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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.V.EC.04.05 Surgical methods of periodontal treatment
of the basic educational program
of Higher Education

Specialty	31.05.03 Dentistry for foreign students (English-language program) (code, name)
Degree	Specialist's degree
Profile	02 "Healthcare" (in the field of providing health care in patients with dental pathology)
Mode of study	Full-time
Period of mastering the BEP	5 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 31.05.03 Dentistry for foreign students (English-language program), profile 02 "Healthcare" (in the field of providing health care in patients with dental pathology).

([BEP HE for the 31.05.03 Dentistry for foreign students \(English-language program\)](#) specialty, 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
		Checklist
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	31.05.03	Dentistry for foreign students (English-language program)
C	PC-2	ability to administer and apply modern methods and/or digital technologies to treat dental patients as well as monitor the effectiveness and safety of the treatment
F	A/02.7	Prescribing and monitoring the effectiveness and safety of non-pharmacological and pharmacological therapies
I		ANSWER THE QUESTIONS
		1. Periodontology: concepts and terminology. Anatomical and physiological features of the structure of periodontal tissues. Blood supply and innervation of the periodontium. Functions. 2. Types of periodontal biotype 3. Classification of periodontal diseases. 4. Modern aspects of the etiology and pathogenesis of periodontal diseases. Interaction between dental plaque and the macroorganism. Dental plaque (biofilm), periodontopathogenic bacteria. Factors influencing the number of microbes and their virulence. 5. The main types of pathological processes in the development of periodontal diseases.

	6. Basic methods for examining a periodontal patient in a therapeutic dentistry clinic. Criteria for assessing the condition of periodontal tissues. Medical documentation (case history format). 7. Additional methods of examination of a periodontal patient in a therapeutic dentistry clinic: index assessment of the condition of periodontal tissues (Fedorov-Volodkina, Schiller-Pisarev, RMA, SR ITN, GI, CPI indices) 8. Periodontal tests, targeted and general radiography. Visual criteria for assessing the condition of the periodontium when studying radiographs. 9. The importance of oral hygiene and hygiene products and items recommended for periodontal diseases in children and adolescents. 10. List the methods of anesthetizing periodontal tissues before removing dental plaque. 11. Sequence of actions when performing professional hygiene. 12. List the antiseptic agents recommended for irrigation of the oral cavity and gingival pockets. 13. Additional methods of examination of a periodontal patient in a therapeutic dentistry clinic: laboratory (microbiological, polymerase chain reaction, general blood test), functional methods of periodontal examination (rheography, photoplethysmography, polarography). 14. Microbiological studies in periodontal diseases 15. Catarrhal gingivitis: course; prevalence; severity, causes. Clinical presentation, diagnosis, differential diagnosis. 16. Hypertrophic gingivitis (edematous, fibrous forms): course; prevalence; severity, causes. Clinical presentation, diagnosis, differential diagnosis. 17. Ulcerative gingivitis: course; prevalence; severity, causes. Clinical presentation, diagnosis, differential diagnosis. 18. Other forms of gingivitis (climacteric, desquamative, atrophic). Clinical presentation, diagnostics. 19. Protocol for patient management: "Gingivitis". 20. Periodontitis: definition, characteristics of the main symptom complex; course; prevalence; causes. Clinical presentation, diagnostics, differential diagnostics. 21. Mild periodontitis: clinical presentation, diagnostics, differential diagnostics. 22. Moderate periodontitis: clinical presentation, diagnostics, differential diagnostics. 23. Severe periodontitis: clinical presentation, diagnostics, differential diagnostics. 24. Protocol for the management of patients: "chronic generalized periodontitis." 25. Periodontosis: course, prevalence, severity. Etiology, pathogenesis, clinical presentation, diagnosis, differential diagnosis. 26. Idiopathic diseases with progressive periodontal tissue lysis. Etiology, pathogenesis, clinical features, diagnosis, and differential diagnosis. 27. Periodontomas - tumors and tumor-like processes in the periodontium. Etiology, pathogenesis, clinical features, diagnosis, differential diagnosis, treatment.
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		28. Complex treatment of periodontal diseases: concepts of periodontal treatment; possibilities of regeneration and healing of periodontal tissues; criteria for successful treatment. 29. Drawing up a comprehensive treatment plan and its sequence: preparation for treatment; provision of emergency care; therapeutic treatment; surgical, corrective treatment; supportive therapy and observation (goals and ways to achieve them). 30. Conservative treatment of periodontal diseases. Professional oral hygiene: purpose, sequence of stages, tools, methodology. 31. Conservative treatment of periodontal diseases. Closed curettage Periodontal pockets: purpose, stages, instruments, techniques. Single-stage curettage. 32. General treatment of periodontal diseases: indications. Systemic antimicrobial treatment: rationale, principles (schemes) of antibiotic administration. Advantages and disadvantages of systemic antimicrobial administration. 33. Local antibacterial therapy in the complex treatment of periodontal diseases. Advantages and disadvantages. Medications used in periodontology: routes of administration and characteristics. 34. Physiotherapeutic methods used in the treatment of periodontal diseases: massage, aeroionotherapy, aerosol therapy, mud therapy, light therapy. 35. Physiotherapeutic methods used in the treatment of periodontal diseases: electrotherapy, ultrasound therapy. 36. Periodontal abscess: etiology, pathogenesis, clinical features, diagnostics, differential diagnostics, treatment. 37. Prevention of periodontal diseases: oral hygiene. Selection of oral hygiene items and means, methods of their use. 38. Medical examination of patients with periodontal diseases.
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Assessment criteria

"Very good" grade is given to a student who possesses knowledge of the subject in full scope outlined in the curriculum, has a sufficiently deep insight into the subject; is able to answer all questions clearly, exhaustively, and with no outside help; structures their answers logically, with emphasis on the most important information; is able to analyze, compare, classify, summarize, refine, and structure the course content, giving particular attention to cause-and-effect relationships.

"Good" is given to a student whose knowledge of the subject is almost in full scope outlined in the curriculum (gaps are only present in the knowledge of some especially complex aspects); is able to answer questions exhaustively with little to no outside help; does not always put emphasis on the most important information, but does not make significant mistakes.

"Satisfactory" is given to a student who possesses the bulk of knowledge on the subject; has difficulties answering questions with no outside help, uses imprecise wording; makes mistakes in substantial number of their answers.

"Unsatisfactory" is given to a student who does not have the mandatory minimum of knowledge on the subject, is not able to give an answer even with additional guiding questions.

Tests for continuous and interim assessment

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.03	Dentistry for foreign students (English-language program)
C	PC-2	ability to administer and apply modern methods and/or digital technologies to treat dental patients as well as monitor the effectiveness and safety of the treatment

F	A/02.7	Prescribing and monitoring the effectiveness and safety of non-pharmacological and pharmacological therapies
I		ANSWER TEST QUESTIONS (SELECT CORRECT ANSWER(S))
		1. Biomodification (conditioning) of root surfaces is carried out using 1) 22% citric acid 2) 18% citric acid 3) 24% citric acid 4) 20% citric acid 2. Scalpels _____ are NOT used in periodontal surgeries 1) No.15 2) No.11 3) No.10 4) No.12 3. Periodontium includes 1) tooth 2) periodontal ligament 3) gums 4) root cement 4. The main method for eliminating the phenomena of hypertrophic growth of the gingival margin is 1) modified Widman flap 2) gingivectomy 3) curettage 4) frenectomy or frenotomy 5. The depth of the periodontal pocket of 5-6 mm is typical for 1) mild periodontosis 2) moderate periodontosis 3) severe periodontosis 4) mild gingivitis 6. A periodontal pocket depth of up to 3.5 mm is typical for 1) moderate periodontitis 2) mild gingivitis 3) mild periodontitis 4) severe periodontitis 7. To perform closed curettage, use 1) dental excavator 2) sickle-shaped trowel 3) curettes Gracie 4) curettage spoon 8. Innervation of the periodontium is provided by 1) facial nerve 2) branches of the dental plexuses of the second and third branches of the trigeminal nerve 3) the second branch of the trigeminal nerve 4) the first branch of the trigeminal nerve 9. Gingival group of periodontal surgeries includes

	1) plastic surgery of the short frenulum of the lips and tongue 2) frenulotomy 3) vestibuloplasty 4) gingivectomy
	10. Gingival group of periodontal surgeries includes 1) plastic surgery of the short frenulum of the lips and tongue 2) curettage 3) vestibuloplasty 4) frenulotomy
	11. Gingival group of periodontal surgeries includes 1) plastic surgery of the short frenulum of the lips and tongue 2) vestibuloplasty 3) gingivotomy 4) frenulotomy
	12. Mucogingival group of periodontal surgeries includes 1) gingivotomy 2) curettage 3) gingivectomy 4) vestibuloplasty
	13. Mucogingival group of periodontal surgeries includes 1) gingivectomy 2) gingivotomy 3) curettage 4) closure of isolated gingival recessions
	14. Mucogingival group of periodontal surgeries includes 1) plastic surgery of the short frenulum of the lips and tongue 2) gingivectomy 3) gingivotomy 4) open curettage
	15. Mucogingival group of periodontal surgeries includes 1) frenulotomy 2) curettage 3) gingivectomy 4) gingivotomy
	16. General contraindications to surgical treatment of periodontal diseases include 1) smoking 2) pathology of bite 3) failure to comply with personal hygiene rules 4) oncological pathology in the terminal stage
	17. General contraindications to surgical treatment of periodontal diseases include 1) diabetes mellitus type 2 2) active form of tuberculosis 3) acute infectious disease (flu, tonsillitis) 4) failure to comply with personal hygiene rules
	18. General contraindications to surgical treatment of periodontal diseases include:

	1) blood diseases (hemophilia) 2) pathology of bite 3) acute infectious diseases (flu, tonsillitis) 4) unresolved traumatic occlusion
	19. Relative contraindications to surgical treatment of periodontal diseases include 1) failure to comply with personal hygiene rules 2) active form of tuberculosis 3) oncological pathology in the terminal stage 4) blood disease (hemophilia)
	20. Relative contraindications to surgical treatment of periodontal diseases include 1) active form of tuberculosis 2) blood disease (hemophilia) 3) oncological pathology in the terminal stage 4) pathology of bite
	21. Relative contraindications to surgical treatment of periodontal diseases include 1) active form of tuberculosis 2) blood disease (hemophilia) 3) oncological pathology in the terminal stage 4) the presence of unresolved traumatic occlusion
	22. Relative contraindications to surgical treatment of periodontal diseases include 1) acute infectious diseases (flu, tonsillitis) 2) oncological pathology in the terminal stage 3) blood disease (hemophilia) 4) active form of tuberculosis
	23. The functions of the periodontium include 1) salivary 2) reflex 3) plastic 4) barrier
	24. Flap surgery (according to Widmann-Neumann, 1974) is performed when 1) tooth mobility of grades III-IV 2) periodontal pockets with a depth of no more than 6 mm 3) periodontal pockets with a depth of more than 5 mm 4) acute inflammatory processes
	25. The maximum permissible dose for articaine with a vasoconstrictor is 1) 6 mg/kg 2) 5 mg/kg 3) 7 mg/kg 4) 4 mg/kg
	26. On the radiograph, resorption of the interalveolar septum up to 1/2 signifies 1) severe periodontitis 2) moderate periodontitis 3) mild periodontitis 4) mild periodontosis
	27. On the radiograph, resorption of the interalveolar septum up to 1/3 signifies

	1) severe periodontitis 2) gingivitis 3) mild periodontosis 4) moderate periodontosis 28. One of the goals of surgical treatment of periodontosis is 1) opening and drainage of the purulent focus 2) prevention of inflammation 3) oral cavity sanitation 4) creation of correct gum morphology, facilitating independent oral hygiene 29. The supporting and retaining function of the periodontium is carried out due to 1) ligamentous apparatus of the periodontium, alveolar process and gums 2) the presence of nerve receptors in the periodontal tissues 3) high regenerative capacity 4) the presence of lymphoid and plasma cells 30. The main function of the periodontium is 1) reflex 2) receptor 3) shock-absorbing 4) barrier 31. Periodontosis is 1) a precancerous condition requiring dynamic observation 2) inflammation of the gum tissue without damaging the integrity of the periodontal junction 3) a disease characterized by dystrophic damage to all its tissues 4) inflammation of the oral mucosa 32. A 37-year-old patient, weighing approximately 86 kg, requires anesthesia with 4% articaine with epinephrine 1:100,000. The maximum dose of anesthetic for this patient is 1) 12 carpules 2) 6 carpules 3) 8 carpules 4) 10 carpules 33. According to the classification of surgical techniques by Edward S. Cohen, the group of operations aimed at correcting periodontal pockets includes 1) curettage 2) frenectomy or frenotomy 3) apically displaced (transferred) flap 4) modified Widman flap 34. Postoperative periodontal dressing is applied for 1) 7 days 2) 10 days 3) 5 days 4) 14 days 35. Causes of periodontal disease include 1) diabetes mellitus type 1
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	2) hypertension 3) multiple caries 4) short frenulum of the cheeks, lips, tongue (abnormally attached) 36. Causes of periodontal disease 1) malocclusion, crowded teeth 2) multiple caries 3) bad habits 4) stress 37. A uniform horizontal decrease in the height of the interalveolar septa by more than 1/2 is a radiological sign 1) moderate periodontosis 2) severe periodontitis 3) mild periodontosis 4) mild periodontitis 38. Uniform horizontal decrease in the height of the interalveolar septa to 1/2 is a radiological sign of 1) moderate periodontosis 2) severe periodontosis 3) mild periodontosis 4) mild periodontitis 39. Uniform horizontal decrease in the height of the interalveolar septa to 1/3 is a radiological sign of 1) mild periodontosis 2) moderate periodontosis 3) severe periodontosis 4) moderate periodontitis 40. The area of intervention during periodontal surgery is closed with 1) periodontal dressing 2) Vaseline compress 3) choline salicylate ointment + cetyl citrate 4) chlorhexidine ointment + metronidazole																																												
I	ANSWER LEVEL 3 TEST QUESTIONS (MATCHING QUESTIONS)																																												
	1. Match professional hygiene products with the tooth surface being cleaned <table><tr><th colspan="2">Professional hygiene products</th><th colspan="2">Tooth surfaces</th></tr><tr><td>A.</td><td>Rubber caps and polishing paste</td><td>1.</td><td>chewing</td></tr><tr><td>B.</td><td>Rotating brushes and polishing paste</td><td>2.</td><td>oral</td></tr><tr><td>C.</td><td>Dental floss</td><td>3.</td><td>vestibular</td></tr><tr><td></td><td></td><td>4.</td><td>contact</td></tr></table> 2. Match inflammatory diseases of periodontal tissues and their symptoms <table><tr><th colspan="2">Disease</th><th colspan="2">Symptoms</th></tr><tr><td>A.</td><td>Gingivitis</td><td>1.</td><td>tooth mobility</td></tr><tr><td>B.</td><td>Periodontitis</td><td>2.</td><td>bleeding gums</td></tr><tr><td></td><td></td><td>3.</td><td>exposure of the necks of the teeth</td></tr><tr><td></td><td></td><td>4.</td><td>periodontal pockets</td></tr><tr><td></td><td></td><td>5.</td><td>hyperemia, swelling of the gums</td></tr></table>	Professional hygiene products		Tooth surfaces		A.	Rubber caps and polishing paste	1.	chewing	B.	Rotating brushes and polishing paste	2.	oral	C.	Dental floss	3.	vestibular			4.	contact	Disease		Symptoms		A.	Gingivitis	1.	tooth mobility	B.	Periodontitis	2.	bleeding gums			3.	exposure of the necks of the teeth			4.	periodontal pockets			5.	hyperemia, swelling of the gums
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		6.	destruction of the alveolus
3. List the correct sequence of patient examination for periodontal diseases A) establishing a preliminary diagnosis B) clarification of complaints and anamnesis of the disease C) establishing a final diagnosis D) drawing up a treatment plan E) external examination and examination of the oral cavity			
4. List the correct sequence of patient examination for periodontal diseases A) establishing a preliminary diagnosis B) clarification of complaints and anamnesis of the disease C) establishing a final diagnosis D) drawing up a treatment plan E) external examination and examination of the oral cavity F) special research methods			
5. List the correct sequence of the stages of the plastic surgery of the lower vault of the vestibule of the oral cavity (vestibuloplasty) A) detachment of the mucous flap B) anesthesia C) incision D) placement and fixation of the mucous flap E) skeletonization of the outer cortical plate F) pressure bandage G) anti-inflammatory and hyposensitizing therapy H) local cold			
6. Match the periodontal index and its definition			
Periodontal index		Definition	
A) Schiller-Pisarev test		1. Gingival bleeding index	
B) RMA		2. The need for treatment of periodontal diseases	
C) GI		3. Detection of hidden inflammatory process of the gums	
D) CPITN		4. Assessing the severity of the inflammatory process in the gums	

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.V.EC.04.05 Surgical methods of periodontal treatment** course

Case Study No. 1

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.03	Dentistry for foreign students (English-language program)
C	PC-2	ability to administer and apply modern methods and/or digital technologies to treat dental patients as well as monitor the effectiveness and safety of the treatment

F	A/02.7	Prescribing and monitoring the effectiveness and safety of non-pharmacological and pharmacological therapies
I		READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS 1. Patient K., 20, complains of pain and bleeding gums while brushing her teeth and while eating. These complaints began two years ago. She used Rotokan and noted improvement, but the complaints recurred. Examination of the oral cavity revealed a deep bite. The gums are swollen, hyperemic, and bleeding. False periodontal pockets are present, and saliva is viscous. All teeth on the oral side have mineralized plaque.  1. Indices that should be defined: 1) OHI-S 2) Fedorova- Volodkina 3) PMA 4) CPITN 2. Make a diagnosis. 1) catarrhal gingivitis 2) hypertrophic gingivitis 3) Vincent's ulcerative necrotic gingivitis 4) periodontitis 3. What pathology should be used for differential diagnosis? 1) gum recession 2) periodontitis 3) periodontosis 4. Treatment includes 1) professional hygiene 2) antibacterial local therapy 3) closed curettage periodontal pockets 4) dental splinting 5. It is advisable to use for treatment 1) anti-inflammatory toothpastes 2) soft toothbrush 3) rinsing with herbal decoctions 4) injections Answers: 1-1,3,4; 2-1; 3-2; 4-1,2; 5-1,2,3 2. Patient V., 19 years old, complains of enlarged gums in the area of the front teeth of both jaws , bleeding, and pain while eating. History: complaints appeared at the age of 13. Objective examination data: The level of attachment of the frenulum of the upper lip is the marginal gum.

On examination of the oral cavity: Multiple soft dental plaque, interdental papillae, marginal, alveolar gingiva is hypertrophied, dark red, painful to the touch, bleeding, there are false periodontal pockets.



1. What risk factor for the development of this pathology is present?

- 1) pathological bite, hormonal changes
- 2) crowding of teeth
- 3) lack of regular oral hygiene
- 4) heredity

2. Conduct additional examination methods

- 1) Index assessment of oral health
- 2) Serological analysis
- 3) Cytological analysis
- 4) OPTG

3. Make a diagnosis

- 1) pubertal gingivitis
- 2) catarrhal gingivitis
- 3) periodontitis
- 4) ulcerative gingivitis

4. Make a treatment plan

- 1) professional hygiene
- 2) frenulotomy
- 3) gingivotomy
- 4) antibacterial therapy

5. Specify the causes of this disease

- 1) Puberty
- 2) Malocclusion
- 3) Poor oral hygiene
- 4) Blood disease

Answers: 1-1; 2-1; 3-1; 4-1,2,4; 5-1,2,3.

3. Patient M., 24 years old, complained of bleeding gums in the area of tooth 2.5 and food getting stuck.

History: a year ago, restoration of the crown of tooth 2.5 was performed.

Upon examination, the gingival papillae of tooth 2.5 are swollen, hyperemic, and bleeding; the gingival junction is intact, IGR-U = 1.0. There is a filling on the medial, chewing, and distal surfaces of tooth 2.5.



1. Make a diagnosis
 1. localized gingivitis
 2. generalized gingivitis
 3. localized periodontitis
 4. gum recession.
2. Cause of the disease
 1. lack of a contact point during restoration
 2. the seal is not tightly applied
 3. puberty
 4. poor hygiene
3. Conduct differential diagnostics.
 1. generalized gingivitis
 2. localized periodontitis
 3. gum recession.
4. Prescribe treatment
 1. replacing the seal, creating a contact point
 2. cryodestruction
 3. flap surgery

Answers: 1-1; 2-1, 3-2, 4-1

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.