Acknowledgements

The Case Studies in this booklet were used with permission from the following individuals:

Nicole D, Kelleher, RDH
Jaime Slobodjian, RDH, BS
Case I

Age: 29
Sex: Male
Height: 5’8
Weight: 170 lbs.
BP: 139/89

Chief Complaint: “My gums are achy and bleed easily when I brush. My mouth is very dry when I wake up in the morning.”

Medical History: Currently no medical problems

Current Medications: Multivitamin

Allergies: Penicillin & Sulfa

Dental History: Patient reports last dental visit was approximately two years ago. Patient reports having an overactive gag reflex.

Social History: Patient reports he is a social drinker and does not use tobacco. Patient is currently single and lives at home with his parents.
37. After reviewing the patient’s chief complaint, the correct course of action would be which of the following?
   - a. Oral hygiene instructions
   - b. Scaling and root planing (NSPT)
   - c. Specialist referral
   - d. Physician referral

38. What is the anatomical landmark located on the maxillary central periapical image?
   - a. Zygomatic process
   - b. Nasopalatine foramen
   - c. Maxillary sinus
   - d. Lateral fossa

39. What is MOST likely the cause of the inflammation that appears in the intraoral photos of the maxillary left canine and premolar?
   - a. Periodontal abscess
   - b. Endodontic fistula
   - c. Etiology unknown
   - d. Verrucous carcinoma

40. Which of the patients current medications may contribute to an elevated bleeding index?
   - a. Sertraline (Zoloft®)
   - b. Levodopa & Carbidopa (Sinemet®)
   - c. Aspirin
   - d. B and C

41. While reviewing oral hygiene instructions, which of the following is best for this patient?
   - a. Phenol rinse
   - b. Mechanical tooth brush
   - c. Woven floss
   - d. Tooth picks

42. Which of the following BEST describes the furcation involvement around tooth #30?
   - a. No significant involvement
   - b. Slight involvement with sufficient bone present between roots
   - c. Moderate involvement with some bone loss between roots
   - d. Severe involvement with clear entrance between roots

43. Which of the following are examples of amyloid associated conditions?
   - a. Diabetes mellitus type 2
   - b. Alzheimer’s disease
   - c. Parkinson’s disease
   - d. All of the above

44. Which of the following may be etiologic factors for verrucous carcinoma?
   - a. Enterovirus
   - b. Tobacco
   - c. Human papillomavirus (subtypes 16 and 18)
   - d. B and C
29. In order to effectively scale, root plane and debride areas #30 & #31, which of the following nerves will require local anesthesia?
   a. PSA, MSA & IA
   b. ASA
   c. IA
   d. MSA, IA

30. Which of the following medications can contribute to the patient’s chief complaint?
   a. Omeprazole (Prilosec®)
   b. Ibandronate (Boniva®)
   c. Etanercept (Enbrel®)
   d. Diflunisal (Dolobid®)

31. What is the MOST likely cause of the lesion that appears in the intraoral photos of the mandibular right molars?
   a. Acute necrotizing gingivitis
   b. Chemical burn (aspirin)
   c. Osteoradionecrosis (ORN)
   d. Erosive lichen planus

32. While reviewing oral hygiene instructions, which of the following is the best recommendation for this patient?
   a. Chlorhexidine gluconate rinse
   b. Phenol rinse
   c. Peroxide rinse
   d. Salt water rinse

33. Ibandronate (Boniva®) increases the patients risk of developing acute necrotizing ulcerative gingivitis (ANUG). This medication may also restrict invasive dental procedures.
   a. Both statements are true
   b. Both statements are false
   c. The first statement is true, the second is false
   d. The first statement is false, the second is true

34. Which of the following medications will MOST likely cause xerostomia?
   a. Methotrexate (Rheumatrex®)
   b. Simvastatin (Zocor®)
   c. Levothyroxine (Synthroid®)
   d. None of the above

35. Which type of malignant melanoma has the poorest prognosis?
   a. Superficial spreading
   b. Nodular
   c. Lentigo maligna
   d. Acral-lentiginous

36. Rheumatoid arthritis affects women more than men. Osteophyte (bony spur) formation is a cardinal feature of osteoarthritis not rheumatoid arthritis.
   a. Both statements are true
   b. Both statements are false
   c. The first statement is true, the second is false
   d. The first statement is false, the second is true
**Case I**

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**Case IV**

22. Which type of prophylactic regimen would be appropriate for premedication?
   - Amoxicillin
   - Clindamycin
   - Penicillin
   - Doxycycline

23. The American Society of Anesthesiologists would classify this patient under which category?
   - ASA I
   - ASA II
   - ASA III
   - ASA IV

24. Identify the radiographic error seen on the panoramic image?
   - Patients chin was positioned too high
   - Patients chin was positioned too low
   - Failure to remove jewelry
   - Both A and C

25. What is the unilocular radiolucency present around the mandibular third molar?
   - Dentigerous cyst
   - Primordial cyst
   - Radicular cyst
   - Keratocystic odontogenic tumor

26. Due to the radiographic manifestation seen on the panoramic image, this patient should follow-up with which of the following?
   - Endodontist
   - Periodontist
   - Oral Maxillofacial surgeon
   - Orthodontist

27. Due to the dental implications of Clopidogrel (Plavix®), this patient is required to stop medication 3 days prior to routine prophylaxis. This is recommended to avoid potential hemorrhage.
   - Both statements are true
   - Both statements are false
   - The first statement is true, the second is false
   - The first statement is false, the second is true

28. Which of the following instruments should be selected to debride the distal of # 31?
   - Gracey 17/18
   - Gracey 13/14
   - Gracey 11/12
   - Gracey 15/16
Case II

Age: 82  
Sex: Female  
Height: 5’6  
Weight: 140 lbs.  
BP: 117/78

Chief Complaint: “I am concerned about the red spots that appeared on my tongue and constant dry mouth.”

Medical History: Hypertension, Breast cancer (in remission), patient has undergone chemotherapy, radiation treatment and a double mastectomy.

Current Medications:  
- Olmesartan (Benicar®) 20 mg daily  
- Amlodipine (Norvasc®) 5 mg daily  
- Atorvastatin (Lipitor®) 20 mg daily  
- Calcium supplement  
- Vitamin D supplement

Allergies: None

Dental History: Patient reports maintaining 6 month recall appointments. However, patient is overdue for her prophylaxis due to recently undergoing chemotherapy and radiation treatment for breast cancer.

Social History: Patient is a retired widow.

Case III (cont.)

16. Which of the following would be the best treatment for the posterior teeth of this patient?
   a. Sealants  
   b. Class I composite restoration  
   c. Occlusal adjustment  
   d. No treatment is needed at this time

17. All of the following pose no dental implications of Adderal XR®(dextroamphetamine and amphetamine) EXCEPT one. Which one is the EXCEPTION?
   a. Xerostomia  
   b. Hypertension  
   c. Hemorrhaging  
   d. Tachycardia

18. When evaluating the patient’s social and dental history, all of the following are appropriate recommendations EXCEPT one. Which one is the EXCEPTION?
   a. Sealants  
   b. Sports guard  
   c. Mechanical toothbrush  
   d. At home oral irrigation system

19. The gingival tissues around #8 and #9 can BEST be described as:
   a. Bulbous  
   b. Blunted  
   c. Fibrotic  
   d. Stippled

20. Albuterol (Proventil®) can cause fungal infection in the oral cavity. This can be prevented by rinsing the mouth thoroughly, after the use of an inhaler.
   a. Both statements are true  
   b. Both statements are false  
   c. The first statement is true, the second is false  
   d. The first statement is false, the second is true

21. The patient’s mother was concerned about radiation exposure when you took the bite wings on her son. You explained to her that you used F-speed film because it requires _____ of the exposure time of D-speed film.
   a. 20%  
   b. 40%  
   c. 60%  
   d. 80%
8. Describe the existing condition of tooth #15?
   a. Drifting mesially
   b. Impacted
   c. Supra-eruption
   d. None of the above

9. What are the dental implications for Lipitor®?
   a. Xerostomia
   b. Gingival hyperplasia
   c. Taste perversion
   d. No significant effects

10. What is the patient’s periodontal classification?
    a. Type I Gingivitis
    b. Type II Early Periodontitis
    c. Type III Moderate Periodontitis
    d. Type IV Advanced Periodontitis

11. Patients that have undergone chemotherapy and radiation treatment often present with benign migratory glossitis. These patients are also susceptible to bacterial and fungal infections of the oral cavity.
    a. Hydration
    b. Sugar free gum or candy
    c. Saliva substitute spray
    d. All of the above

12. What is the anatomical landmark apical to the mesial root of the maxillary first and second molars?
    a. Pterygomaxillary fissure
    b. Hard palate
    c. Floor of the maxillary sinus
    d. Inferior turbinate

13. Which of the following will BEST address the patient’s chief complaint of xerostomia?
    a. Hydration
    b. Sugar free gum or candy
    c. Saliva substitute spray
    d. All of the above

14. The mandibular left lateral presents with a class III carious lesion. The distal of the mandibular left lateral presents with a class III composite restoration.
    a. Both statements are true
    b. Both statements are false
    c. The first statement is true, the second is false
    d. The first statement is false, the second is true

15. What type of staining is present on the lower anterior teeth?
    a. Tetracycline
    b. Stannous fluoride
    c. Black line stain
    d. None of the above
Questions for the Case Studies

Case I

1. After reviewing the patients blood pressure, under AHA guidelines the patient is classified as which one of the following?
   a. Normal
   b. Prehypertension
   c. Stage I Hypertension
   d. Stage II Hypertension

2. Identify the radiographic error shown on the periapical of the mandibular right canine.
   a. Overlap
   b. Tube head movement
   c. Patient movement
   d. Elongation

3. When teaching the patient oral hygiene instructions, which of the following would you recommend?
   a. Flossing and mechanical tooth brush
   b. Mechanical tooth brush & saliva substitutes
   c. Antiseptic mouth rinse and mechanical tooth brush
   d. None of the above

Case II

4. What is the G. V. Black classification of the maxillary right molar?
   a. Class I
   b. Class II
   c. Class III
   d. Class IV

5. What instrument would you use to debride the maxillary anteriors of this patient?
   a. Gracey 1/2
   b. H6/H7
   c. Gracey 7/8
   d. Barnhart 5/6

6. Approximately what percentage of individuals expressing allergy to the penicillin family of antibiotics will have cross allergenicity to the cephalosporins?
   a. 10%
   b. 25%
   c. 35%
   d. 50%

7. Which one of the following BEST describes the “red spots” the patient is concerned about on her tongue?
   a. Vitamin B deficiency
   b. Xerostomia
   c. Fissured
   d. Benign migratory glossitis
### Case II

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### Case VI

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Case VI

Age: 13
Sex: Male
Height: 5’8
Weight: 120 lbs.
BP: 110/68

Chief Complaint: “My teeth get black staining between cleanings and food gets caught on the surface of my teeth.”

Medical History: Asthma, Attention Deficit Hyperactivity Disorder

Current Medications: Albuterol (Proventil®) Amphetamine (Adderall XR® Oral) 5 mg daily

Allergies: None

Dental History: Patient had prior orthodontic treatment and was in full Damon Braces for 2 years. Patient maintains 3 month recalls with his dentist.

Social History: Patient is currently in eighth grade and is very active in school athletics.

Case III

Age: 13
Sex: Male
Height: 5’8
Weight: 120 lbs.
BP: 110/68

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Dental History: Patient had prior orthodontic treatment and was in full Damon Braces for 2 years. Patient maintains 3 month recalls with his dentist.

Social History: Patient is currently in eighth grade and is very active in school athletics.
Case III

Age: 79
Sex: Female
Height: 5'1
Weight: 110 lbs.
BP: 110/70

Chief Complaint: “My gum tissue is swollen in the upper left and bleeds easily.”

Medical History: Hearing aids, Cellulitis, Hypotension, Parkinson’s disease

Current Medications:
Aspirin 325 mg daily
Sertraline (Zoloft®) 25 mg daily
Levodopa & Carbidopa (Sinemet®) 25-100 three times a day
Tolterodine (Detrol® LA) 4 mg daily

Allergies: None

Dental History: Patient maintains annual recall due to being on a fixed income.

Social History: Patient is a widow and is under the supervision of a care taker. Patient has a hard time getting around due to her current medical conditions.
**Case IV**

**Age:** 63  
**Sex:** Male  
**Height:** 5’10  
**Weight:** 195 lbs.  
**BP:** 140/86

**Chief Complaint:** “I have pain on the lower right that comes and goes.”

**Medical History:** Heart murmur, Hypertension, Coronary artery bypass surgery, Angioplasty (Stent). Premedication required for all major dental treatment.

**Current Medications:**  
Clopidogrel (Plavix®) 75 mg daily

**Allergies:** Penicillin

**Dental History:** Patient maintains 6 month recalls and reports the lower right started bothering him 2 months ago, however patient resides in Florida for the winter months.

**Social History:** Patient is married and owns a local restaurant. Patient reports high stress level.
Case IV

Left side

Right side

Case V

Age: 63  
Sex: Female  
Height: 5'2  
Weight: 116 lbs.  
BP: 98/68  

Chief Complaint: “There is a sore to the right of my tongue that will not heal.”

Medical History: Rods placed in right and left femurs, Rheumatoid arthritis, malignant melanoma removed two years ago from patients forehead.

Current Medications:  
Etanercept (Enbrel®) 50 mg injected weekly  
Methotrexate (Rheumatrex®) 7.5 mg once weekly  
Diflunisal (Dolobid®) 250 mg twice daily  
Omeprazole (Prilosec®) 10 mg once a day before a meal  
Levothyroxine (Synthroid®) 12.5 mg daily  
Simvastatin (Zocor®) 20 mg daily  
Ibandronate (Boniva®) 150 mg once monthly  

Allergies: Penicillin & Amoxicillin  

Dental History: Patient usually maintains 6 month recalls but was overdue one year due to recent retirement and losing dental insurance benefits. Patient also reports overactive gag reflex.  

Social History: Patient is married and recently retired. Patient smokes one pack of cigarettes per day.
**Case IV**

Left Side

Right Side

**Case V**

**Age:** 63  
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**Height:** 5’2  
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# Case IV

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M = Missing tooth

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# Case V

**Right Side**

**Left side**
Case IV

**Age:** 63  
**Sex:** Male  
**Height:** 5’10  
**Weight:** 195 lbs.  
**BP:** 140/86

**Chief Complaint:** “I have pain on the lower right that comes and goes.”

**Medical History:** Heart murmur, Hypertension, Coronary artery bypass surgery, Angioplasty (Stent). Premedication required for all major dental treatment.

**Current Medications:** Clopidogrel (Plavix®) 75 mg daily

**Allergies:** Penicillin

**Dental History:** Patient maintains 6 month recalls and reports the lower right started bothering him 2 months ago, however patient resides in Florida for the winter months.

**Social History:** Patient is married and owns a local restaurant. Patient reports high stress level.
**Case III**

**Age:** 79  
**Sex:** Female  
**Height:** 5’1  
**Weight:** 110 lbs.  
**BP:** 110/70  

**Chief Complaint:** “My gum tissue is swollen in the upper left and bleeds easily.”

**Medical History:** Hearing aids, Cellulitis, Hypotension, Parkinson’s disease

**Current Medications:**  
- Aspirin 325 mg daily  
- Sertraline (Zoloft®) 25 mg daily  
- Levodopa & Carbidopa (Sinemet®) 25-100 three times a day  
- Tolterodine (Detrol®LA) 4 mg daily

**Allergies:** None

**Dental History:** Patient maintains annual recall due to being on a fixed income.

**Social History:** Patient is a widow and is under the supervision of a care taker. Patient has a hard time getting around due to her current medical conditions.

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**Case VI**

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**Sex:** Female  
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**Weight:** 110 lbs.  
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Case VI

Age: 13
Sex: Male
Height: 5’8
Weight: 120 lbs.
BP: 110/68

Chief Complaint: “My teeth get black staining between cleanings and food gets caught on the surface of my teeth.”

Medical History: Asthma, Attention Deficit Hyperactivity Disorder

Current Medications:
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Amphetamine (Adderall XR® Oral) 5 mg daily

Allergies: None

Dental History: Patient had prior orthodontic treatment and was in full Damon Braces for 2 years. Patient maintains 3 month recalls with his dentist.

Social History: Patient is currently in eighth grade and is very active in school athletics.

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Questions for the Case Studies

Case I

1. After reviewing the patient's blood pressure, under AHA guidelines, the patient is classified as which one of the following?
   a. Normal
   b. Prehypertension
   c. Stage I Hypertension
   d. Stage II Hypertension

2. Identify the radiographic error shown on the periapical of the mandibular right canine.
   a. Overlap
   b. Tube head movement
   c. Patient movement
   d. Elongation

3. When teaching the patient oral hygiene instructions, which of the following would you recommend?
   a. Flossing and mechanical tooth brush
   b. Mechanical tooth brush & saliva substitutes
   c. Antiseptic mouth rinse and mechanical tooth brush
   d. None of the above

4. What is the G. V. Black classification of the maxillary right molar?
   a. Class I
   b. Class II
   c. Class III
   d. Class IV

5. What instrument would you use to debride the maxillary anteriors of this patient?
   a. Gracey 1/2
   b. H6/H7
   c. Gracey 7/8
   d. Barnhart 5/6

6. Approximately what percentage of individuals expressing allergy to the penicillin family of antibiotics will have cross allergenicity to the cephalosporins?
   a. 10%
   b. 25%
   c. 35%
   d. 50%

Case II

7. Which one of the following BEST describes the “red spots” the patient is concerned about on her tongue?
   a. Vitamin B deficiency
   b. Xerostomia
   c. Fissured
   d. Benign migratory glossitis
8. Describe the existing condition of tooth #15?
   a. Drifting mesially
   b. Impacted
   c. Supra-eruption
   d. None of the above

9. What are the dental implications for Lipitor®?
   a. Xerostomia
   b. Gingival hyperplasia
   c. Taste perversion
   d. No significant effects

10. What is the patient's periodontal classification?
    a. Type I Gingivitis
    b. Type II Early Periodontitis
    c. Type III Moderate Periodontitis
    d. Type IV Advanced Periodontitis

11. Patients that have undergone chemotherapy and radiation treatment often present with benign migratory glossitis. These patients are also susceptible to bacterial and fungal infections of the oral cavity.
    a. Both statements are true
    b. Both statements are false
    c. The first statement is true, the second is false
    d. The first statement is false, the second is true

12. What is the anatomical landmark apical to the mesial root of the maxillary first and second molars?
    a. Pterygomaxillary fissure
    b. Hard palate
    c. Floor of the maxillary sinus
    d. Inferior turbinate

13. Which of the following will BEST address the patient's chief complaint of xerostomia?
    a. Hydration
    b. Sugar free gum or candy
    c. Saliva substitute spray
    d. All of the above

14. The mandibular left lateral presents with a class III carious lesion. The distal of the mandibular left lateral presents with a class III composite restoration.
    a. Both statements are true
    b. Both statements are false
    c. The first statement is true, the second is false
    d. The first statement is false, the second is true

15. What type of staining is present on the lower anterior teeth?
    a. Tetracycline
    b. Stannous fluoride
    c. Black line stain
    d. None of the above
**Case II**

**Age:** 82  
**Sex:** Female  
**Height:** 5’6  
**Weight:** 140 lbs.  
**BP:** 117/78

**Chief Complaint:** “I am concerned about the red spots that appeared on my tongue and constant dry mouth.”

**Medical History:** Hypertension, Breast cancer (in remission), patient has undergone chemotherapy, radiation treatment and a double mastectomy.

**Current Medications:**  
- Olmesartan (Benicar®) 20 mg daily  
- Amlopidine (Norvasc®) 5 mg daily  
- Atorvastatin (Lipitor®) 20 mg daily  
- Calcium supplement  
- Vitamin D supplement

**Allergies:** None

**Dental History:** Patient reports maintaining 6 month recall appointments. However, patient is overdue for her prophylaxis due to recently undergoing chemotherapy and radiation treatment for breast cancer.

**Social History:** Patient is a retired widow.

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**Case III (cont.)**

16. Which of the following would be the best treatment for the posterior teeth of this patient?  
- a. Sealants  
- b. Class I composite restoration  
- c. Occlusal adjustment  
- d. No treatment is needed at this time

17. All of the following pose no dental implications of Adderal XR®(dextroamphetamine and amphetamine) EXCEPT one. Which one is the EXCEPTION?  
- a. Xerostomia  
- b. Hypertension  
- c. Hemorrhaging  
- d. Tachycardia

18. When evaluating the patient’s social and dental history, all of the following are appropriate recommendations EXCEPT one. Which one is the EXCEPTION?  
- a. Sealants  
- b. Sports guard  
- c. Mechanical toothbrush  
- d. At home oral irrigation system

19. The gingival tissues around #8 and #9 can BEST be described as:  
- a. Bulbous  
- b. Blunted  
- c. Fibrotic  
- d. Stippled

20. Albuterol (Proventil®) can cause fungal infection in the oral cavity. This can be prevented by rinsing the mouth thoroughly, after the use of an inhaler.  
- a. Both statements are true  
- b. Both statements are false  
- c. The first statement is true, the second is false  
- d. The first statement is false, the second is true

21. The patient’s mother was concerned about radiation exposure when you took the bite wings on her son. You explained to her that you used F-speed film because it requires ______ of the exposure time of D-speed film.  
- a. 20%  
- b. 40%  
- c. 60%  
- d. 80%
**Case I**

| F | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| M = Missing tooth |

**Left Side**

| M | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| M = Missing tooth |

**Right Side**

22. Which type of prophylactic regimen would be appropriate for pre-medication?
   a. Amoxicillin
   b. Clindamycin
   c. Penicillin
   d. Doxycycline

23. The American Society of Anesthesiologists would classify this patient under which category?
   a. ASA I
   b. ASA II
   c. ASA III
   d. ASA IV

24. Identify the radiographic error seen on the panoramic image?
   a. Patients chin was positioned too high
   b. Patients chin was positioned too low
   c. Failure to remove jewelry
   d. Both A and C

25. What is the unilocular radiolucency present around the mandibular third molar?
   a. Dentigerous cyst
   b. Primordial cyst
   c. Radicular cyst
   d. Keratocystic odontogenic tumor

**Case IV**

22. Which type of prophylactic regimen would be appropriate for pre-medication?
   a. Amoxicillin
   b. Clindamycin
   c. Penicillin
   d. Doxycycline

23. The American Society of Anesthesiologists would classify this patient under which category?
   a. ASA I
   b. ASA II
   c. ASA III
   d. ASA IV

24. Identify the radiographic error seen on the panoramic image?
   a. Patients chin was positioned too high
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25. What is the unilocular radiolucency present around the mandibular third molar?
   a. Dentigerous cyst
   b. Primordial cyst
   c. Radicular cyst
   d. Keratocystic odontogenic tumor

26. Due to the radiographic manifestation seen on the panoramic image, this patient should follow-up with which of the following?
   a. Endodontist
   b. Periodontist
   c. Oral Maxillofacial surgeon
   d. Orthodontist

27. Due to the dental implications of Clopidogrel (Plavix®), this patient is required to stop medication 3 days prior to routine prophylaxis. This is recommended to avoid potential hemorrhage.
   a. Both statements are true
   b. Both statements are false
   c. The first statement is true, the second is false
   d. The first statement is false, the second is true

28. Which of the following instruments should be selected to debride the distal of # 31?
   a. Gracey 17/18
   b. Gracey 13/14
   c. Gracey 11/12
   d. Gracey 15/16
29. In order to effectively scale, root plane and debride areas #30 & #31, which of the following nerves will require local anesthesia?
   a. PSA, MSA & IA
   b. ASA
   c. IA
   d. MSA, IA

30. Which of the following medications can contribute to the patient’s chief complaint?
   a. Omeprazole (Prilosec®)
   b. Ibandronate (Boniva®)
   c. Etanercept (Enbrel®)
   d. Diflunisal (Dolobid®)

31. What is the MOST likely cause of the lesion that appears in the intraoral photos of the mandibular right molars?
   a. Acute necrotizing gingivitis
   b. Chemical burn (aspirin)
   c. Osteoradionecrosis (ORN)
   d. Erosive lichen planus

32. While reviewing oral hygiene instructions, which of the following is the best recommendation for this patient?
   a. Chlorhexidine gluconate rinse
   b. Phenol rinse
   c. Peroxide rinse
   d. Salt water rinse

33. Ibandronate (Boniva®) increases the patients risk of developing acute necrotizing ulcerative gingivitis (AN-UG). This medication may also restrict invasive dental procedures.
   a. Both statements are true
   b. Both statements are false
   c. The first statement is true, the second is false
   d. The first statement is false, the second is true

34. Which of the following medications will MOST likely cause xerostomia?
   a. Methotrexate (Rheumatrex®)
   b. Simvastatin (Zocor®)
   c. Levothyroxine (Synthroid®)
   d. None of the above

35. Which type of malignant melanoma has the poorest prognosis?
   a. Superficial spreading
   b. Nodular
   c. Lentigo maligna
   d. Acral-lentiginous

36. Rheumatoid arthritis affects women more than men. Osteophyte (bony spur) formation is a cardinal feature of osteoarthritis not rheumatoid arthritis.
   a. Both statements are true
   b. Both statements are false
   c. The first statement is true, the second is false
   d. The first statement is false, the second is true
37. After reviewing the patient’s chief complaint, the correct course of action would be which of the following?
   a. Oral hygiene instructions
   b. Scaling and root planing (NSPT)
   c. Specialist referral
   d. Physician referral

38. What is the anatomical landmark located on the maxillary central periapical image?
   a. Zygomatic process
   b. Nasopalatine foramen
   c. Maxillary sinus
   d. Lateral fossa

39. What is MOST likely the cause of the inflammation that appears in the intraoral photos of the maxillary left canine and premolar?
   a. Periodontal abscess
   b. Endodontic fistula
   c. Etiology unknown
   d. Verrucous carcinoma

40. Which of the patients current medications may contribute to an elevated bleeding index?
   a. Sertraline (Zoloft®)
   b. Levodopa & Carbidopa (Sinemet®)
   c. Aspirin
   d. B and C

41. While reviewing oral hygiene instructions, which of the following is best for this patient?
   a. Phenol rinse
   b. Mechanical tooth brush
   c. Woven floss
   d. Tooth picks

42. Which of the following BEST describes the furcation involvement around tooth #30?
   a. No significant involvement
   b. Slight involvement with sufficient bone present between roots
   c. Moderate involvement with some bone loss between roots
   d. Severe involvement with clear entrance between roots

43. Which of the following are examples of amyloid associated conditions?
   a. Diabetes mellitus type 2
   b. Alzheimer’s disease
   c. Parkinson’s disease
   d. All of the above

44. Which of the following may be etiologic factors for verrucous carcinoma?
   a. Enterovirus
   b. Tobacco
   c. Human papillomavirus (subtypes 16 and 18)
   d. B and C
Case I

Age: 29  
Sex: Male  
Height: 5’8  
Weight: 170 lbs.  
BP: 139/89

Chief Complaint: “My gums are achy and bleed easily when I brush. My mouth is very dry when I wake up in the morning.”

Medical History: Currently no medical problems

Current Medications: Multivitamin

Allergies: Penicillin & Sulfa

Dental History: Patient reports last dental visit was approximately two years ago. Patient reports having an overactive gag reflex.

Social History: Patient reports he is a social drinker and does not use tobacco. Patient is currently single and lives at home with his parents.

Answers for the Case Studies

Case I
1. b
2. c
3. b
4. a
5. b
6. a

Case II
7. d
8. c
9. b
10. b
11. d
12. c
13. d
14. d

Case III
15. d
16. a
17. b
18. d
19. a
20. a
21. c
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