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Federal State Budget Educational Institution
of Higher Education
Pacific State Medical University
of the Ministry of Health of the Russian Federation

APPROVED BY

Director of the Institute of Dentistry



/ Pervov Yu.Yu./
"8th" of June 2026

COLLECTION OF ASSESSMENT TOOLS

B1.C.37 Dentistry of the basic educational program of Higher Education

Specialty	31.05.01 General Medicine (English-language program) (code, name)
Degree	Specialist's degree
Profile	02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system)
Mode of study	Full-time
Period of mastering the BEP	6 years (nominal length of study)
Institute	of Dentistry

Vladivostok, 2026

1. INTRODUCTION

1.1. Collection of Assessment Tools is a document that regulates the format, content, and types of assessment tools for continuous assessment, interim examination and final (state final) examination, and graded criteria for each type of assessment tools.

1.2. Assessment tools allows to evaluate the development of universal, general professional, and professional competencies (UCs, GPCs and PCs respectively) outlined in Federal State Educational Standard of Higher Education and defined in the basic educational program of higher education for the specialty 31.05.01 General Medicine (English-language program), profile 02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system).

([BEP HE for the 31.05.01 General Medicine \(English-language program\)](#)), section 3. Learning Outcomes Requirements of the Basic Educational Program of Higher Education)

2. DOCUMENT BODY

2.1. Types of Assessment, Formats of Assessment Tools

No.	Types of assessment	Assessment Tools Format
1	Continuous assessment	Interview Questions
		Tests
		Mini-Case Studies
2	Interim assessment	Tests

3. The contents of assessment tools for continuous and interim examination are prepared by the teacher of the course

Interview questions

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine (English-language program)
C	GPC-5	Able to assess morphofunctional status, physiological states, and pathological processes in the human body when working to achieve objectives of professional activity
I		ANSWER THE QUESTIONS 1. Organization of dental care for adults and children. 2. Patient motivation for dental treatment. Deontology. 3. Oral hygiene 4. Resuscitation measures in outpatient dental practice. Medicines and equipment necessary for providing assistance in emergency situations. 5. Prevention of dental diseases. Goal, objectives and methods. 6. Etiology and pathogenesis of dental caries. Definition of dental caries. General and local risk factors for caries development. 7. Anatomical and histological structure of the tooth 8. Methods of examination of patients with various forms of pulpitis. Methods of treatment of pulpitis 9. Methods of examination of patients with periodontitis. Methods of treatment of periodontitis

	10. Periodontal diseases: inflammatory, degenerative. Examination of a patient with periodontal pathology. Surgical methods for the treatment of inflammatory periodontal diseases. 11. Traumatic lesions of the oral mucosa. 12. Viral diseases of the oral mucosa 13. Infectious diseases of the oral mucosa 14. Etiology. Clinical presentation of partial tooth loss. Functional disorders associated with partial tooth loss. 15. Changes in the dentoalveolar system due to tooth loss. Types of dental defects. Classifications of dental defects. 16. TMJ diseases. Classification, clinical features, diagnostics. 17. Periodontitis - etiology, pathogenesis, pathological anatomy, routes of spread of the infectious process. 18. Radicular cyst. Clinical presentation, diagnosis, differential diagnosis, and treatment. 19. Chronic periodontitis. Classification, clinical and radiographic diagnostics, differential diagnostics. 20. Periostitis of the jaws. Acute purulent periostitis of the jaws. Etiology, pathogenesis, pathological anatomy. Chronic periostitis of the jaws. 21. Odontogenic osteomyelitis of the jaws: Etiology. 22. Abscess and phlegmon of the cellular spaces adjacent to the body of the mandible 23. Anaerobic infection. Putrefactive necrotic phlegmon of the face and neck. 24. Boils and carbuncles of the face and neck. Etiology. Pathogenesis. 25. Lymphadenitis. Classification, etiology, pathogenesis. Topographic anatomy of the lymphatic apparatus of the head and neck. Acute and chronic lymphadenitis. Abscessing lymphadenitis. 26. Adenophlegmon . Clinical presentation, diagnostics, differential diagnostics, treatment. 27. Actinomycosis. Etiopathogenesis , clinical manifestations in the oral cavity, diagnosis, treatment 28. Syphilis. Etiopathogenesis , clinical manifestations in the oral cavity, diagnosis, treatment 29. Tuberculosis. Etiopathogenesis , clinical manifestations in the oral cavity, diagnosis, treatment 30. Mediastinitis, etiology, pathogenesis. Topographic anatomy of the neck and mediastinum. Clinical presentation of mediastinitis. Diagnosis. Treatment, surgical approach. Prevention. 31. Tumor definition. Organization of oncology services. Modern concepts of the biological nature of tumors. Oncological alertness. 32. Predisposing factors for the occurrence of malignant tumors of the maxillofacial region. 33. Methods of examining patients for the purpose of diagnosing oncological diseases. 34. Precancerous conditions of the skin of the face, red border of the lips and mucous membrane 35. Congenital cysts and fistulas of the face and neck. Keratin cysts, dermoid cysts, branchial cysts and fistulas, thyroglossal cysts and fistulas of the neck. 36. Benign tumors of the face and neck. 37. Odontogenic tumors. Odontoma, cementoma , epulis, ameloblastoma .
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		38. Osteogenic and non-osteogenic tumors of the jaws. 39. Osteoblastoclastoma , osetoma , osteoid- osteoma, fibroma, chondroma, osteochondroma . 40. General principles of treatment of patients with malignant tumors of the maxillofacial region. 41. Facial skin cancer. Basal cell carcinoma, squamous cell carcinoma, keratoacanthoma , nevi , malignant melanoma. Clinical presentation, diagnosis, treatment. Prevention 42. Lip cancer. Clinical features, diagnostics, treatment. Prevention. Cancer of the tongue and mucous membrane of the floor of the mouth. 43. Malignant tumors of the jaws. 44. Benign and malignant tumors of the salivary glands. 45. Ankylosis of the TMJ. Classification, etiopathogenesis, clinical features, diagnosis, treatment. 46. Etiopathogenesis and classification of inflammatory diseases of the salivary glands. 47. Epidemic mumps. Clinical presentation, diagnosis, treatment. 48. Classification of soft tissue injuries of the maxillofacial region. 49. Wounds of the maxillofacial region. Classification. Primary surgical treatment of wounds. Features of primary surgical treatment in the maxillofacial region. 50. Fractures and dislocations of teeth. Fractures of the alveolar process of the mandible: diagnosis, clinical features, treatment. Classification, etiology, clinical features, treatment. 51. Fractures of the upper and lower jaw. Classification. Clinical and radiographic presentation. Transport immobilization: types, methods, and means. 52. Conservative treatment of fractures of the lower jaw. 53. Surgical treatment of jaw fractures
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Assessment criteria

“Very good” - more than 91% correct answers of questions of every level

“Good” - 81-90% correct answers of questions of every level

“Satisfactory” - 71-80% correct answers of questions of every level

“Unsatisfactory” - less than 71% correct answers of questions of every level

Tests

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine (English-language program)
C	GPC-5	Able to assess morphofunctional status, physiological states, and pathological processes in the human body when working to achieve objectives of professional activity
I		ANSWER LEVEL 1 TEST QUESTIONS (ONE CORRECT ANSWER)
		1. The most informative method for examining the bone tissue of the upper jaw is 1) cone beam tomography of the area of interest 2) X-ray of the facial skeleton in lateral projection 3) magnetic resonance imaging 4) fistulography 2. The main symptoms of a zygomatic bone fracture is 1) hematoma of the zygomatic region

		2) deformation of the nose, hematoma 3) hemorrhage in the lower eyelid 4) "step" symptom, difficulty opening the mouth 3. The appearance of a patient with bilateral bony ankylosis of the TMJ is characterized by 1) lower macrognathia 2) upper micrognathia 3) upper retrognathia 4) profile of a "bird's" face 4. The patient's examination begins 1) from inspection 2) from collecting anamnesis 3) clarifying the patient's complaints 4) tissue palpation 5. Closure of a defect of the ala or tip of the nose using the method of V.I. Suslov includes 1) transplantation of a complex free flap using microvascular technique 2) by forming a skin - fat flap from the nasolabial fold 3) closing the defect with a transferred pedicle flap from the forehead 4) transplantation of a free skin - cartilage graft from the auricle 6. The term "lower retrognathia" describes 1) underdeveloped lower jaw 2) asymmetrical lower jaw 3) displaced posteriorly lower jaw 4) overdeveloped lower jaw
I		ANSWER LEVEL 2 TEST QUESTIONS (MULTIPLE CORRECT ANSWERS)
		1. Angioedema is accompanied by 1) acute allergic reaction 2) immediate and massive swelling of the skin, swelling of the subcutaneous fat and mucous epithelium 3) spontaneous (non-traumatic) hemorrhage into the cranial cavity 4) manifestation of vascular insufficiency with preservation of consciousness 4) loss of consciousness with lack of muscle tone 5) rare heartbeat 2. The upper border of the floor of the oral cavity and the outer border of the submandibular region are 1) oral mucosa 2) the inner surface of the body of the lower jaw 3) medial pterygoid muscle 4) the posterior edge of the branch of the lower jaw 5) the inferior surface of the lateral pterygoid muscle 6) base of the skull

		3. The superior border of the pterygomaxillary space and the external border of the submandibular region are 1) medial pterygoid muscle 2) the inferior surface of the lateral pterygoid muscle 3) oral mucosa 4) the posterior edge of the branch of the lower jaw 5) the inner surface of the body of the lower jaw 6) base of the skull 4. The outer border of the parapharyngeal space and the outer border of the submandibular region are 1) medial pterygoid muscle 2) the inner surface of the body of the lower jaw 3) oral mucosa 4) the posterior edge of the branch of the lower jaw 5) the inferior surface of the lateral pterygoid muscle 6) base of the skull 5. Keratoacanthoma is characterized by 1) stratified squamous epithelium 2) the presence of a significant amount of keratin in the central section 3) accumulation of yellow fatty tissue lobules 4) consists of loose connective tissue with a large amount of adipose tissue 5) consists of melanocytes of the epidermis or dermis 6) tissue suturing
I		ANSWER LEVEL 3 TEST QUESTIONS (MATCHING QUESTIONS)
		1. Match the sections of the face skull and their boundaries Topographic anatomy of the face skull: 1) the upper and posterior border of the temporal region 2) the lower border of the parotid-masticatory region 3) anterior border of the retromandibular region 4) the outer border of the retromandibular region 5) the internal border of the pterygomaxillary space 6) deep lateral area of the face Boundaries: A) the lower edge of the body of the mandible B) parotid-masticatory fascia C) the outer surface of the medial pterygoid muscle D) temporal line E) the posterior edge of the branch of the lower jaw F) infratemporal fossa 2. Match the surgical manipulations with their authors Author: 1) according to Evdokimov 2) according to Orlovsky 3) Denker's method 4) according to Khitrov 5) according to Makienko 6) according to Limberg Manipulation:

- A) cheiloplasty
- B) maxillary sinusectomy
- C) rhinoplasty
- D) microstoma
- E) osteosynthesis of the jaw
- F) plastic surgery with local tissues

3. Match the types of anesthesia with their indications

Type of anesthesia:

- 1) infiltration
- 2) inhalation
- 3) combined
- 4) neuroleptanalgesia
- 5) conductive
- 6) application

Indication:

- A) for patients with high surgical risk
- B) in case of complicated removal of wisdom teeth
- C) for minimally invasive surgeries in the face and neck area
- D) during operations not associated with a high risk of developing airway obstruction
- E) in traumatic and complex surgical interventions (phlegmon, gunshot wounds)
- F) decreased sensitivity in the treated area

4. Match manipulations with tools used to perform them

Manipulation:

- 1) syndesmotomy
- 2) extraction
- 3) dislocation
- 4) curettage
- 5) tissue retention
- 6) division of roots

Tool:

- A) elevator
- B) sickle-shaped trowel
- C) Farabeuf hook
- D) curettage spoon
- E) forceps
- F) diamond bur in a turbine handpiece

5. Match: manipulations with the materials used to perform them

Manipulation:

- 1) collection of bone material
- 2) formation of a blood clot
- 3) creation of the gum level
- 4) creating conditions for rapid regeneration of the socket
- 5) bringing the edges of the wound together
- 6) removal of granulation tissue

Material:

- A) surgical scraper
- B) suture material
- C) hemostatic sponge
- D) gum former

		E) PRF membrane F) curettage spoon
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Assessment criteria

“Very good” - more than 91% correct answers of questions of every level

“Good” - 81-90% correct answers of questions of every level

“Satisfactory” - 71-80% correct answers of questions of every level

“Unsatisfactory” - less than 71% correct answers of questions of every level

Standardized case studies and checklists for **B1.C.37 Dentistry** course

Case Study No.1

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine (English-language program)
C	GPC-5	Able to assess morphofunctional status, physiological states, and pathological processes in the human body when working to achieve objectives of professional activity
I		READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS Patient B., 20 years old, complains of pain in the lower jaw on the right, radiating to the ear and temple, swelling of the face, difficulty opening the mouth, elevated body temperature, malaise, headache, and insomnia. Progression of the current condition: I first experienced pain in the area of the erupting tooth 4.8 about three months ago. Similar symptoms had occurred several times. I periodically applied sage infusion mouthwashes and took analgesics. The pain subsided after 2-3 days. Five days ago, the pain in the area of tooth 4.8 recurred. Mouthwashes and analgesics brought no relief. Facial swelling and difficulty opening the mouth developed, my general condition worsened, and my body temperature rose. Objectively: general condition is satisfactory, body temperature is 37.5°C. On examination, soft tissue swelling is present in the retromandibular and submandibular areas on the right. The submandibular lymph nodes on the right are enlarged and tender to palpation. Mouth opening is limited to 1.0 cm between the central incisors. Tooth 4.8 has erupted with two medial cusps. Pus is secreted from under the mucous membrane ("hood") covering the unerupted portion of the chewing surface of tooth 4.8. The mucous membrane of the "hood" and around it is hyperemic and edematous. A painful infiltrate is palpable in the retromolar area. The radiograph of the body of the lower jaw on the right in the lateral projection shows tooth 4.8, which is not fully erupted but is correctly positioned in the alveolar part of the jaw.
Q	1	Question: Make a diagnosis and indicate the most significant symptoms for this disease
Q	2	Question: Conduct differential diagnostics
Q	3	Question: Make a comprehensive treatment plan for a dentist
Q	4	Question: Justify the sequence of surgical stages of treatment
Q	5	Question: List the possible complications

Case Study No.1 Checklist

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine for international students (in English)
C	GPC-5	Able to assess morphofunctional status, physiological states, and pathological processes in the human body when working to achieve objectives of professional activity
I		READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS Patient B., 20 years old, complains of pain in the lower jaw on the right, radiating to the ear and temple, swelling of the face, difficulty opening the mouth, elevated body temperature, malaise, headache, and insomnia. Progression of the current condition: I first experienced pain in the area of the erupting tooth 4.8 about three months ago. Similar symptoms had occurred several times. I periodically applied sage infusion mouthwashes and took analgesics. The pain subsided after 2-3 days. Five days ago, the pain in the area of tooth 4.8 recurred. Mouthwashes and analgesics brought no relief. Facial swelling and difficulty opening the mouth developed, my general condition worsened, and my body temperature rose. Objectively: general condition is satisfactory, body temperature is 37.5°C. On examination, soft tissue swelling is present in the retromandibular and submandibular areas on the right. The submandibular lymph nodes on the right are enlarged and tender to palpation. Mouth opening is limited to 1.0 cm between the central incisors. Tooth 4.8 has erupted with two medial cusps. Pus is secreted from under the mucous membrane ("hood") covering the unerupted portion of the chewing surface of tooth 4.8. The mucous membrane of the "hood" and around it is hyperemic and edematous. A painful infiltrate is palpable in the retromolar area. The radiograph of the body of the lower jaw on the right in the lateral projection shows tooth 4.8, which is not fully erupted but is correctly positioned in the alveolar part of the jaw.
Q	1	Question: Make a diagnosis and indicate the most significant symptoms for this disease
A		Correct answer: - Retromolar periostitis. Symptoms: - Sharp, persistent pain in the area where the tooth is erupting, radiating to the temple and ear. - Deterioration of general condition, weakness, fatigue, insomnia, headache, body temperature rises to 38-39.5 °C. - Inflammatory, painful infiltrate in the retromolar region, spreading to the outer, and less often, inner surface of the alveolar part of the jaw. - Severe inflammatory contracture (2-3 degrees). - Swelling in the posterior submandibular region.
R2	Very good	All descriptors of the correct answer have been listed
R1	Good/Satisfactory	2 descriptors of the correct answer have been listed 1 descriptor of the correct answer has been listed
R0	Fail	No descriptors of the correct answer have been listed

Q	2	Question: Conduct differential diagnostics
A		Correct answer: 1. Abscess of the pterygomandibular space. 2. Abscess of the peritonsillar space. 3. Abscess of the sublingual region.
R2	Very good	All descriptors of the correct answer have been listed
R1	Good/Satisfactory	2 descriptors of the correct answer have been listed 1 descriptor of the correct answer has been listed
R0	Fail	No descriptors of the correct answer have been listed
Q	3	Question: Make a comprehensive treatment plan for a dentist
A		Correct answer: The range of measures depends on the severity of inflammatory phenomena, the general and local picture of the disease, as well as radiological data. 1. The dental surgeon must eliminate acute symptoms by opening the inflammatory focus. 2. Prescribe general and local drug therapy (antibiotic therapy, antiinflammatory therapy, antihistamines) 3. In case of inflammatory swelling of the perimaxillary soft tissues and lymphadenitis, external ointment dressings are indicated. 4. Physical treatment methods (UHF therapy, microwave therapy, light therapy with a Sollux lamp, laser therapy) 5. After the inflammatory phenomena have subsided, it is necessary to decide on the fate of the wisdom tooth, taking into account the clinical and radiographic data.
R2	Very good	All descriptors of the correct answer have been listed
R1	Good/Satisfactory	3-4 descriptors of the correct answer have been listed 1-2 descriptors of the correct answer have been listed
R0	Fail	No descriptors of the correct answer have been listed
Q	4	Question: Justify the sequence of surgical stages of treatment
A		Correct answer: 1. Under conduction and infiltration anesthesia, the dental surgeon makes an incision through the mucous membrane from the base of the pterygomandibular fold down to the inferior fornix of the vestibule. If there is inflammatory infiltration of the tissues of the inferior fornix of the vestibule, the incision is extended along the alveolar portion of the jaw at the level of the molars. 2. The wound is drained with a rubber strip. 3. Daily dressing changes. 4. After the inflammatory phenomena have subsided, it is necessary, taking into account the clinical and radiographic data, to decide on the fate of the third molar, depending on whether there is sufficient space in the alveolar part of the jaw.
R2	Very good	All descriptors of the correct answer have been listed
R1	Good/Satisfactory	2 descriptors of the correct answer have been listed 1 descriptor of the correct answer has been listed
R0	Fail	No descriptors of the correct answer have been listed
Q	5	Question: List the possible complications
A		Correct answer: The purulent process from the retromolar space through the adjacent tissue and layers of loose connective tissue can spread to neighboring cellular spaces.

		1. Abscesses and phlegmons of adjacent cellular spaces. 2. Purulent lymphadenitis of the submandibular region. 3. When the compact layer of the mandibular branch dies, secondary cortical osteomyelitis of the mandible occurs. 4. Actinomycosis
R2	Very good	All descriptors of the correct answer have been listed
R1	Good/Satisfactory	2 descriptors of the correct answer have been listed 1 descriptor of the correct answer has been listed
R0	Fail	No descriptors of the correct answer have been listed

4. Assessment criteria for learning outcomes

"Pass" is given to a student who has shown a sufficiently strong knowledge of the basic concepts of the subject; is able to complete specific practical tasks outlined in the program with no outside help, use recommended reference material, and correctly evaluate the results.

"Fail" is given to a student who has significant gaps in knowledge of the basic concepts of the subject, is not able reach the correct solution to a specific practical task outlined in the curriculum even with outside help.