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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
Head of the Department
of Foreign Languages
_____ / Rudenko E.E. /
"11th" of April 2025

COLLECTION OF ASSESSMENT TOOLS
Б1.В.07 Foreign language
of the basic educational program
of Higher Education

Specialty	**31.05.03 Dentistry** **for international students (in English)** (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)
Department	of Foreign Languages

Vladivostok, 2025

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 international students (in English), profile 02 "Healthcare" (in the field of providing health care in patients with dental pathology).

(BEP HE for the 31.05.03 Dentistry for international students (in English) 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**	**Tests**
		Interview Questions
		Mini-Case Studies
2	**Interim assessment**	**Tests**
		Interview Questions
		Mini-Case Studies

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

Test questions

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**ANSWER LEVEL 1 TEST QUESTIONS (ONE CORRECT ANSWER)**
		01 Select the grammatically correct option: +А) To get a clear clinical picture, the doctor asked the patient to make a chest X-ray. Б) To get a clear clinical picture, the doctor ask the patient to make a chest X-ray. В) To get a clear clinical picture, the doctor asks the patient to make a chest X-ray. Г) To get a clear clinical pictures, the doctor asked the patient

		to make a chest X-ray. **02 Select the grammatically correct option:** +А) In the control group receiving placebo improvement was noted at all three people. Б) In the control group receiving placebo improvement were noted at all three people. В) In the control group receive placebo improvement was noted at all three people. Г) In the control group receiving placebo improvement was noted at three people. **03 Select the grammatically correct option:** +А) Already on the third day, the boy was a marked improvement in the general condition. Б) Already on the third day, the boy was a mark improvement in the general condition. В) Already on the third day, the boy was a marked improvement in the general conditions. Г) Already on the third days, the boy was a marked improvement in the general condition. **04 'Local inflammation is followed by various reactions in other parts of the body' translates into Russian as:** +А) Местное воспаление сопровождается различными реакциями в разных частях тела. Б) В разных отделах тела может возникнуть местное воспаление. В) Различные реакции возникают в разных отделах организма при местном воспалении. Г) Различные реакции сопровождают местное воспаление в разных отделах организма. **05 'A benign neoplasm does not metastasize to distant sites' translates into Russian as:** +А) Доброкачественное новообразование не метастазируется в отдалённые места. Б) Злокачественная неоплазия производит метастазы. В) В отдалённых тканях не обнаружено злокачественной неоплазии. Г) Качественная неоплазия не может образовываться в некоторых местах. **06 'A new medicine must undergo extensive testing in the laboratory' translates into Russian as:** +А) Новый лекарственный препарат должен пройти тщательное лабораторное тестирование. Б) Новый лекарственный препарат нуждается в тщательном лабораторном исследовании. В) Новое лекарство необходимо внимательно проверить в лаборатории. Г) Новое лекарство следует внимательно протестировать в лаборатории.

		07 'The right lung is slightly wider, shorter, and taller than the left' translates into Russian as: +А) Правое лёгкое слегка шире, короче и выше чем левое. Б) Правое лёгкое не на много шире, короче и выше чем левое. В) Правое лёгкое не на много шире, короче и выше чем левое. Г) Правое лёгкое не отличается по размерам от левого лёгкого.
		ANSWER LEVEL 2 TEST QUESTIONS (MULTIPLE CORRECT ANSWERS)
		08 Every _____ is inserted into the jaw by its ____ A) gum +B) tooth C) pulp +D) root **09 The biting surface of _____ and premolars is called the _____** +A) molars B) incisal edge +C) occlusal surface D) buccal surface **10 The _____ is part of the maxilla and forms the roof of the _____** +A) hard palate B) mandible C) muscles of mastication +D) mouth **11 Pulpitis occurs when _____ extends through the dentine to reach the _____** A) mouth +B) caries +C) pulp D) tongue **12 Enamel and _____ are composed mainly of calcium and _____** A) fluor B) fluoride +C) dentine +D) phosphorus **13 The _____ is the insensitive white covering of the crown and is the hardest substance in the _____** +A) enamel +B) body C) crown D) pulp chamber **14 Every tooth consists of a crown, a _____ and one or more**

_____
+A) neck
+B) roots
C) crown
D) pulp

15 Chewing is brought about by rotary movements of the mandible which swings from side to side, crushing food between the cusps of opposing ____ and
+A) molars
+B) premolars
C) teeth
D) tooth

ANSWER LEVEL 3 TEST QUESTIONS (MATCHING QUESTIONS)

16. Match the following

1) the amelogenesis	A) амелогенез
2) the form of the skull	B) форма черепа
3) the ventral part of the skull	C) развитие зубной эмали
	D) вентральная часть черепа

Correct answers: 1 – A, C: 2 – B: 3 – D

17. Match the following

1) the cusp	A) острие зуба
2) the operation on the heart	B) операция на сердце
3) the smooth muscle	C бугорок коронки зуба
	D) гладкая мышца

Correct answers: 1 – A, C: 2 – B: 3 – D

18. Match the following
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1) the caries	A) кариес зуба
2) the toes in the lower limb	B) пальцы на нижней конечности
3) the fingers in the upper limb	C) костоеда
	D) пальцы на верхней конечности

Correct answers: 1 – A, C: 2 –B: 3 – D

19. Match the following

1) the dental deposit	A) налёт на зубах
2) under involuntary control	B) под непроизвольным контролем
3) by means of muscles	C) зубной камень
	D) с помощью мышц

Correct answers: 1 – A, C: 2 – B: 3 – D

20. Match the following

1) dysgnathia	A) дисгнатия
2) the well-oxygenated	B) обогащённая

		blood	кислородом кровь
		3) the ascending aorta	C) нарушение прикуса
			D) восходящая аорта
		Correct answers: 1 – A, C: 2 – B: 3 – D	

Assessment criteria

"Very good" – over 80% correct answers of questions of every level
"Good" – 70-79% correct answers of questions of every level
"Satisfactory" – 55-69% correct answers of questions of every level
"Unsatisfactory" – less than 55% correct answers of questions of every level

Interview questions

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**ANSWER THE QUESTIONS** **01 Expand on the following:** 1. The kidney does not manufacture the elements which compose urine. 2. The urinary function is that of excretion. **Correct answer.** It has long been known that the kidney does not manufacture fully the elements which compose the urine. It is known only to extract them unchanged from the blood plasma where, with very few exceptions, they already exist. In other words, the urinary function is the excretion, but the kidney is found to exercise a choice among the numerous organic substances present in the circulating blood: Some substances, such as the proteins, are wholly retained in the organism, although the blood plasma contains a high concentration of them (70 to 80 grams per liter). Others are entirely taken away by the kidney as well as eliminated through the urine: this is the case with certain foreign bodies such as penicillin or streptomycin as well, which the organism eliminates by means of the kidney. Most of the constituents of the plasma are excreted in the urine in variable proportions; the quantities thus taken away by the kidney are not fixed and vary even from day to day for each substance eliminated. If the amount of salt absorbed is very great or very small, the concentration of salt in the blood and the total amount of salt in the individual as well will not vary at all; if practically no salt is absorbed, no salt will be eliminated; if much salt is absorbed its rate of elimination will rise, until after a few days it exactly counterbalances the excess taken in; the quantity of salt taken away by the kidney will be equal to the excess received.

		02 Expand on the following: 1. It is advisable to study the movements of the stomach by means of X-rays. 2. The pyloric portion consists of the pyloric vestibule. 3. When food has been swallowed some of it passes to the pyloric part of the stomach. 4. Peristalsis begins near the middle of the stomach. 5. The contractions last throughout the whole period of gastric digestion. **Correct answer.** It is advisable to study the movements of the stomach by direct observation by means of the X-rays. In order to make the shape of the stomach visible the food — bread and milk — is mixed with a quantity of barium sulphate. The presence of this substance does not interfere with the processes of digestion, but renders the gastric contents to the Rontgen rays. In the human stomach the term fundus is limited to that part of the stomach situated above the cardiac orifice (in the erect position). The body of the stomach is marked off from the pyloric part by the incisura angularis on the lesser curvature represented in many animals by a strong «transverse band». The pyloric portion consists of the pyloric vestibule (or atrium) and the pyloric canal, the latter being a tubular portion with thick muscular walls about 3 cm in length, especially well-marked in children. When food has been swallowed (in the erect position) its weight is sufficient to overcome the resistance of the contracted gastric wall and some of it rapidly passes to the pyloric part. The remainder stays in the body of the stomach. It is due to constant pressure on its contents, that is forced them towards the pylorus. Peristalsis begins almost at once, each constriction starting near the middle of the stomach, and deepening as it slowly progresses towards the pylorus. These waves succeed one another, so that the pyloric part may present a series of constrictions. Their effect is to force towards the pylorus the food which has been mixed with gastric juice. The longer the pylorus remains -closed the longer the food cannot escape and therefore is squeezed back, forming an axial reflux stream towards the body. These contractions last throughout the whole period of gastric digestion, and become more marked as it proceeds. Due to their action a thorough mixture of food and gastric juice results. Movements of the stomach may be observed even on a stomach which has been excised and placed in warm water-salt solution. They must therefore have their origin in the walls of the stomach itself. **03 Expand on the following:** 1. The spinal canal contains a cord. 2. The diaphragm divides the trunk into two cavities. 3. The alimentary canal transverses them. 4. The oesophagus opens into the pharynx. **Correct answer.** The whole body is bilaterally symmetrical. There are special bones in the trunk which are bound together by a very strong and tough substance into a long column, which lies nearer the dorsal (or back) than ventral (or front) part of the body. The bones are called the vertebrae. They separate a long narrow canal, the spinal canal, which lies upon the dorsal side. The

		spinal canal contains a long white cord (the spinal cord) which is an important part of the nervous system. The diaphragm divides the ventral chamber into two cavities, the thorax and abdomen. The alimentary canal transverses these cavities from one end to the other and pierces the diaphragm. In the abdomen there are also two kidneys, which lie against each side of the vertebral column, the ureters, the bladder, the liver, the pancreas and the spleen. The thorax encloses the heart and two lungs. The latter lie one on each side of the heart. The dorsal chamber, or cavity of the skull, opens into the spinal canal. It contains the brain, which is continuous with the spinal cord. The brain and the spinal cord together constitute the cerebrospinal system. The ventral chamber, or cavity of the face encloses mouth and pharynx, into which the upper end of the alimentary canal (gullet or oesophagus) opens. **04 Describe the causes and symptoms of tooth decay, the treatment methods for tooth decay, and ways to prevent it.** **Correct answer.** Dental caries, also referred to as cavities and tooth decay, are both common and preventable. We've all probably already experienced or will get at least one cavity at some point in our lives. Here's what you need to know about dealing with dental caries, treating them, and preventing them. Causes of dental caries. When we eat, bacteria break down any leftover food that's still in our mouths and secretes acid as a result. These acids attack the enamel (the outer layer of the tooth), weaken the tooth, and can cause gum disease. Dental caries can appear in two forms: occlusal caries: form on the area right on top of the tooth and are easy to spot; interproximal caries: form in between teeth and can go unnoticed in their initial stages. Not properly cleaning teeth is often a primary cause of dental caries. Brushing, flossing, and rinsing removes the harmful bacteria, acid, and plaque buildup that contributes to cavities. Symptoms of dental caries. Most people are susceptible to dental caries, especially those of us who consume foods heavy in sugars or carbohydrates. Here are the common signs to look for if a cavity begins to form: weakened enamel; increased sensitivity; small holes on the surface of the tooth; discoloration around a specific spot; pits in the affected tooth; persistent toothache. As dental caries take shape, enamel demineralizes and the tooth loses its natural ability to strengthen and protect the calcium and phosphate structure. Acid then comes into contact with the affected tooth, penetrating it and destroying it from the inside out. Treating dental caries. Dental caries are easily treatable by your dentist. Depending on the stage of decay, the following four treatments are most common in taking care of a cavity: Fillings. Most common treatment for cavities, your dentist will drill into the affected tooth and remove the decayed portion before filling in the now-empty space. Crowns. If most of the tooth has begun to decay then your dentist will fit you for a crown to cover the remaining part of the tooth and protect it from further damage. Root canal. If the decay reaches your nerves, then a procedure is undertaken to remove damaged or

		dead nerves to prevent further impairment and infection. Extraction: In severe cases, or baby teeth, the affected tooth is completely removed by the root. For adults, the decay damage may be beyond repair, and to prevent infection your dentist will simply pull out the entire tooth. If this happens, options for preserving your smile include partial dentures, bridges, and implants. Preventing dental caries. Though dental caries can lead to severe damage and sometimes tooth loss, they are highly preventable. Following a good oral care routine is often your best bet in ensuring cavities don't take root: brush twice daily to remove tartar and plaque buildup; switch from a manual to an electric toothbrush for a more complete, tooth-by-tooth clean; floss at least once a day to get rid of any buildup between teeth and along the gum line; incorporate a rinse into your daily regimen to better remove any leftover particles; use fluoride products to reduce acid production such as Crest Pro-Health toothpaste; be sure to visit your dental professional at least twice a year for professional cleanings and checkups. With proper oral care and dental checkups, you'll stay a step ahead of dental caries for healthier teeth and gums. **05 Answer the questions: What is maxillofacial surgery? What are the types of maxillofacial surgery? How to prepare for undergoing maxillofacial surgery? What are some important aspects of recovery after maxillofacial surgery? What foods are best to eat afterwards?** **Correct answer.** Oral surgery refers to any surgical procedure performed in or around your mouth and jaw, usually by a dental specialist who's trained to perform certain kinds of oral surgeries. There are many types of oral surgery, including surgical procedures such as a tooth removal or a root canal. Some oral surgeries involve the repositioning of the jaw. In other instances, oral surgery may involve the removal of a tumor. Oral surgeries might be performed by any one of a number of different kinds of dental specialists, including endodontists, periodontists, and prosthodontists. Some of the most common surgeries for teeth and jaw include: Impacted wisdom teeth; Gum graft; Tooth implants; Maxillofacial surgery; Root canal; Jaw and teeth repair following an injury. For tooth and jaw procedures that go beyond the expertise of a general dentist, you might need oral surgery. If your wisdom teeth are impacted, for example, removing them may require you see an oral surgeon. If you suffer from gum disease and have to have a gum graft, you'd be referred to a periodontist who performs those types of oral surgeries. If you require oral surgery, your general dentist will talk to you about it and refer you to the right provider. Prepare for an oral surgery in the same way you would for any serious medical procedure, depending on the type of surgery. And always make sure to follow your dentist's direction. Start by making sure that the space you're returning home to is clean and neat, so you're comfortable for at least a couple of days, if necessary. Set up your bed so that, if need be, you can sit at an incline. Follow the pre-surgery instructions your oral surgeon

		gives you. Typically you will be asked to refrain from eating or drinking anything in the 8-10 hours before your surgery. Arrange for transportation back home, if necessary. Talk to your oral surgeon about what kind of anesthesia you'll be getting. Some types of anesthesia can inhibit your ability to drive. Depending on the type of oral surgery you're having you may have a topical or local anesthetic. If you are having an IV anesthesia, you'll need someone to drive you home. What are some important aspects of oral surgery recovery? Your oral surgery recovery is of critical importance to the outcomes you and your dentists have discussed. Don't smoke or drink alcohol afterward—they can slow your healing process. If you're in any pain from swelling, use an ice pack to reduce inflammation. Rather than brushing your teeth, rinse your mouth with salt water every few hours to kill off any bacteria. Be patient with yourself. Depending on the type of oral surgery you've had, recovery can range from 48 hours to 1 month. Make sure you follow up with your dentist as directed. Soft foods eaten at room temperature are the ideal foods to eat after oral surgery. Avoid consuming anything through a straw and don't eat any hard, crunchy, or chewy foods. Oral surgeries are common and can range from simple to complex. It's important to be prepared and to properly manage your recovery. Set up your recovery space for optimum comfort, make sure you've arranged for someone to drive you home, and give yourself a minimum of 2 days to heal. In that time, consume soft foods and regularly rinse your mouth with salt water. **06 Outline what "root canal filling" is, whether root canal fillings are always successful, why root canal fillings cost considerably more than regular fillings, if root canal fillings cause pain. My dentist says I need a root canal filling but my tooth does not hurt, so why should I worry if I do not want a root canal filling, do I have other options?** **Correct answer.** A root canal filling is a way of keeping a tooth, once the live part (the pulp) has become irreversibly damaged. The pulp is a mixture of nerve fibres and tiny blood vessels that can become very inflamed (giving tooth ache) or die off (causing an abscess). This can happen either in the presence of tooth decay or after a heavy blow to the tooth. The aim of the procedure is to painlessly remove the damaged pulp, under local anaesthetic, and remove any infection that may be present. Once the canals have been cleaned and shaped they are filled with a special filling material. This work is usually carried out over two visits of up to 90 minutes a time. Once the root canal filling is in place, the crown of the tooth is restored with a large filling or cast restoration. Root canal fillings are a very successful treatment, with success rates well over 90% for many teeth. Obviously some cases do fail, most commonly when teeth are either very broken down or have an unusually complex root structure. Failure can also occur when the root canals are infected with bacteria that are resistant to the anti-bacterial pastes that are used. A root canal filling takes much longer than

		a routine filling, usually over two visits and the fees reflect this. As well as the extra time, root canal fillings also require a great deal of specialist equipment and extra training, which adds to the overall cost. With careful use of local anaesthetic a root canal filling can be completely painless from start to finish. When a root canal filling is being done to a tooth that has been causing toothache, it will take the pain away and leave the patient feeling much better. When a tooth has died off there is often no pain from it, usually because the pulp has been destroyed. Although there is no pain, there will be infection present that will lead to an abscess. Early treatment of the tooth will remove this infection before it worsens and will prevent the abscess from becoming a problem. Once the pulp of the tooth has become irreversibly damaged then a root canal filling is the only way of keeping the tooth. The only alternative treatment is to extract the tooth. Before making a decision on whether to save a tooth or not, any patient should consider how much it would cost to replace the tooth, and how this work will affect the teeth round about. Keeping the tooth with a root canal filling is usually the cheapest, least destructive option. **07 Describe the stages involved in manufacturing dentures.** **Correct answer.** Dentures are made in a dental laboratory, on models of the jaws produced by pouring Plaster of Paris into an impression of the patient's jaw. The impression is taken in an impression tray which is filled with impression material and held in the mouth till set. Having obtained models of each jaw, they must be mounted in the same relationship to each other as they are in the mouth; i.e. the upper and lower models are mounted in such a position that the distance between them, vertically and horizontally, is exactly the same as that between the jaws when the mouth is at rest. In order to achieve this, bite blocks are constructed in the laboratory. The bite block consists of a baseplate and bite rim. A baseplate is a temporary plate made of acrylic, shellac or wax, whilst the bite rim is a composition or wax rim fixed on the baseplate in the same position as the teeth would be. In the surgery bite blocks are worn whilst the normal relationship of the jaws at rest is recorded. This stage is usually referred to as 'taking the bite'. The models are then returned to the laboratory where they are mounted on an articulator. This is essentially a hinged mechanism for keeping models in their correct relationship as obtained at the bite stage. It can open and close to reproduce some of the movements of the jaws. Once the models are mounted on an articulator the bite rims are removed from the baseplates, and the false teeth fixed on, with wax, in their place. The baseplates with teeth attached are then fitted in the surgery to see that they bite together correctly and are of satisfactory appearance. This stage is called the try-in. As the teeth are only embedded in wax, any alterations in arrangement or shade of the teeth can easily be made at this stage. These 'waxed-up' dentures are now returned to the laboratory to be made into finished dentures, which are then fitted in the surgery.

08 Describe the stage of determining centric occlusion.
Correct answer.
The nurse sets out models, bite blocks, sheets of wax, wax knife and a shade guide. The patient is provided with a bib and mouth-wash. The baseplates are fitted and trimmed if necessary to make them comfortable. The bite rims are reduced or increased in height until the jaws are the correct distance apart when the bite blocks are in contact. Grooves are cut in the rims and a softened layer of wax is then bitten between them. This squeezes wax into the grooves and permanently records the correct relationship of the jaws at rest. Marks are also made on the upper bite rim to indicate the midline of the face and rest position of the upper lip. Best results are obtained if dentures are made on an anatomical articulator although this entails extra surgery time at the bite stage, and in the laboratory. The extra steps required when such an articulator is used are for indicating the movements of the jaws during mastication; and consist of the face bow and protrusive bite registrations. A face bow is an accessory part of the articulator for recording the position of the upper bite block relative to the mandibular condyles. The protrusive bite is taken by the patient thrusting his jaw forward and biting on to another layer of wax between the bite blocks. The classical method mentioned above has its disadvantages in defining central occlusion. That is why the creative thought of dentists has been searching some new, more perfect ones. Finally the shade of artificial teeth to be used in the finished dentures is selected from a shade guide.

09 Describe the gas exchange process in the lungs
Correct answer.
The exchange of gases takes place in the alveoli of the lungs. Oxygen passes into the blood and carbon dioxide passes into the atmospheric air. The exchange of oxygen and carbon dioxide is due to the difference of partial pressure of these gases in the alveolar air and in the venous blood. The partial pressure of oxygen in the alveolar air is higher than in the venous blood. The transfer of oxygen from the atmospheric air into the blood is due to this difference of pressures. The partial pressure of carbon dioxide is higher in the venous blood and this enables carbon dioxide to pass from the blood into alveolar air. The process of transfer of gases into the medium with a lower partial pressure is called diffusion. Hemoglobin is that substance of the blood which transfers oxygen in the blood. The oxygen capacity of the blood averages to 18-20 millilitres (ml) per 100 gr of blood. Carbon dioxide is transferred in combination with hemoglobin and as bicarbonic salts. The combination of oxygen and hemoglobin is called oxyhemoglobin, that of carbon dioxide and hemoglobin — carbohemoglobin.

10 Describe the regulation of breathing by the nervous system.

		Correct answer. Respiration is subjected to the control of the cerebral cortex; this being demonstrated by the fact that a person can voluntarily hold his breath for a very short time or change both the rate and depth of respiration. Cortical regulation of respiration is also evident in the acceleration of respiration during emotional states. Protective acts, such as coughing and sneezing, are associated with respiration. Both of them are performed reflexly; the centres of the reflexes are situated in the medulla oblongata. Nervous control of breathing. The muscles of breathing have no independent or automatic rhythm, they contract only responding to impulses from the brain down the spinal cord. These impulses arise and are coordinated in a specialised area in the brain, the respiratory centre, which is in the medulla. The medulla is at the base of the brain and is a bulbous continuation of the spinal cord within the skull. The respiratory centre has to adjust the volume of air breathed and to maintain a uniform alkalinity of the blood; the centre effects the reciprocal alteration both of inspiration and expiration.

Assessment criteria
"Very good" – over 80% correct answers of questions of every level
"Good" – 70-79% correct answers of questions of every level
"Satisfactory" – 55-69% correct answers of questions of every level
"Unsatisfactory" – less than 55% correct answers of questions of every level

Standardized case studies and checklists for the **Б1.В.07 Foreign language** course

Case Study No. 1

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Pulpitis occurs when caries extends through the dentine to reach the pulp. The pulp is then said to be exposed and there is an increased blood flow through the apical foramen into the pulp. Swelling cannot occur, however, as the pulp is confined within the rigid walls of the root canal and pulp chamber. Pressure builds up instead and causes intense pain. A much more important result of this pressure, however, is compression of the blood vessels passing through the tiny apical foramen. This cuts off the blood supply and causes death of the pulp. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. But the respite is short as pulp death leads to another

		very painful condition called alveolar abscess. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
Q	1	Question: Find the equivalents of '*кариес распространяется через дентин и достигает пульпы*'; '*пульпа ограничена жёсткими стенками корневого канала и полости пульпы*' in the text: 1. caries extends through the dentine to reach the pulp 2. the dentine to reach the pulp caries extends through 3. pulp is confined within the rigid walls of the root canal and pulp chamber 4. of the root canal and pulp chamber pulp is confined within the rigid walls
Q	2	Question: Summarize the cause of pulpitis in one sentence using the text above: 1. Pulpitis occurs when caries extends through the dentine to reach the pulp. 2. Pulpitis occurs when caries extends through the dentine to reach the tooth chamber. 3. Pulpitis occurs when caries extends through the dentine to reach the root canal. 4. Pulpitis occurs when caries extends through the dentine to reach the apical foramen.
Q	3	Question: Translate the following sentence into Russian: '*When the pulp dies, its nerves die too, and the severe toothache stops abruptly*' 1. Когда пульпа умирает, умирают и её нервы, и резко прекращается сильная зубная боль. 2. Когда пульпа умирает, умирают и её нервы, и резко прекращается зубная боль. 3. Когда пульпа умирает, умирают и её нервы, и резко прекращается сильная боль. 4. Когда пульпа умирает, прекращается зубная боль.
Q	4	Question: Summarize (in a few sentences) why the reprieve when severe toothache stops abruptly after pulp necrosis is short-lived using the text above. 1. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. 2. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. But the respite is short as pulp death leads to another very painful condition called alveolar abscess. 3. Pulpitis maybe acute or chronic. 4. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
Q	5	Question: Using examples from the text above, explain why pulpitis doesn't cause swelling. 1. Swelling cannot occur, however, as the pulp is confined within the rigid walls of the root canal and pulp chamber. 2. The pulp is then said to be exposed and there is an increased

		blood flow through the apical foramen into the pulp. 3. Pressure builds up instead and causes intense pain. 4. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.

Case Study No.1 Checklist

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Pulpitis occurs when caries extends through the dentine to reach the pulp. The pulp is then said to be exposed and there is an increased blood flow through the apical foramen into the pulp. Swelling cannot occur, however, as the pulp is confined within the rigid walls of the root canal and pulp chamber. Pressure builds up instead and causes intense pain. A much more important result of this pressure, however, is compression of the blood vessels passing through the tiny apical foramen. This cuts off the blood supply and causes death of the pulp. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. But the respite is short as pulp death leads to another very painful condition called alveolar abscess. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
Q	1	Question: Find the equivalents of '*кариес распространяется через дентин и достигает пульпы*'; '*пульпа ограничена жёсткими стенками корневого канала и полости пульпы*' in the text: 1. caries extends through the dentine to reach the pulp 2. the dentine to reach the pulp caries extends through 3. pulp is confined within the rigid walls of the root canal and pulp chamber 4. of the root canal and pulp chamber pulp is confined within the rigid walls
A		Correct answer: 1. caries extends through the dentine to reach the pulp 3. pulp is confined within the rigid walls of the root canal and pulp chamber
R2	Very good	Full answer given (1, 3)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 1, 2 "Satisfactory" grade (2 mistakes were made) – 2, 3, 4
R0	Fail	Incorrect answer given (2, 4)

Q	2	Question: Summarize the cause of pulpitis in one sentence using the text above: 1. Pulpitis occurs when caries extends through the dentine to reach the pulp. 2. Pulpitis occurs when caries extends through the dentine to reach the tooth chamber. 3. Pulpitis occurs when caries extends through the dentine to reach the root canal. 4. Pulpitis occurs when caries extends through the dentine to reach the apical foramen.
A		Correct answer: 1. Pulpitis occurs when caries extends through the dentine to reach the pulp.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 1, 2 "Satisfactory" grade (2 mistakes were made) – 1, 2, 3
R0	Fail	Incorrect answer given (2, 3, 4)
Q	3	Question: Translate the following sentence into Russian: '*When the pulp dies, its nerves die too, and the severe toothache stops abruptly*' 1. Когда пульпа умирает, умирают и её нервы, и резко прекращается сильная зубная боль. 2. Когда пульпа умирает, умирают и её нервы, и резко прекращается зубная боль. 3. Когда пульпа умирает, умирают и её нервы, и резко прекращается сильная боль. 4. Когда пульпа умирает, прекращается зубная боль.
A		Correct answer: 1. Когда пульпа умирает, умирают и её нервы, и резко прекращается сильная зубная боль.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 1, 2 "Satisfactory" grade (2 mistakes were made) – 1, 2, 3
R0	Fail	Incorrect answer given (2, 3, 4)
Q	4	Question: Summarize (in a few sentences) why the reprieve when severe toothache stops abruptly after pulp necrosis is short-lived using the text above. 1. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. 2. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. But the respite is short as pulp death leads to another very painful condition called alveolar abscess. 3. Pulpitis maybe acute or chronic. 4. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
A		Correct answer: 2. When the pulp dies, its nerves die too, and the severe toothache stops abruptly. But the respite is short as pulp death

		leads to another very painful condition called alveolar abscess. 4. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
R2	Very good	Full answer given (2, 4)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 2, 3 "Satisfactory" grade (2 mistakes were made) – 1, 2, 3
R0	Fail	Incorrect answer given (1, 3)
Q	5	Question: Using examples from the text above, explain why pulpitis doesn't cause swelling. 1. Swelling cannot occur, however, as the pulp is confined within the rigid walls of the root canal and pulp chamber. 2. The pulp is then said to be exposed and there is an increased blood flow through the apical foramen into the pulp. 3. Pressure builds up instead and causes intense pain. 4. Pulpitis maybe acute or chronic. It has many causes, apart from caries, but always ends in pulp death.
A		Correct answer: 1. Swelling cannot occur, however, as the pulp is confined within the rigid walls of the root canal and pulp chamber.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 1, 2 "Satisfactory" grade (2 mistakes were made) – 1, 2, 3
R0	Fail	Incorrect answer given (2, 3, 4)

Case Study No. 2

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Fillings inserted in wet cavities are always unsatisfactory. No matter what material is used the cavity must be perfectly dry during insertion. Linings and cements cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination. Different methods are used to control saliva. Rubber dam is the best method of all. Rubber dam is a thin sheet of rubber which is placed over a tooth to isolate it from the rest of the mouth. A rubber dam punch is used to punch a

		small hole in the rubber, which is then fitted on so that the tooth projects through the hole. The rubber dam is kept in place by a rubber dam clamp which is fixed on the tooth with rubber dam clamp forceps. Finally a rubber dam frame is used to support the sheet of rubber. A napkin is placed between the patient's chin and the rubber to make it more comfortable; and a saliva ejector is provided. Floss silk is used to work the rubber between the teeth. Rubber dam may be applied to any number of teeth. It enables the operator to keep the tooth dry and sterile, and prevents bits of filling material, debris or small instruments falling into the patient's mouth. Ideally it should be used for all fillings. The two main uses of rubber dam are: to maintain a sterile field in root canal therapy; and during insertion of silicate cement to avoid weakness and porosity caused by saliva contamination. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower molars.
Q	1	Question: Find the equivalents of *" для поддержания стерильности при терапии корневых каналов'; 'чтобы избежать слабости и пористости, вызванных загрязнением слюной "*: 1. to maintain a sterile field in root canal therapy 2. in root canal therapy to maintain a sterile field 3. to avoid weakness and porosity caused by saliva contamination 4. by saliva contamination to avoid weakness and porosity caused
Q	2	Question: Summarize why fillings placed in damp cavities are always unsatisfactory in a few sentences using the text above. 1. Linings cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination. 2. No matter what material is used the cavity must be perfectly dry during insertion. 3. Fillings inserted in wet cavities are always unsatisfactory. 4. Linings and cements cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination.
Q	3	Question: Translate the following sentence into Russian: '*The two main uses of rubber dam are: to maintain a sterile field in root canal therapy; and during insertion of silicate cement to avoid weakness and porosity caused by saliva contamination*' 1. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать слабости и пористости, вызванных загрязнением слюной. 2. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать слабости, вызванной загрязнением слюной. 3. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время

		введения силикатного цемента, чтобы избежать пористости, вызванной загрязнением слюной. 4. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать загрязнения слюной.
Q	4	Question: Summarize purpose of using silk thread in a few sentences using the text above. 1. A napkin is placed between the patient's chin and the rubber to make it more comfortable; and a saliva ejector is provided. 2. A napkin is placed between the patient's chin and the rubber to make it more comfortable. 3. A napkin is placed between the patient's chin and the rubber; and a saliva ejector is provided. 4. A napkin is placed between the patient's chin and the rubber dam to make it more comfortable; and a saliva ejector is provided.
Q	5	Question: Using examples from the text above, explain why rubber dam clamps often used separately. 1. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower molars. 2. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling upper molars. 3. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower premolars. 4. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling upper premolars.

Case Study No.2 Checklist

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for international students (in English)
C	UC-4	Is able to use modern communication technologies for academic and professional interaction using native and foreign language(s)
F	A/05.7	Implementation of disease prevention measures for the adult population groups based on age and health status, as well as health and hygiene education of the population and monitoring their effectiveness
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Fillings inserted in wet cavities are always unsatisfactory. No matter what material is used the cavity must be perfectly dry during insertion. Linings and cements cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination. Different methods are used to control saliva. Rubber dam is the best method of all. Rubber dam is a thin sheet of rubber which is placed over a tooth to isolate it from

		the rest of the mouth. A rubber dam punch is used to punch a small hole in the rubber, which is then fitted on so that the tooth projects through the hole. The rubber dam is kept in place by a rubber dam clamp which is fixed on the tooth with rubber dam clamp forceps. Finally a rubber dam frame is used to support the sheet of rubber. A napkin is placed between the patient's chin and the rubber to make it more comfortable; and a saliva ejector is provided. Floss silk is used to work the rubber between the teeth. Rubber dam may be applied to any number of teeth. It enables the operator to keep the tooth dry and sterile, and prevents bits of filling material, debris or small instruments falling into the patient's mouth. Ideally it should be used for all fillings. The two main uses of rubber dam are: to maintain a sterile field in root canal therapy; and during insertion of silicate cement to avoid weakness and porosity caused by saliva contamination. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower molars.
Q	1	Question: Find the equivalents of *" для поддержания стерильности при терапии корневых каналов'; 'чтобы избежать слабости и пористости, вызванных загрязнением слюной "*: 1. to maintain a sterile field in root canal therapy 2. in root canal therapy to maintain a sterile field 3. to avoid weakness and porosity caused by saliva contamination 4. by saliva contamination to avoid weakness and porosity caused
A		Correct answer: 1. to maintain a sterile field in root canal therapy 3. to avoid weakness and porosity caused by saliva contamination
R2	Very good	Full answer given (1, 3)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 1, 2, 3 "Satisfactory" grade (2 mistakes were made) – 1, 2
R0	Fail	Incorrect answer given (2, 4)
Q	2	Question: Summarize why fillings placed in damp cavities are always unsatisfactory in a few sentences using the text above. 1. Linings cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination. 2. No matter what material is used the cavity must be perfectly dry during insertion. 3. Fillings inserted in wet cavities are always unsatisfactory. 4. Linings and cements cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination.
A		Correct answer: 2. No matter what material is used the cavity must be perfectly dry during insertion. 4. Linings and cements cannot adhere to wet cavities; whilst silicate and amalgam are ruined by saliva contamination.
R2	Very good	Full answer given (2, 4)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 2, 3, 4 "Satisfactory" grade (2 mistakes were made) – 1, 2

R0	Fail	Incorrect answer given (1, 3)
Q	3	Question: Translate the following sentence into Russian: '*The two main uses of rubber dam are: to maintain a sterile field in root canal therapy; and during insertion of silicate cement to avoid weakness and porosity caused by saliva contamination*' 1. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать слабости и пористости, вызванных загрязнением слюной. 2. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать слабости, вызванной загрязнением слюной. 3. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать пористости, вызванной загрязнением слюной. 4. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать загрязнения слюной.
A		Correct answer: 1. Латексная стоматологическая пластина (Коффердам) используется для двух основных целей: для поддержания стерильности при терапии корневых каналов; и во время введения силикатного цемента, чтобы избежать слабости и пористости, вызванных загрязнением слюной.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 2 "Satisfactory" grade (2 mistakes were made) – 3
R0	Fail	Incorrect answer given (4)
Q	4	Question: Summarize purpose of using silk thread in a few sentences using the text above. 1. A napkin is placed between the patient's chin and the rubber to make it more comfortable; and a saliva ejector is provided. 2. A napkin is placed between the patient's chin and the rubber to make it more comfortable. 3. A napkin is placed between the patient's chin and the rubber; and a saliva ejector is provided. 4. A napkin is placed between the patient's chin and the rubber dam to make it more comfortable; and a saliva ejector is provided.
A		Correct answer: 1. A napkin is placed between the patient's chin and the rubber to make it more comfortable; and a saliva ejector is provided.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	"Good" grade (1 mistake was made) – 2

		“Satisfactory” grade (2 mistakes were made) – 3
R0	Fail	Incorrect answer given (4)
Q	5	Question: Using examples from the text above, explain why rubber dam clamps often used separately. 1. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower molars. 2. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling upper molars. 3. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower premolars. 4. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling upper premolars.
A		Correct answer: 1. Rubber dam clamps are often used alone to hold cotton wool rolls in place, especially when filling lower molars.
R2	Very good	Full answer given (1)
R1	Good/Satisfactory	“Good” grade (1 mistake was made) – 2 “Satisfactory” grade (2 mistakes were made) – 3
R0	Fail	Incorrect answer given (4)

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.