M4 #1

During an armed conflict soldier K. was injured and delivered to the station of the separate medical battalion. The patient has a gunshot wound of his right cheek, splintered fracture of the body of mandible, arterial bleeding from the wound. A brigade of the separate medical battalion performed surgical debridement and final bleeding arrest. Specify the scope of further medical and evacuation actions for this patient:

- **A.** Transport immobilization of mandible fragments, evacuation of the patient to the military field surgical hospital.
- **B.** Therapeutic immobilization of mandible fragments, evacuation to the military field hospital for minor casualties.
- C. Transport immobilization of mandible fragments, evacuation to the military field hospital for minor casualties.
- **D.** Transport immobilization of mandible fragments, no need of further evacuation.
- **E.** No need of fragment immobilization, evacuation to the military field hospital for minor casualties.

A. Transport immobilization of mandible fragments, evacuation of the patient to the military field surgical hospital.

M4 #2

A 38-year-old female patient came to a hospital and complained about a wound on her left cheek. She got this trauma 16-18 hours ago, didn't loose consciousness. Objectively: a 3 cm long injury of skin, subcutaneous fat and muscle. The wound is bleeding. What kind of initial surgical d-bridement should be performed?

- A. Early surgical d-bridement.
- **B.** Delayed surgical d-bridement.
- C. Secondary surgical d-bridement.
- **D.** Initial surgical d-bridement along with plasty.
- **E**. -

A. Early surgical d-bridement.

A 21-year-old man 3 hours ago received a knife wound to the right cheek. The wound was initially bleeding, but by the time of the examination the bleeding has already stopped. Objectively, in the area of the right cheek there is a wound 4x1 cm with even margins that does not penetrate into the oral cavity and is filled with a blood clot. What suture should be applied to the wound in this case?

A.Late secondary suture

B.Delayed primary suture

C.-

D.Primary blind suture

E. Early secondary suture

D. Primary blind suture

A 27-year-old victim was delivered to the facial surgery department with a cut wound of right cheek. The trauma is civilian, the patient got it in a fight. The deadline for early surgical d-bridement without preliminary antibiotic injection is no more than:

- **A.** 24 hours.
- **B.** 48 hours.
- **C.** 72 hours.
- **D.** 12 hours.
- **E.** 1 hour.

A. 24 hours.

M4#4

A 20 year old patient got a trauma in the area of his upper jaw. He applied to a dentist and complained about mobility of his frontal upper teeth, pain during cutting and joining of teeth. Objectively: the 11 and 21 teeth have II-III degree mobility. Tooth crowns are intact but have oral position. Complete joining of teeth is impossible because the teeth are situated beyond the dental arch. X-ray picture shows a slight broadening of periodontal fissure of the 11 tooth up to 0,5-2 mm. The roots are intact. Make a correct diagnosis:

- A. Traumatic subluxation of the 11, 21 teeth.
- **B.** Traumatic periodontitis of the 11, 21 teeth.
- C. Traumatic complete dislocation of the 11, 21 teeth.
- **D.** Fracture of alveolar process in the area of the 11, 21 teeth.
- **E.** Traumatic extraction of the 11, 21 teeth.

A. Traumatic subluxation of the 11, 21 teeth.

X-ray examination of the maxillary alveolar process of a 35-year-old patient reveals a root fracture of the 11 tooth in its apical region. The tooth has been treated before, the canal is filled. The patient has a history of the tooth trauma. What method of treatment is indicated for this case?

- A. Root apex resection.
- **B.** Tooth extraction.
- C. Tooth crowning.
- **D.** Tooth replantation.
- **E.** -

A. Root apex resection.

M4#5

A 25-year-old patient got a trauma in the chin region. On the basis of X-ray he was diagnosed with bilateral mental fracture of mandible. Specify the direction of displacement of the minor fragment:

- A. Downward and backward.
- **B.** Upward and forward.
- C. Upward and backward.
- **D.** Downward and forward.
- **E.** There is no displacement.

A. Downward and backward.

A 28-year-old man has received a hit to the chin. He complains of pain in the right lateral part of his face. Examination shows facial asymmetry due to tissue swelling in the upper right parotid area, mouth opening is painful and restricted, the jaw is displaced to the right, right-sided crossbite is observed. Make the provisional diagnosis.

- A.Displaced traumatic unilateral fracture of the body of the mandible
- B.Displaced traumatic double fracture of the body of the mandible
- C.Displaced traumatic central fracture of the mandible
- D.Displaced traumatic mental fracture of the mandible
- E. Displaced traumatic fracture of the neck of the mandibular articular process

E. Displaced traumatic fracture of the neck of the mandibular articular process

A 28-year-old has received a trauma of the mental region. X-ray shows a bilateral mental fracture of the lower jaw. In what direction will the displacement of the lesser fragment occur?

A. Downwards and backwards

B. Upwards and forwards

C. Upwards and backwards

D. –

E. Downwards and forwards

A. Downwards and backwards

M4#6

A 34-year-old patient got a trauma (fall) that resulted in mobility of alveolar process and all the upper jaw teeth, occlusion was also changed. X-ray picture depicts the fracture line that runs in both directions from the piriform opening along the floor of maxillary sinus. What is the most likely diagnosis?

- A. Le Fort I maxillary fracture.
- **B.** Partial fracture of the alveolar process.
- **C.** Le Fort II maxillary fracture.
- **D.** Le Fort III maxillary fracture.
- E. Unilateral maxillary fracture.

A. Le Fort I maxillary fracture.

A 32-year-old man was hit in the face with a blunt object. He lost his complains of dizziness, double vision, and pain in the area of the upper jaw. Objectively, his face is asymmetric because of edema in the infraorbital region, palpation detects a bony «step-off» and pathological mobility along the zygomaticomaxillary suture. What fracture can be used suspected in this case?

A. Le Fort I maxillary fracture

B. Le Fort II maxillary fracture

C. Le Fort III maxillary fracture

D. Zygomatic fracture

E. Nasal fracture

B. Le Fort II maxillary fracture

As a result of a car accident a 45-year-old patient got an injury of his upper jaw. Examination revealed elongated and flattened face, profuse nasal haemorrhage, liquorrhea from the nose and ears. These clinical presentations are typical for the following fracture of upper jaw:

- A. Subbasal (Le Fort III).
- **B.** Subnasal (Le Fort I).
- C. Suborbital (Le Fort II).
- **D.** Bilateral fracture of zygomatic bones.
- **E.** -

A. Subbasal (Le Fort III).

A 25-year-old patient has a face trauma. Objectively: there is a significant soft tissue swelling of the left half face, haemorrhage into the left eye sclera, crepitation in the region of nose bones. Palpation reveals the mobility of the upper jaw, its percussion reveals tympanitis. X-ray picture shows the fracture line running through the lower margin of the orbit on both sides of the maxillo-zygomatic suture and reaching behind the maxillary tuber. What is the most likely diagnosis?

- A. Le Fort II maxillary fracture.
- **B.** Le Fort I maxillary fracture.
- C. Le Fort III maxillary fracture.
- **D.** Fracture of the left articular bone.
- **E.** Fracture of nose bones.

A. Le Fort II maxillary fracture.

A 32-year-old male patient was delivered to traumatology. He complains about nosebleed, severe cephalalgia, giddiness, face deformation, heavy breathing, mastication inability. He sustained an injury in the mine over three hours ago. He was conscious. Objectively: the middle third of his face is elongated, there are considerable hematomas and there is an edema in the region of nose root and eyelids of both eyes. The upper jaw is displaced downwards, it is mobile together with nasal bones, cheek bones and eyeballs. Palpation reveals deformation, pain and pathological mobility in the region of the nose bridge, external socket edges, pterygoid processes of basilar bone. Nosebleed is present. What is the most likely diagnosis?

- A. Le Fort III maxillary fracture (upper).
- **B.** Le Fort I maxillary fracture (lower).
- C. Le Fort II maxillary fracture.
- **D.** Fracture of zygomatic bone.
- **E.** Fracture of nasal bone.

A. Le Fort III maxillary fracture (upper).

M4 #7

After a car accident a patient consulted a dentist about pain at the base of the nose. Palpation reveals tenderness of the nose wall, mobility of the nasal bones. Nasal passages are filled with blood clots. What is the provisional diagnosis?

- A. Fracture of nasal bones.
- **B.** Le Fort I fracture of maxilla.
- C. Le Fort II fracture of maxilla.
- **D.** Le Fort III fracture of maxilla.
- **E.** Fracture of cheekbone.

A. Fracture of nasal bones.

A 19 year old patient came to traumatology centre and complained about face asymmetry, right-sided paresthesia of his upper lip, nasal haemorrhage. Objectively: evident face asymmetry due to an edema and haematoma of the right inferior eyelid and infraorbital area. Opening of mouth is slightly limited, occlusion is normal. Palpation reveals a symptom of "step" in the area of the right zygomaticomaxillary suture, deformity in the area of external edge of the right orbit and zygomaticoalveolar crest, gaseous crepitation in the right infraorbital area; percussion reveals a "bursted nut" symptom. What is the most probable diagnosis?

- A. Fracture of the right zygomatic bone.
- **B.** Le Fort's I fracture of upper jaw (inferior).
- C. Le Fort's II fracture of upper jaw.
- D. Le Fort's III fracture of upper jaw (superior).
- **E.** Fracture of nose bones.

A. Fracture of the right zygomatic bone.

A patient applied to the oral surgery department and complained about pain and edema in the right infraorbital region and right zygomatic region, skin numbness in the area of the right half of his upper lip; nasal haemorrhage. These symptoms turned up after a trauma. What disease should be suspected?

- A. Fracture of zygomatic bone.
- **B.** Le Fort I maxillary fracture.
- **C.** Le Fort II maxillary fracture.
- **D.** Le Fort III maxillary fracture.
- **E.** Fracture of nose bones.

A. Fracture of zygomatic bone.

A 25-year-old male patient came to the traumatology. He complains about pain in the right half of his face, limited mouth opening. Objectively: there is a moderate edema and haematoma in the region of the right malar arch. Palpation shows a slightly painful impaction of bone tissue in the region of the right malar arch. The bite isn't disturbed. Amplitude of mouth opening is 1,5 cm. At making an attempt to open the mouth wider the patient feels a mechanical obstacle and pain intensification. What is the most likely diagnosis?

- A. Fracture of the right malar arch.
- **B.** Fracture of the right zygomatic bone.
- C. Traumatic arthritis of TMJ.
- **D.** Le Fort III maxillary fracture (upper).
- **E.** Le Fort II maxillary fracture.

A. Fracture of the right malar arch.

After a fall a 28-year-old patient visited the clinic of maxillofacial surgery and complained of restricted mouth opening, skin numbness in the left infraorbital region, upper lip, wing of the nose, pain in the left zygomatic region that gets worse when he opens his mouth. Palpation revealed step deformity of left inferior orbital rim. What is the most likely diagnosis?

- A. Fracture of the left zygomatic bone with a displacement.
- **B.** Fracture of the left zygomatic bone without a displacement.
- C. Fracture of the upper jaw of Le Fort II (medium type).
- **D.** Fracture of the upper jaw of Le Fort I (top type).
- **E.** Fracture of the left zygomatic bone.

A. Fracture of the left zygomatic bone with a displacement.

A victim got a face and temporal region trauma. A doctor made a diagnosis: fracture of malar arch. What processes of cranial bones are injured?

- A. Temporal process of zygomatic bone and zygomatic process of temporal bone.
- B. Zygomatic process of frontal bone and zygomatic process of temporal bone.
- C. Temporal process of zygomatic bone and zygomatic process of frontal bone.
- D. Zygomatic process of maxilla and zygomatic process of temporal bone.
- E. Zygomatic process of maxilla and zygomatic process of frontal bone.

A. Temporal process of zygomatic bone and zygomatic process of temporal bone.

A patient got a trauma that resulted in limited mouth opening, nasal haemorrhage, numbness of inferior eyelid as well as skin in the infraorbital area. Objectively: there is face deformation caused by depression of soft tissues in the malar region on the left; there is also a step-off deformity in the median part of the infraorbital rim and in the region of zygomatico-alveolar crest. What method of examination will be the most effective for the diagnostics?

- A. X-ray study of facial skull in the axial projection.
- **B.** X-ray study of facial skull in the frontal projection.
- C. X-ray study of facial skull in the lateral projection.
- **D.** X-ray study of facial skull and paranasal sinuses.
- E. Orthopantomogram.

A. X-ray study of facial skull in the axial projection.

M4#8

A 37-year-old patient was admitted to the oral surgery department. The woman complains of pain in her cheek that is made worse by touch. It is known from the anamnesis that five days ago the patient fell down from the stairs and "hurt" her cheek. Objectively: in the depth of cheek examination revealed a circumscribed infiltration, cheek skin is hyperaemic and doesn't make a fold, fluctuation symptom is present. Mucous membrane is edematic and has teeth indentations. What is the most likely diagnosis?

- A. Suppurated cheek haematoma.
- **B.** Traumatic osteomyelitis of mandible.
- C. Cheek haematoma.
- D. Cheek phlegmon.
- E. Acute lymphadenitis.

A. Suppurated cheek haematoma.

A 33-year-old officer delivered from a battlefield has shoot off mental part of mandible, drooling, insignificant haemorrhage from the oral cavity, asphyxia that occurs periodically because of head repositioning. What actions should be taken to prevent the asphyxia development?

- A. Fixation of tongue, transportation in prone position.
- **B.** Thacheostome construction.
- C. Fixation of jaws with a mental sling.
- **D.** Surgical d-bridement, tracheostome construction.
- **E.** Transportation in prone position.

A. Fixation of tongue, transportation in prone position.

A patient was delivered to an admission room after a road accident. Examination of the patient revealed in the area of oral floor a large haematoma spreading to the neck area as well as a significant edema of soft tissues of oral floor and neck. There are signs of asphyxia. What type of emergency care is indicated?

- A. Tracheotomy performing.
- **B.** Lobeline introduction.
- **C.** Tongue fixation.
- **D.** Opening and draining of haematoma.
- E. Symptomatic medicamental treatment.

A. Tracheotomy performing.

A patient with a gunshot wound to the face and laceration of the palatal and pharyngeal tissues develops increasing respiratory failure. The flap that hangs from the wound sometimes partially and sometimes completely closes the entrance to the larynx during breathing. What type of asphyxia can be expected to develop in this case?

A. Aspiration asphyxia

B. Valve asphyxia

C.Obstructive asphyxia

D.Stenotic asphyxia

E. Dislocation asphyxia

B. Valve asphyxia

A bus driver received a head injury in a traffic accident. Concussion was diagnosed at the side of the accident. After being brought to a hospital, in the admission room the patient started vomiting and developed heavy cough and signs of asphyxia. What type of asphyxia is observed in this case?

A. Obstructive asphyxia

B. Dislocation asphyxia

C. Aspiration asphyxia

D. Stenotic asphyxia

E. Valve asphyxia

C. Aspiration asphyxia

M49

A patient has been diagnosed with traumatic open angular fracture of mandible with a fragments displacement. Which of the following should be applied for transport immobilization of the fragments?

Variants of answers

- A. Entin head-chin strap.
- **B.** Tigerstedt splints.
- C. Standard Vasyliev splints.
- **D.** Gunning splints.
- E. Weber splints.

Correct answer

A. Entin head-chin strap.

M4#10

A 42-year-old patient has been hospitalized with Le Fort II fracture of maxilla. Select an appliance for the treatment of this patient:

Variants of answers

- A. Zbarzh.
- B. Kulagin.
- C. Rudko.
- D. Penn-Brown.
- E. Yadrova.

Correct answer

A. Zbarzh.

A 19-year-old patient complains about pain in the submental part of mandible. The day before he got a trauma. Objectively: there is a slight swelling of tissues in the mental area. The mouth can be opened widely enough. All the teeth are intact. Mucous membrane is edematic in the region of central incisors, it bleeds slightly. In this region mobility of mandible fragments is present. Occlusion is undisturbed. What splint should be chosen by the dentist?

Variants of answers

- A. Smooth brace.
- **B.** Splint with spacer bar.
- **C.** Splint with guide plane.
- **D.** Anchor splint with intermandibular fixation.
- **E.** Ivy loops for 31, 32, 42, 41.

Correct answer

A. Smooth brace.

A patient has got a traumatic fracture of mandible in the area of the missing 34, 35 teeth with a slight displacement and a defect of alveolar part in the area of the 34, 35 teeth. Other teeth on both lower and upper jaws are intact. What splint would be optimal in this case?

Variants of answers

- A. Tigerstedt's splint with a spreading curve.
- **B.** Plain splint cramp.
- **C.** Port's splint.
- **D.** Vasilyev's splint.
- E. Vankevich splint.

Correct answer

A. Tigerstedt's splint with a spreading curve.

A 53-year-old patient has been diagnosed with a non-displaced mandibular fracture in the frontal region. Objectively, there are fixed orthopedic appliances on the upper jaw, the lateral group of teeth is missing on the both sides of the lower jaw, the teeth located from canine to canine are intact. What splint should be chosen for the treatment in this clinical case?

A. Vankevich splint

B. Vasilyev splint

C.Port splint

D.Ivy ligature binding

E. Limberg splint

B. Vasilyev splint

A 32-year-old person was hospitalized to the emergency hospital from the site of a car accident. X-ray allowed diagnosing the patient with a displaced unilateral open mandibular fracture on the left at the level of the mental foramen. The patient has all teeth. The fracture line passes between teeth 34 and 35. What splint should be used in this clinical case?

- A. Port splint
- B. Vankevich splint
- C. Double-jaw splint with a spreader bar
- D. Smooth splint-bracket
- E. Double-jaw splint with loops

E. Double-jaw splint with loops

A 53-year-old patient has been diagnosted with a non-displaced mandibular fracture in the frontal region. Objectively, there are fixed orthopedic appliances on the upper jaw, the lateral group of teeth is missing on the both sides of the lower jaw, the teeth from canine to canine are intact. What splinting method should be chosen in this clinical case?

A. Port splint

B. Ivy ligature binding

C. Vasiliev splint

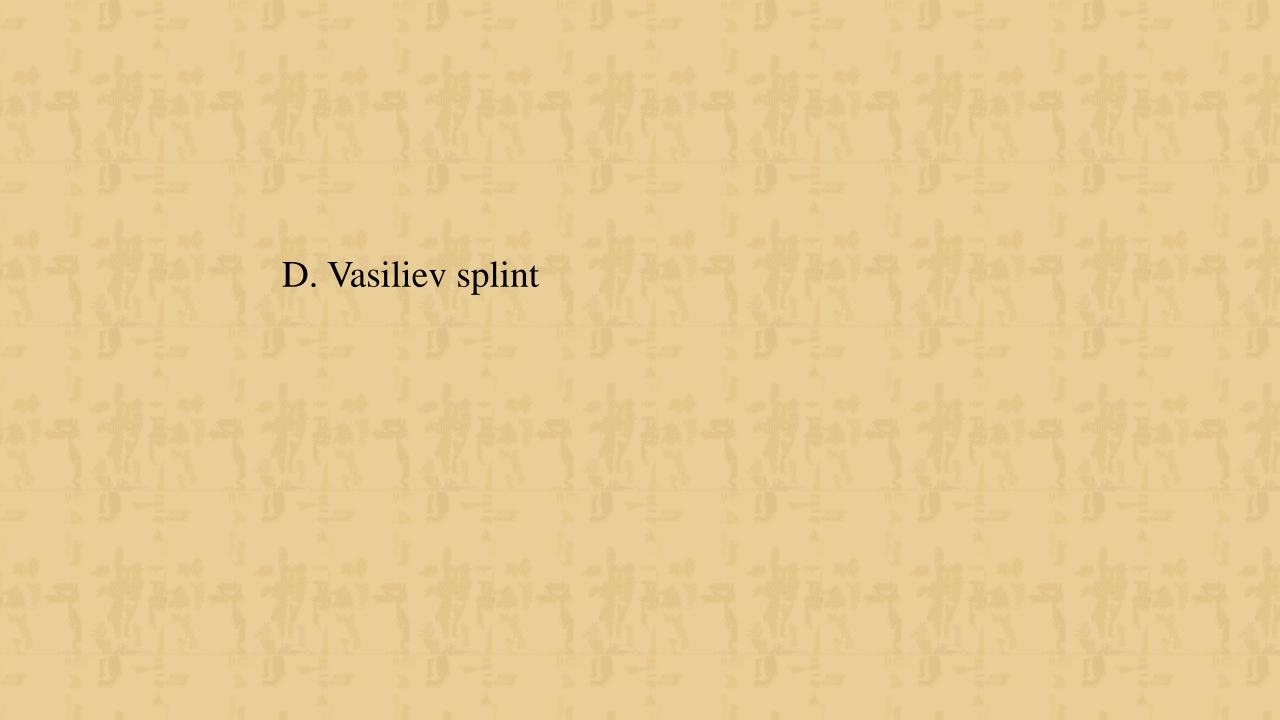
D. Limberg splint

E. Vankevych splint

E. Vankevych splint

A 45-year-old man has been diagnosed with a mandible fracture. The fracture line passes between teeth 43 and 44. Pathological wear is observed in his lower teeth, the crowns of the teeth are low, wire splint fixation is difficult, the fragments can be easily repositioned manually. What laboratory-made splint should be used in this case?

- A. Zbarzh splint
- B. Limberg splint
- C. Port splint
- D. Vasiliev splint
- E. Vankevych splint



A 27-year-old man received a trauma of the lower jaw. After x-ray examination he was diagnosed with a displaced unilateral open mandibular fracture at the level of the mental foramen. The patient has retained all his teeth. The fracture line passes between teeth 34 and 35. What splint should be used for permanent immobilization in this case?

A. Ivy splint

B. Two-jaw splint with a spreader arch

C. Vankevych splint

D. Two-jaw splint with wire loops

E. Smooth dental brace

D. Two-jaw splint with wire loops

A 60-year-old man complains of pain, bleeding, and chewing problems caused by a mandibular trauma of the level if the central incisors. Objectively, the traumatized place is swollen, mouth opening is unrestricted. After x-ray, he was diagnosed with a non-displaced medial mandibular fracture. Both jaws are edentulous. What splint would be optimal in this case?

- A. Port splint
- B. Vankevych splint
- C. Weber splint
- D. Vasiliev splint
- E. Tigerstedt splint

A. Port splint

M4#11

A 75-year-old patient has been admitted to the dental department for the right-angle mandibular fracture with a displacement. Objectively: the face is asymmetric due to the post-traumatic swelling, palpation reveals the mobility of fragments and pain. The patient has a lifelong history of epilepsy. What is the best method of treatment?

- A. Osteosynthesis.
- **B.** Immobilization with Vasilyev splints.
- **C.** Immobilization with Tigerstedt splints.
- **D.** Immobilization with Port splint.
- **E.** Immobilization with Vankevich splint.

A. Osteosynthesis.

A 32-year-old man has been hospitalized into the maxillofacial department of a clinic. The following diagnosis has been made: an open displaced bilateral fracture of the lower jaw in the area of the angle. X-ray shows a large diastasis between the fragments and muscles interposition. What main treatment technique should be chosen for this patient?

A.Make a Vankevich splint for the fixation of the lower jaw

B. Make a Port splint for the fixation of the lower jaw

C.Perform bilateral osteosynthesis of the lower jaw

D.Apply a smooth splint-bracket

E. Ply a splint with loops for the lower jaw

C. Perform bilateral osteosynthesis of the lower jaw

A soldier injured by a shell splinter was diagnosed with gunshot fracture of mandible accompanied by an over 3 cm long bone defect in the chin area. What method of fixation of mandible fragments is indicated?

- A. Machine osteosynthesis (Rudko, Bernadsky).
- **B.** Tigerstedt's splints.
- C. Direct osteosynthesis.
- D. Gunning-Port's splint.
- E. Intermandibular Ivy ligature.

A. Machine osteosynthesis (Rudko, Bernadsky).

M4 Nº14

A 34-year-old patient had got in a car accident. The patient stayed conscious. He complains of headache, dizziness, general weakness, nausea. 12 hours after the injury the patient got "raccoon eyes" (periorbital haematomas) within the limits of the circular muscle of eye. What fracture does the victim have?

- A. Fracture of skull base.
- **B.** Le Fort II fracture of maxilla.
- C. Fracture of nasal bones.
- **D.** Bilateral fracture of zygomatic bones.
- **E.** Fracture of frontal bones.

A. Fracture of skull base.

A 48-year-old woman was hospitalized after a car accident. The patient complains of a cheek wound, intense headache, nausea, and dizziness. After a thorough examination, the following diagnosis was established: a contused lacerated cheek wound, closed craniocerebral injury, concussion. What type of trauma is it?

A. Single

B. Multiple

C. Isolated

D. Combined

E. Compound

E. Compound

A 48-year-old female patient had been delivered to a hospital with a cheek wound and severe headache, nausea, dizziness. It is known from the history that the patient had got a trauma as a result of a fall. After examination she was diagnosed with a contused lacerated wound of cheek, closed craniocerebral injury, brain concussion. This trauma can be qualified as:

- A. Concominant trauma.
- **B.** Isolated trauma.
- C. Combined trauma.
- **D.** Polytrauma.
- E. Single.

A. Concominant trauma.

M4 #15

A victim got a perforating wound of the left cheek contaminated with radioactive materials on the battlefield. The wound was dressed with aseptic bandage from the individual first-aid pack and processed with anaesthetic and antibacterial medicaments. The dressing should be changed at the following station of medical evacuation:

- A. At each station of evacuation.
- **B.** At the battalion aid station.
- C. At the regimental aid station.
- **D.** At the station of the separate medical battalion.
- **E.** Only when the dressing is unsatisfactory.

A. At each station of evacuation.

Regimental Aid Station (RAS) admitted a soldier with an injury in the maxillofacial region. Dosimetric control revealed radiation affection in this patient. The injured should be referred to the following functional unit of RAS:

- A. Decontamination station.
- **B.** Dressing pavilion.
- C. Evacuation pavilion.
- D. Isolatorю
- **E.** Admission and sorting pavilion.

A. Decontamination station.

M4#16

A 24-year-old victim consulted a doctor about a face burn. He was injured by the open flame. He complains about pain and burning of face skin. Objectively: hyperemia of face skin; in the region of chin, nose, forehead, eyebrows, cheekbones there are burn blisters containing transparent liquid. These presentations correspond with the following degree of burn severity:

- A. I-II degree.
- B. II-III A degree.
- C. II-III B degree.
- D. III B-IV degree.
- E. II-IV degree.

A. I-II degree.