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## PRACTICE QUESTIONS

**TTBU - The Testing Board Ukraine**

# EPEST

English Prof. Exam Stomatology

EDITION

**Demo**

QUESTIONS

**9**

FORMAT

**Limited Edition PDF**

# Before you begin

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## What this is

9 practice questions for TTBU - The Testing Board Ukraine **EPEST**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

## If something looks wrong

Send us three things and we will check it:

- the exam code, **EPEST**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

**QUESTION 1**

SINGLE CHOICE

Which permanent tooth typically has two roots with two canals in the mesial root and one canal in the distal root?

- ☐ A Maxillary first premolar
- ☒ B Mandibular first molar
- ☐ C Maxillary first molar
- ☐ D Mandibular second premolar

**ANSWER B**

**WHY** The mandibular first molar characteristically has two roots (mesial and distal), with the mesial root containing two canals (mesiobuccal and mesiolingual) and the distal root typically containing one canal. The maxillary first molar has three roots. The maxillary first premolar has two roots but a different canal configuration. The mandibular second premolar is usually single-rooted.

**QUESTION 2**

SINGLE CHOICE

According to Black's classification of cavity preparations, which class designates cavities on the proximal surfaces of incisors and canines that do not involve the incisal angle?

- ☐ A Class II
- ☒ B Class III
- ☐ C Class IV
- ☐ D Class V

**ANSWER B**

**WHY** Black's Class III cavities are located on the proximal surfaces of incisors and canines without involving the incisal angle. Class IV involves the incisal angle of anterior teeth. Class II involves the proximal surfaces of premolars and molars. Class V involves the cervical third of the facial or lingual surfaces of any tooth.

**QUESTION 3**

MULTIPLE CHOICE

Which of the following are recognized stages of periodontitis according to the 2017 World Workshop classification? (Choose two.)

- ☐ A Stage I
- ☒ B Stage III
- ☐ C Grade A
- ☒ D Stage IV

**ANSWER B • D**

**WHY** The 2017 World Workshop classification grades periodontitis by staging (I–IV) based on severity and complexity, and by grading (A–C) based on progression rate and risk factors. Stages are I, II, III, and IV. Grade A is a grade (rate of progression), not a stage.

**QUESTION 4**

SINGLE CHOICE

Which permanent tooth most frequently presents with an accessory canal located in the mesiobuccal root (the MB2 canal)?

- ☒ A Maxillary first molar
- ☐ B Mandibular first molar
- ☐ C Maxillary central incisor
- ☐ D Mandibular second premolar

**ANSWER A**

**WHY** The MB2 (second mesiobuccal) canal is most commonly associated with the mesiobuccal root of the maxillary first molar, with reported prevalence often exceeding 60%. This is clinically significant because a missed MB2 canal is a common cause of endodontic failure in maxillary molars.

**QUESTION 5**

SINGLE CHOICE

A painless, well-defined radiolucent lesion in the body of the mandible containing a tooth crown is most consistent with which diagnosis?

- ☐ A Ameloblastoma
- ☒ B Dentigerous cyst
- ☐ C Odontogenic keratocyst
- ☐ D Radicular cyst

**ANSWER B**

**WHY** A dentigerous (follicular) cyst is a developmental odontogenic cyst that surrounds the crown of an unerupted or developing tooth, most commonly the mandibular third molar or maxillary canine, and appears as a well-defined unilocular radiolucency attached at the cemento-enamel junction. An odontogenic keratocyst typically grows along the bone without causing marked cortical expansion. A radicular cyst is associated with a non-vital tooth, not an unerupted crown. Ameloblastoma is usually multilocular or shows a soap-bubble pattern.

**QUESTION 6**

SINGLE CHOICE

The recommended occlusal reduction for a full-coverage metal-ceramic crown preparation on a posterior tooth is approximately:

- ☐ A 0.5 mm
- ☐ B 1.0 mm
- ☒ C 2.0 mm
- ☐ D 3.0 mm

**ANSWER C**

**WHY** Standard tooth preparation guidelines recommend approximately 2.0 mm of occlusal reduction for metal-ceramic crowns on posterior teeth to provide adequate thickness for the metal substructure and overlying porcelain. Anterior metal-ceramic preparations typically require about 1.5–2.0 mm. 0.5 mm is insufficient, and 3.0 mm risks pulpal exposure.

**QUESTION 7** SINGLE CHOICE

Which local anesthetic is most commonly used for routine dental anesthesia in patients without contraindications, and has a typical duration of pulpal anesthesia of approximately 60–90 minutes?

- ☐ A Bupivacaine 0.5% with epinephrine 1:200,000
- ☒ B Lidocaine 2% with epinephrine 1:100,000
- ☐ C Mepivacaine 3% plain
- ☐ D Articaine 4% with epinephrine 1:100,000

**ANSWER B**

**WHY** 2% lidocaine with 1:100,000 epinephrine is the most widely used dental local anesthetic worldwide, providing pulpal anesthesia of approximately 60–90 minutes. Bupivacaine has a much longer duration. Plain mepivacaine has a shorter duration without a vasoconstrictor. Articaine is also commonly used but is not the most frequent reference standard.

**QUESTION 8** SINGLE CHOICE

According to Angle's classification, the mesiobuccal cusp of the maxillary first permanent molar occludes in the buccal groove of the mandibular first permanent molar in which class?

- ☒ A Class I
- ☐ B Class II
- ☐ C Class III
- ☐ D Class IV

**ANSWER A**

**WHY** Angle's Class I (neutroclusion) is defined by the mesiobuccal cusp of the maxillary first molar occluding in the buccal groove of the mandibular first molar, with a normal anteroposterior relationship. Class II is when the mesiobuccal cusp is anterior to the buccal groove, and Class III is when it is posterior. Angle originally described only three classes; Class IV is not part of standard Angle's classification.

**QUESTION 9**

MULTIPLE CHOICE

Which of the following are professionally applied topical fluoride agents used in pediatric dentistry? (Choose two.)

- ☒ **A** Acidulated phosphate fluoride (APF) gel
- ☒ **B** Sodium fluoride varnish
- ☐ **C** Fluoride-releasing glass ionomer cement
- ☐ **D** Hydrogen peroxide gel

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**ANSWER** **A • B**

**WHY** APF gel (1.23% fluoride) and sodium fluoride varnish (5% NaF, e.g. 22,600 ppm fluoride) are professionally applied topical fluoride agents widely used in pediatric dentistry. Hydrogen peroxide gel is not a fluoride agent. Glass ionomer cement is a restorative material that releases fluoride but is not classified as a topical fluoride preventive agent.