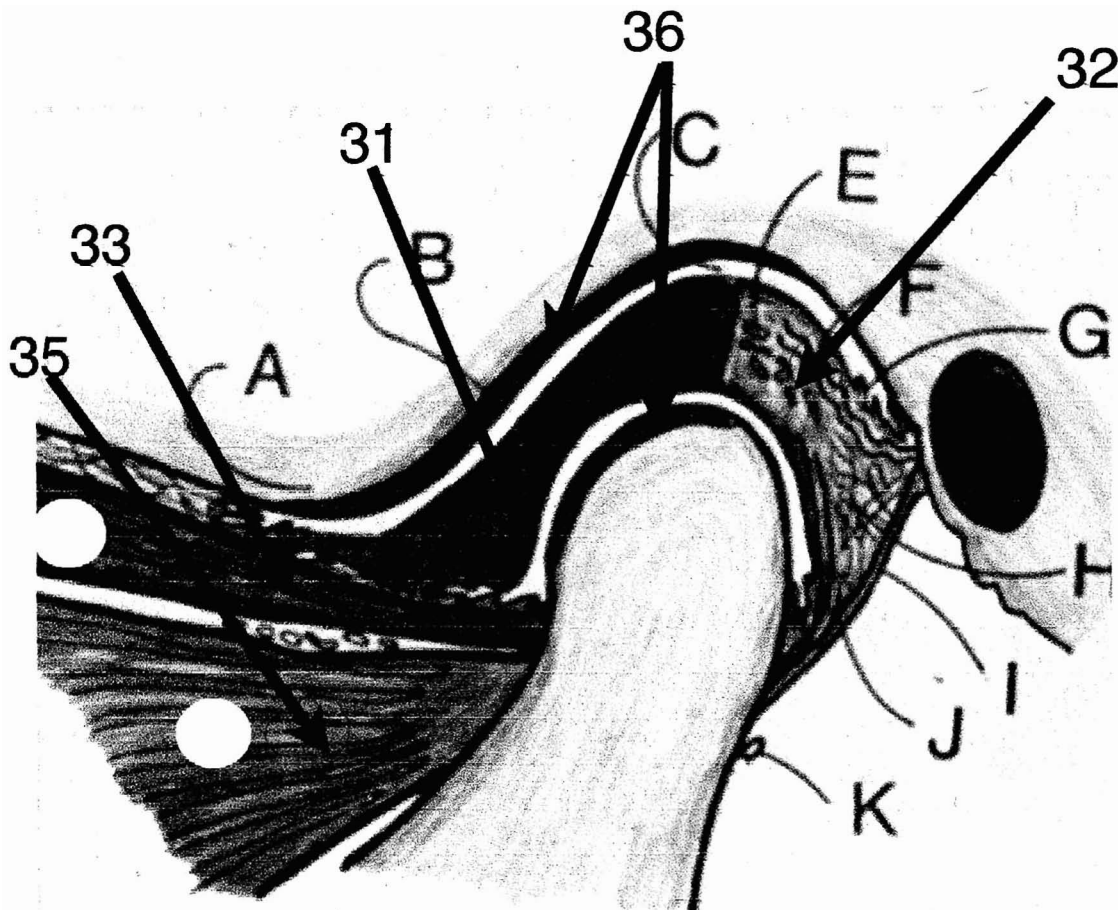
24. Your TMD patient describes their pain as diffuse and bilateral. This would be most consistent with:
- a. TMJ disc/joint problem
 - b. Cervical disc problem
 - c. Masticatory muscle problem
 - d. Trigeminal Neuralgia
 - e. none of the above
25. Which type of pain generally gets worse with increased function.
- a. Pulpal Pain
 - b. Vascular Pain
 - c. Neurological Pain
 - d. Musculoskeletal pain
26. The most PROMINENT feature that differentiates Bulimia from GERD is that Bulimia reveals;
- a. Extensive erosive lesions on mandibular Anteriors
 - b. Maxillary and mandibular anteriors exhibit similar erosion patterns
 - c. Lingual mandibular Asymmetric Wear
 - d. More wear on the side of sleeping
 - e. None of the above
27. Which of the following exhibit deep, v-shaped notches in teeth
- a. Attrition
 - b. Erosion
 - c. Abrasion
 - d. Abfraction
 - e. All of the above

Muscle pain can refer pain to teeth, circle the most appropriate/more correct answer for questions #28 - #30

28. The temporalis muscle may refer pain to which of the following
- a. Maxillary anterior
 - b. Mandibular anterior
 - c. Maxillary posterior
 - d. Mandibular posterior
 - e. All Maxillary teeth
29. The masseter muscle may refer pain to which of the following
- a. Maxillary and mandibular anteriors
 - b. All maxillary
 - c. Maxillary and mandibular posteriors
 - d. All mandibular
 - e. all of the above
30. The digastric muscle may refer pain to which of the following
- a. Maxillary anterior
 - b. Mandibular anterior
 - c. Maxillary posterior
 - d. Mandibular posterior
 - e. All Maxillary teeth

Label the following diagrams (Ignore letters on diagram)

- 31. Articular disc
- 32. Retrodiscal tissue
- 33. lateral pterygoid - superior head
- *34. _____
- 35. lateral pterygoid - inferior head
- 36. What type of cartilage covers the articulating surface of this structure?
fibrocartilage



37. On examination, a patient can open 30mm and deviates to the left on opening. On protrusive you measure 5mm of movement with deviation to the left, you would expect lateral movement to be
- a. right lateral limited movement
 - b. right lateral normal movement
 - c. left lateral limited movement
 - d. left lateral normal movement
 - e. not enough information, more examination is required

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38. Reduced activity of the temporalis and masseter occurs by
- a. elimination of anterior contacts
 - b. elimination of posterior lateral working and non-working contacts
 - c. elimination of posterior contacts
 - d. elimination of anterior contacts in working and non-working
 - e. all the above
39. The articular disc is attached to the medial and lateral poles of the condyle head by
- a. Horizontal portion of the lateral TMJ ligament
 - b. Articular capsule
 - c. Collateral ligaments
 - d. Superior belly of the lateral pterygoid muscle
40. Heavy anterior contact can lead to
- a. dentin exposure
 - b. tooth fracture
 - c. diastema formation
 - d. A&B
 - e. all the above
41. You seat crowns #23, 24, 25, & 26. Patient returns at their next hygiene appointment and reports to you that #8 and #9 are sensitive, sore and there is a slight space developing between #8 & #9. Your most likely diagnosis/treatment is
- a. patient eating food that is too hard, switch to a softer diet
 - b. adjustment of crowns required, you adjust #8 & #9
 - c. You state to the patient, "You must have had that space all along and just never noticed it"
 - d. Heavy incisal contact on #24 & 25, you adjust #24 & #25
 - e. B & D
42. Teeth most effected in GERD are
- a. All Maxillary Lingual
 - b. All Maxillary Facial
 - c. All Mandibular Occlusals
 - d. All Mandibular Buccals
 - e. Two of the above
43. Attrition and Erosion of the teeth will not effect composite and amalgam restorations.
- a. True
 - b. False

Question #4: defend your answer to Question #3

~~If~~ you have PFM restorations against natural tooth structure the teeth will wear down. So after a long period you have a good chance of getting more of group function as the lower molars wear down.

Chop up + it can chop

Question #9

1. mobility
2. tooth movement
3. tooth wear
4. pain
5. tooth fracture

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TMD: Occlusion 10/8/07
Student Test Report On Midt 1 A

Course #: 371
 Course Title: TMD
 Day/Time:

Instructor: Dr. S. Fox
 Description: TMD: Occlusion
 Term/Year: Fall 2007

Student Name: LATHAM, DAVID

Student ID: 937

Code:

	Possible Pts.	Raw	Objective	Subj./Essay	Percent	Grade
MIDT 1:	35.00	29.00	29.00	0	82.86%	B

Response	<dash>	correct response	<#>	multiple marks	<space>	no response
Description:	<alphabet>	student's incorrect response	<*>	bonus test item		

Test Items:	1-5	6-10	11-15	16-20	21-25	26-30	31-35	36-40	41-43	
Test Key:	D, B, A, , E	D, C, B, , #	E, A, C, D, B	D, D, B, D, D	C, D, C, C, D	E, D, E, C, B	, , , ,	, D, B, C, E	D, E, B	
Answers	A, A, -, , -	- , - , - , , -	- , - , - , - , -	B, A, A, - , -	- , - , - , - , -	- , - , - , - , -	, , , ,	, A, - , - , -	- , - , -	

Remarks: Mean: 79%, Standard Deviation: 2.54

Student's Answer to Multiple Mark Question:

Item	Key	Student's Answer
10	ABC	-