I. GRAMMAR. PARTICIPLE I AND PARTICIPLE II.

1. Read and translate the sentences, paying attention to the underlined words and constructions.				
1) The little woman <u>standing at the window</u> is my doctor.				
2) She went into the ward <u>leaving the door open.</u>				
3) <u>Looking through the newspaper</u> he noticed a photo of his patient.				
4) Nobody saw the things <u>kept in that box</u> .				
5) The coat <u>bought last year</u> is too small for me now.				
6) The <u>stolen</u> wallet was returned to the doctor.				
7) The boy lay <u>sleeping</u> when the doctor came in.				
8) While being examined the boy could not help crying.				
2. Choose a correct form from the brackets and rewrite the sentences.				
1) The floor (washing / washed) by Helen looked very clean.				
e.g.: <u>The floor washed by Helen looked very clean</u>				
2) Everything (writing / written) here is quite right.				
3) The walls (surrounding surrounded) the hospital are very high.				
4) Read the (translating / translated) sentences once more.				
5) Name some places (visiting / visited) by you last year.				
6) Yesterday we were at a conference (organizing / organized) by our colleagues.				

7) It was not easy to find the (losing lost) key.			
8) Translate the words (writing / written) on the blackboard.			
9) We could not see the sun (covering / covered) by dark clouds.			
10) Who is that woman (talking / talked) to the surgeon?			
11) Where is letter (receiving / received) yesterday?			
12) (Going / gone) along the corridor I met my colleagues from Odesa.			

II. STOMATOLOGY.

1. READING. Read an abstract. Try to guess the meaning of the terms in blue bold.

TEETH

The first teeth **erupt** between 6 to 9 months. These are the lower central **incisors**. The **gums** look a bit swollen for a few days, and then tiny white spot appears, which is the tooth. Over the next 3—4 months the teeth erupt with great rapidly the lower central pair, the upper central pair and then two more on either side in the lower and upper jaws — making a total of 8 incisors. The rest of the teeth erupt as shown in the table below, till the baby has 20 teeth.

Central incisors 6 to 8 months

Lateral incisors 8 to 12 months

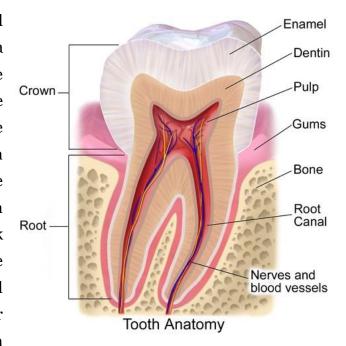
First molar teeth 12 to 18 months

Cuspids 16 to 20 months

Second molar teeth 20 to 30 months

The entire set of 20 teeth erupt by the age of 2,5 years. Usually, there are 20 **primary** ("baby", "milk", temporary) teeth and 28 to 32 **permanent** (adult) teeth, the last four being third molars or "wisdom teeth", each of which may or may not grow in. Among primary teeth, 10 usually are found in the **maxilla** (upper jaw) and the other 10 in the **mandible** (lower jaw). Among permanent teeth, 16 are found in the maxilla and the other 16 in the mandible. Most of the teeth have distinguishing features.

The term 'crown' of a tooth can be used in two ways. The term 'anatomic crown' of a tooth refers to the area above the cementoenamel junction (CEJ) or 'neck' of the tooth. It is completely covered in enamel. The term 'clinical crown' often is convenient in referring to any part of the tooth visible in the mouth, but as a rule the unqualified term "crown" refers to the anatomic crown. The bulk of the crown is composed of dentin, with the pulp chamber within. The crown is enclosed within bone before the tooth erupts, but after eruption the crown is almost always visible in



The anatomic root is found below the cementoenamel junction and is covered with cementum, whereas the clinical root is any part of a tooth not visible in the mouth. Dentin composes most of the root, which normally has pulp or root canals. The roots of teeth may be single in number (single-rooted teeth) or multiple. **Canines** and most **premolars**, except for maxillary first premolars, usually have one root. Maxillary first premolars and mandibular molars usually have two roots. Maxillary molars usually have three roots. The tooth is

supported in bone by an attachment apparatus, known as the **periodontium**, which

Give a proper term (from the text) to each definition.

interacts with the root.

an anatomically normal and clinically healthy mouth.

a)	a tooth having one point is called <u>canine</u> ;			
b)	the first set of teeth in the growth development;			
c)	teeth located between the canine and molar teeth			
d)	the largest, strongest and lowest bone in the human face;			
e)	soft tissue that lies over the mandible and maxilla inside the mouth		;	
f)	to emerge through the gum and become visible;			
g)	a complex supporting teeth;			
h)	large, flat teeth at the back of the mouth;			
i)	he second set of teeth formed at around 6 years of age	_;		
j)	the teeth at the front of the mouth;			
k)	the upper fixed bone of the jaw;			
I)	visible part of a tooth .			

1) The tooth also has a layer of dentin which is a harder substance than				
	and inner pulp ca	ity that is compris	sed of connective	e tissue and
	houses blood vessels and nerves, and a	root canal that lea	ids to an opening	g called apical
	foramen thatto sur	ounding connecti	ve tissue.	
2)	At the bottom of the tooth surrounding	the	canal a	and dentin there
	is a hard mineralized connective			
	I have drawn in on this tooth model and	it	to connec	t the tooth to
	the jawbone.			
3)	Thethat surround	teeth are compris	sed of a	
	layer of nonkeratinized epithelium and o	lense irregular coı	nnective tissue.	
4)	Dentists use a numbering system for		, with 1 throug	h 16 being teeth
	of thejaw, and 1	7 through 32 beinยู	g of the lower jav	v.
5)	Premolars have flat crowns with cusps t	hat allow these te	eth to	and
	grind			
6)	The cavity is ofter	l	into 4 quad	rants with each
3. Rea	ad the notions and decide which of the	emolars and 2 or g		s and which
	ad the notions and decide which of the to a dentist's practice or curing.			s and which
refer		em characterize	dental problems	
refer	to a dentist's practice or curing.	em characterize paradontosis	dental problems dental drilling	g machine
refer	to a dentist's practice or curing. dental caries temporary filling	em characterize paradontosis ntal forceps	dental problems dental drilling gum ulceration	g machine
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de	em characterize paradontosis ntal forceps anent filling p	dental problems dental drilling gum ulceration pathological occlu	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlu	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion
refer	to a dentist's practice or curing. dental caries temporary filling correction of occlusion de prevention of dental caries perm edema of the gum	paradontosis ntal forceps anent filling dental prost	dental problems dental drilling gum ulceration pathological occlusions	g machine usion

2. LISTENING. Following the link and watch the video about structure, functions and types of teeth in humans. Read the sentences taken from the video and fill in the gaps.

- 4. SPEAKING. Read the expressions. Translate if necessary. Make up a dialogue between a patient and a dentist, using these sentences.
 - 1) Do you have a toothache?
 - 2) Is the pain severe or mild, brief or protracted?
 - 3) Rinse your mouth out with a solution.
 - 4) Spit out, please.
 - 5) This is the bad tooth. I shall extract it.
 - 6) The tooth needs filling.
 - 7) Examine the patient's mouth cavity.
 - 8) Its crown is extremely tender.
 - 9) The patient has the disturbance of occlusion.
 - 10) During the first visit of a patient the dentist usually puts a temporary filling and only some time later a permanent one.
- 5. Read and translate an abstract.

BENIGN TUMORS OF THE PAROTID AND SUBMANDIBULAR SALIVARY GLANDS

The study covers the aspects of	
improvement of diagnostics, effectiveness of	
surgical treatment and prophylaxis of	
complications by applying modern examination	
and treatment methods in patients with the	
benign tumors of the parotid and submandibular	
salivary glands. By the results of a 10-years	
retrospective analysis of 2 233 case histories of	
patients with the diseases of the parotid and	
submandibular salivary glands in NMAPE clinic	
of maxillofacial surgery the incidence of benign	
and malignant tumors, and also tumor-like	
formation, was defined. It was mathematically	
proved that only two signs (enlargement and/or	
reduction of the growing tumor and multicentric	
growth) are pathognomonic and can be used for	
differential diagnostics of some types of benign	
and malignant tumors in the large salivary	
glands. Application of complex examination	
allows to increase significantly the accuracy of	
differential diagnostics of these tumors.	
Electrophysiological parameters (conduction,	
resistance, tone) of soft tissues, innervated by	
facial nerve, were revealed and studied in	

patients after surgeries on the parotid and					
submandibular glands depending on the severity					
of nerve's mechanical trauma (extension, partial					
and total rupture). The effective methods of					
treatment and rehabilitation period prognosis of					
patients with postoperative neuropathy of facial					
nerve were worked out, as well as the preventive					
measures of inflammatory complications after					
parotidectomy and extirpation of					
submandibular glands.					
6. Check your knowledge with a video quiz	about tooth anatomy				
(https://en.islcollective.com/video-lessons	/tooth-anatomy-tooth-structures-english)				
Be ready to do the following quiz while watch	ning the video lesson. You will have to type in the				
3	ling variants in order to match them or to click on				
	If you doubt in your answer and need to replay a				
-	, click on C sign. Fix your score in the end, please.				
Video qu	iiz questions				
1) Fill in the gap:					
Our hide everyth	ing except the top of the tooth.				
2) What is the hardest tissue in the human body	<i>y</i> ?				
a. enamel					
b. crown of the tooth					
c. dentine					
3) Match the items:					
-,	ontains the nerves and blood vessels				
Roots are located below the					
Pulp is pale yellow tissue					
Crown is located above the					
4) Fill in the gap:					
Every tooth sits in a	in the jawbone.				
5) Gingiva is also called a					
a. gum tissue					
b. periodontal ligament					
c. cuff					