

These are the questions we remember from our final endo exam (2013 batch):

1. A file with a tip size = 55mm, D3=67, what's the taper?
0.04.
2. Best way to determine the working length:
 - a. Tactile sensation.
 - b. working length radiograph.
 - c. Electric apex locator.
 - d. All of the above. – The dr said that he meant all of them TOGETHER, so apparently this is the right answer-.
3. About sodium hypochlorite:
it's proteolytic.
4. If the master apical file reaches the full working length then when you insert your master cone it doesn't reach to the full working length, we reclean and shape using master apical file: true.
5. True about parallel technique:
 - a. The file is positioned parallel to the long axis of the tooth.
 - b. The source of x-ray should be parallel to the long axis of the tooth.
 - c. You need a special holder to hold the film in position.
 - d. A+C.
 - e. All of the above.
6. Nickel titanium files are better than stainless steel: true.
7. Inter-appointment medicament:
causes tooth discoloration if left in the pulp chamber.
8. The tip size of the pink file:
0.006 cm. –he changed the unit, so be aware.
9. What's the color of the 35 size file?
Green.
10. Not of the ways used to introduce the sealer:
 - a. by using a file.
 - b. the master cone.
 - c. accessory cones.
 - d. spreader.
 - e. lentulo spirals.

11. The percentage of C-shaped canals in the Jordanian population is: 10%.
12. Regarding K-files and H-files which is false:
- they have the same lengths.
 - they have the same color coding.
 - they are manufactured in the same way.
13. If someone started with a gutta percha size 40 with a 6% taper and another person started with a size 50 with a 2% taper, what should they do to get the same tip size? they need to cut 2 mm from the first one and 1 mm from the second.
14. Diagnostic terms approved by American association of endodontists except:
- condensing osteitis.
 - previously initiated therapy.
 - asymptomatic apical periodontitis.
 - chronic periodontitis.
 - none of the above.
15. The tip size of Gate glidden size 5: 1.3mm.
16. Wrong about rubber dam isolation:
- if the patient is allergic to latex we do the treatment without rubber dam isolation.
 - the function of the punch is to make a hole in the sheet.
 - important to retract tongue and cheeks.
17. Not of the advantages of using the rubber dam:
- Protect saliva contamination.
 - Protect from aerosol.
 - Protect from instruments separation.
18. True about chronic periodontitis: associated with necrotic pulp.
19. Sodium Hypochlorite and EDTA (chelating agent) can be used to remove the smear layer: true
20. If the working length of a canal was 22mm and we inserted a gutta percha size 50 and it reached 25 mm, what should we do? We use a 55 mm gutta percha instead.
21. If someone started with a file size 40 and increased the size every 0.5 mm and another person started with a file size 40 as well but he increased the size every 1mm, the true statement is:
- The first one will get a larger canal.
 - The second one will get a larger canal.
 - we don't have enough information.



- there was a discussion about this question, if we assumed that they both moved in sequence (used size 40, then 45, then 50 and so on) the first one will get a larger canal, but if this wasn't the case –well I don't know if it is allowed to use size 40 then jump to size 50- then we don't have enough information to decide, anyway we asked the dr after the exam and he said that the first one will get a larger canal.

Good Luck

Your colleagues

اذكروننا بدعوة ☺

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Best Wishes

