

Due Module 11 - Section 2 Online State Board Exam Questions 14th Edition

Chapters – 41, 38, 39, 40, 42, 36, 46, 47, 15, 16, 13

Directions: Use this copy of the Section 2 State Board Exam to look up the answers to each question as you read through the Textbook Chapters that are assigned weekly in each module. As you read the assigned textbook chapters look up the answers to the Section 2 State Board Exam and mark them on a printed copy of this Exam (if you choose to print it) or write the answers to each question on a separate sheet of paper (if you choose to NOT PRINT this). These questions are listed in the exact order online as listed on this paper test. This paper test is to help you complete a few Chapters each week, so you don't have to complete all 200 questions at one time.

The order of the chapters listed on this Exam corresponds with the chapter readings assigned weekly. **Once you have looked up all the answers to this Exam, you must enter the answers to each question online in Section 2 Exam before the due date (see Course Outline for due dates.**

CHAPTER 41

1. The horizontal bitewing view is used for detecting
 - a. devital abscessed teeth.
 - b. bone loss associated with advanced periodontal disease.
 - c. interproximal caries.
 - d. unerupted third molar teeth.
2. A periapical view shows the tooth from the occlusal surface or incisal edge to about _____ mm beyond the apex to show the periapical bone.
 - a. 0 to 1
 - b. 1 to 2
 - c. 2 to 3
 - d. 3 to 4
3. An intraoral full-mouth survey on an adult consists of _____ images.
 - a. 2 to 4
 - b. 4 to 6
 - c. 10 to 12
 - d. 18 to 20
4. The technique recommended by the American Academy of Oral and Maxillofacial Radiology and the American Association of Dental Schools because it provides the most accurate image with the least amount of radiation exposure to the patient is the _____ technique.
 - a. bisecting-angle
 - b. paralleling
 - c. bitewing survey
 - d. short-cone
5. Which technique can be used in situations such as a small mouth, shallow palate, or the presence of tori?
 - a. Paralleling technique
 - b. Bitewing technique
 - c. Bisecting technique
 - d. Long-cone technique
6. To minimize image distortion, the
 - a. image receptor must be positioned perpendicular to the long axis of the tooth.
 - b. image receptor must be positioned parallel to the long axis of the tooth.
 - c. central ray of the x-ray beam must be directed parallel to the image receptor.
 - d. central ray of the x-ray beam must be directed parallel to the long axis of the tooth.

7. When using a #2 film/sensor for anterior views using the paralleling technique, the number of anterior images taken is
 - a. four.
 - b. six.
 - c. seven.
 - d. eight.

8. Incorrect horizontal angulation of the PID results in
 - a. elongation.
 - b. foreshortening.
 - c. blurred images.
 - d. overlapped contact areas.

9. Insufficient vertical angulation can result in an image that is
 - a. of increased density.
 - b. of decreased density.
 - c. horizontally overlapped.
 - d. elongated or foreshortened.

10. The bitewing view shows the
 - a. crowns and interproximal areas of the maxillary and mandibular teeth.
 - b. whole tooth crown to apex and surrounding bone.
 - c. hamular notch distal to the maxillary third molar.
 - d. mandibular canal.

11. The molar bitewing image should be centered over the
 - a. second premolars.
 - b. first molars.
 - c. second molars.
 - d. third molars.

12. Radiographic images on an edentulous patient might be required for the detection of
 - a. interproximal caries.
 - b. defective margins on crowns.
 - c. retained root tips, impacted teeth, and lesions.
 - d. a periapical abscess.

13. Which image receptor holder can aid in positioning the image receptor during an endodontic procedure, because it fits around the dam clamp and the endodontic instruments?
 - a. XCP
 - b. EeZee-Grip
 - c. EndoRay
 - d. Stabe bite-block

14. An intraoral full-mouth survey contains
 - a. both periapical and bitewing images.
 - b. periapical images but not bitewing images.
 - c. bitewing images but not periapical images.
 - d. neither periapical nor bitewing images.

15. The American Academy of Oral and Maxillofacial Radiology recommends using the paralleling technique because
- it is an easier technique to use than the bisecting technique.
 - it provides the most accurate image with the least amount of radiation exposure.
 - the image receptor is placed closer to the teeth, therefore reducing the chance of patient gagging.
 - it is better than the bisecting technique for the patient with a small mouth, a shallow maxillary palate, or large tori.
16. In the paralleling technique, the central ray of the x-ray beam must be _____ to the image receptor and the long axis of the tooth.
- intersecting
 - interproximal
 - parallel
 - perpendicular
17. If the central ray of the x-ray beam is *not* centered on the image receptor, a partial image will result on the image receptor, which is called a(n)
- cone cut.
 - herringbone image.
 - blurred image.
 - elongated image.
18. What is the usual number of posterior image receptor images taken in the parallel technique?
- 2
 - 4
 - 6
 - 8
19. An anterior set of radiographic images includes
- premolars and molars.
 - canines and incisors.
 - canines and premolars.
 - incisors and molars.
20. One reason the bisecting technique is used is
- because it is recommended by the American Academy of Oral and Maxillofacial Radiology.
 - because this technique provides the most accurate image.
 - because it allows the least amount of radiation to be used to produce a quality image.
 - when patients have small mouths or low palatal vaults.
21. The major difference between the paralleling technique and the bisecting technique is image receptor
- placement.
 - size.
 - sensitivity.
 - type.

22. The alignment of the x-ray beam in the horizontal and vertical planes formed by the long axis of the teeth and the image receptor placement is referred to as
- angulation.
 - interproximal.
 - paralleling.
 - perpendicular.
23. Horizontal angulation is
- the side-to-side angulation.
 - different when using the paralleling and bisecting techniques.
 - correct when the central ray is parallel to the curvature of the arch.
 - determined by the Stabe bite-block.
24. Vertical angulation
- differs according to whether the paralleling or bisecting technique is being used.
 - remains the same whether you are using the paralleling or the bisecting technique.
 - refers to the side-to-side plane.
 - is generally greater for images taken with the paralleling technique than it is for images taken with the bisecting technique.
25. To correct an elongated image on an x-ray view, the vertical angulation needs to be
- increased.
 - decreased.
 - lowered.
 - flattened.
26. When taking periapical x-ray images, the patient's head is _____ for maxillary images and _____ for the mandibular arch.
- tilted back slightly; tilted back slightly
 - tilted back slightly; upright
 - upright; tilted back slightly
 - upright; upright
27. When a size #2 image receptor is used, the anterior images utilize the receptor in the _____ position, and the posterior images utilize the receptor in the _____ position.
- horizontal; horizontal
 - vertical; vertical
 - horizontal; vertical
 - vertical; horizontal
28. Basic principles of the bitewing technique include the
- image receptor is placed parallel to the crowns of the teeth.
 - blue Rinn-type image receptor holder is used to stabilize the image receptor in the patient's mouth.
 - central ray is directed through the contacts of the teeth using +10 degrees' horizontal angulation.
 - angulation of the PID is not a factor in the bitewing technique.
29. When taking a premolar bitewing image, the anterior edge of the image receptor should be placed
- in the middle of the first premolar.
 - on the distal half of the canine.
 - on the distal half of the lateral incisor.
 - on the mesial surface of the second premolar.

Chapter 38

30. The uses of dental images include the detection of
 - a. incipient occlusal lesions.
 - b. abnormalities in surrounding hard and soft tissues.
 - c. periodontal probing depths.
 - d. percussion sensitivity as part of endodontic evaluation.
31. The component of the x-ray machine that functions in positioning the tubehead is the
 - a. kilovoltage selector.
 - b. control panel.
 - c. extension arm.
 - d. cathode.
32. The heart of the x-ray generating system is the
 - a. x-ray tube.
 - b. insulating oil.
 - c. transformer.
 - d. position indicator device.
33. Secondary radiation
 - a. is often referred to as the *useful beam*.
 - b. is often referred to as the *primary beam*.
 - c. refers to x-radiation that is created when the primary beam interacts with matter.
 - d. is a form of radiation that occurs when an x-ray beam has been deflected from its path by interaction with matter.
- 34.. All of the following structures will appear radiolucent on dental x-ray film *except*
 - a. metal restorations.
 - b. soft tissue.
 - c. tooth decay.
 - d. dental pulp.
35. The term _____ is used to describe areas that appear dark on the image; _____ is the term used to describe areas that appear white or light gray.
 - a. radiopaque; radiolucent
 - b. radiolucent; radiopaque
 - c. density; contrast
 - d. contrast; density
36. The range of shades of gray between black and white on an image is called
 - a. contrast.
 - b. density.
 - c. sharpness.
 - d. focus point.
37. The degree of density or blackness on an image is controlled by the
 - a. low-voltage circuit.
 - b. kilovoltage.
 - c. milliamperere seconds.
 - d. position indicator device.

38. Which of the following tissues has the highest radiation sensitivity?
- Bone marrow
 - Salivary gland
 - Kidney
 - Muscle tissue
39. A lead apron and a thyroid collar
- are used for a full-mouth series of films but are not necessary for single periapical films.
 - must be used on all patients for all exposures.
 - are required for pediatric patients but is optional for adults.
 - are mandated only for pregnant women.
40. The *Guidelines for Prescribing Dental Radiographs* issued by the American Dental Association and the FDA recommend which of the following dental imaging procedures for a pregnant patient?
- Do not take images of a pregnant patient.
 - Radiographic imaging procedures do not need to be altered because of pregnancy.
 - Take images only after the first trimester.
41. One of the rules of radiation protection is never stand closer than _____ feet from the x-ray unit during an exposure unless you are behind a barrier.
- 2
 - 6
 - 10
 - 15
42. The term image receptor refers to
- either a digital imaging sensor or to film.
 - a digital imaging sensor only, not film.
 - film only, not a digital imaging sensor.
 - neither a digital imaging sensor nor film.
43. The portion of the x-ray machine that supplies the electrons to produce x-rays is the
- cathode.
 - anode.
 - control panel.
 - focusing cup.
44. If you change the exposure time of the x-ray unit, what is affected?
- Energy of the beam
 - Wavelength of the x-rays
 - Number of x-rays produced
 - Penetrability of the x-rays
45. The penetrating power of the x-ray beam is controlled by the settings on the
- exposure button.
 - kilovoltage setting.
 - milliamperage setting.
 - master switch.

46. The lead collimator is used to
- make the primary beam more accurate.
 - restrict the size and shape of the primary beam.
 - remove long wavelengths.
 - stop production of the primary beam.
47. How much filtration is federally required for a dental x-ray machine operating over 70 kVp?
- 2.75 mm
 - 2.50 mm
 - 2.25 mm
 - 0.5 mm
48. The function of the _____ filter in the x-ray tube is to _____.
- aluminum; remove long wavelengths from the beam
 - copper; remove long wavelengths from the beam
 - lead; restrict the size of the beam
 - aluminum; restrict the size of the beam
49. Primary radiation is
- created when the x-rays contact the patient's tissues.
 - the beam of x-rays that comes from the target.
 - less penetrating than secondary radiation.
 - scatter radiation.
50. Which of the following terms is used to describe the energy or penetrating ability of the x-ray beam in dental radiography?
- Quantity
 - Quality
 - Collimation
 - Density
51. All of the following organs are more sensitive to radiation and are considered critical organs *except*
- skin.
 - muscle.
 - thyroid gland.
 - lens of the eye.
52. Who should hold the film in a patient's mouth if the patient is unable to do so?
- Receptionist
 - Parent or relative of the patient
 - Assistant
 - Dentist
53. If a patient is small and petite, to get the same density radiograph, it is best to reduce the
- exposure time.
 - mA.
 - kVp.
 - exposure time and mA.
54. The dentist says that the image has too much contrast; she would like to see more gray values. What adjustment would you make?
- Increase mA.
 - Increase kVp.
 - Decrease kVp.
 - Decrease mA.

55. A good technique for reducing the radiation exposure to both patient and operator is the use of
- a lead apron.
 - thinner films.
 - fast film or digital imaging.
 - an automatic processor.
56. The location where x-rays are produced in the x-ray tube is called the
- focal spot.
 - filament.
 - window.
 - PID.
57. When the electrons strike the target, _____ are generated.
- 99% heat and 1% x-rays
 - 1% heat and 99% x-rays
 - 50% x-rays and 50% heat
 - only x-rays
58. What happens when the exposure button on a dental x-ray machine is pressed?
- The low-voltage circuit is activated.
 - Kilovolt potential drives the photons to the target.
 - Electrons slam against the target of the anode producing the x-ray.
 - Electrons strike the cathode.

Chapter 39

59. Dental film holders, used to position and hold the dental x-ray films in the patient's mouth, include
- Rinn XCP-DS instruments.
 - Rinn XCP instruments.
 - film cassette.
 - position indicator device (PID).
60. The most commonly used film size for adult intraoral dentistry is size
- #0.
 - #2.
 - #3.
 - #4.
61. Which of the following is an extraoral film that is placed outside the mouth during dental x-ray exposure procedures?
- Periapical
 - Bite-wing
 - Cephalometric
 - Occlusal
62. Positioning instruments in digital radiography
- assist in film placement and keep the patient's fingers from being exposed.
 - are used with round, but not rectangular, position indicating device (PID).
 - are exactly the same x-ray film holders used in conventional techniques.
 - include the Rinn XCP system.

63. Digital radiography requires less radiation than traditional radiography because the
- exposure time is increased.
 - sensor is smaller.
 - sensor is more sensitive to x-ray energy.
 - sensor is attached to the computer.

Chapter 40

64. Failure to obtain informed consent from a patient prior to exposure of dental radiographs can lead to charges of
- informed consent.
 - disclosure.
 - respondeat superior*.
 - negligence.
65. What should the dental assistant do if a patient refuses dental imaging?
- Document in the patient's record the fact that he or she refused recommended dental imaging.
 - Tell the patient that the dentist doesn't mind working without dental images.
 - Attempt to take the dental images anyway.
 - Ask the patient to sign a waiver releasing the dentist from any liability for treating the patient without taking dental radiographs.
66. According to the Centers for Disease Control (CDC) *Guidelines for Infection Control in Dental Healthcare Settings*, digital radiography sensors
- are single-use items and should be disposed of between patients.
 - do not require a barrier; they should be wiped down with disinfectant between patients.
 - should use FDA-cleared barriers.
 - should be heat sterilized.
67. Regulations regarding certification for dental assistants in radiography
- are not required by federal law.
 - vary from state to state.
 - do not exist.
 - require Dental Assisting National Board (DANB) certification in all states.
68. It is the responsibility of the ____ to discuss the need for dental imaging.
- dental assistant
 - dental hygienist
 - dentist
 - dental hygienist and dentist
69. Each of the following must be disclosed to the patient before obtaining informed consent for dental radiographs *except* one. Which one is the EXCEPTION?
- Risks and benefits of the images
 - Person who will be exposing the images
 - Consequences of not having images taken
 - Rights of the patient as owner of the images
70. Who can be held legally responsible for a dental assistant's actions?
- The dentist
 - The dental assistant
 - Both the dentist and assistant
 - The patient

71. Dental patient records must contain documentation of the _____ of dental images taken.
- number and type
 - kilovoltage potential (kVp)
 - milliamperage
 - exposure time
72. Calibration of dental x-ray equipment should be performed by a
- dental assistant.
 - qualified technician.
 - dentist.
 - dental supply company sales representative.
73. All of the following are true statements regarding the preparation of the radiography operatory for dental imaging *except*
- barriers should be used on all surfaces that cannot be easily cleaned and disinfected.
 - barriers are preferred over switches to prevent electrical shorts.
 - barriers do not need to be used because spatter of blood and saliva is unlikely.
 - the lead apron should be considered contaminated and wiped with a disinfectant after each use.

Chapter 42

74. A panoramic image allows the dentist to do all of the following *except*
- detect caries.
 - view the entire dentition and related structures in one image.
 - view all of the sinus cavities.
 - determine if a tooth is percussion sensitive.
75. In panoramic imaging, _____ rotate(s) around the patient.
- the image receptor but not the tubehead
 - the tubehead but not the image receptor
 - both the image receptor and the tubehead
 - neither the image receptor nor the tubehead
76. The _____ used in the panoramic x-ray machine tubehead is a lead plate with an opening shaped like a narrow vertical slit.
- filter
 - collimator
 - patient chair
 - bite-block
77. Each panoramic unit has a(n) _____ that is used to align the patient's teeth as accurately as possible.
- head positioner
 - tubehead
 - exposure control
 - power source
78. The exposure controls allow the _____ to be adjusted on the panoramic x-ray unit, to accommodate patients of different sizes.
- exposure time
 - vertical angulation
 - horizontal angulation
 - milliamperage and kilovoltage

79. A patient wearing earrings or glasses must remove them before a panoramic x-ray image exposure; otherwise, a _____ will appear on the image.
- dark area
 - reverse smile line
 - radiolucent shadow
 - ghost image
80. A ghost image will appear _____ than normal and on the _____ side of the image.
- larger; opposite
 - larger; same
 - smaller; opposite
 - smaller; same
81. To avoid a lead apron artifact on a panoramic radiograph
- use a lead apron without a thyroid collar, and place the lead apron low around the neck of the patient so that it does not block the x-ray beam.
 - place the lead apron high around the neck of the patient so that it does not block the x-ray beam.
 - use a lead apron with a thyroid collar.
 - do not use a lead apron at all.
82. Anterior teeth that appear fat are caused by the
- patient's teeth positioned too far forward on the bite-block.
 - patient's teeth positioned too far back on the bite-block.
 - patient not sitting or standing up straight.
 - chin positioned too low.
83. All of the following statements about panoramic imaging are true *except*
- panoramic images are primarily used for locating impacted teeth, lesions in the jaw, and eruption patterns.
 - with film-based panoramic imaging, bitewings need to be taken to detect decay.
 - a digital panoramic unit can reveal a small interproximal carious lesion, eliminating the need to take bitewing images.
 - the digital panoramic unit uses film that has to be processed.
84. The quality of the panoramic view depends on focal trough placement of the patient's
- anterior nasal spine.
 - sella turcica.
 - Frankfort horizontal plane.
 - jaw.
85. The main components of the panoramic unit include the panoramic x-ray tubehead, the head positioner, and
- yoke.
 - focal trough.
 - exposure controls.
 - cephalostat.
86. All of the following statements about the panoramic tubehead are true *except* the
- tubehead rotates the image receptor behind the patient's head.
 - tubehead rotates behind the patient's head.
 - vertical angulation of the tubehead is not adjustable.
 - tubehead houses the filament that produces electrons and target that produces radiographs.

87. The purpose of the head positioner is to position the patient correctly in the
- occlusal vertical dimension.
 - focal trough.
 - Frankfort plane.
 - central ray.
88. A radiopaque cone-shaped artifact on a panoramic image that interferes with the diagnostic information is caused by the
- patient's chin being too high during the procedure.
 - patient's lead apron being incorrectly placed or a lead apron with a thyroid collar being used.
 - patient's head being posterior to the focal trough.
 - patient moving during the procedure.
89. A dark radiolucent shadow that obscures the anterior teeth can indicate that the patient's
- chin was too low.
 - head was posterior to the focal trough.
 - lips were not closed on the bite-block during the exposure.
 - tongue was not in contact with the palate during the exposure.
90. When a dark radiolucent shadow obscures the apices of the maxillary teeth, the
- patient's lips were not closed on the bite-block during the exposure.
 - patient's tongue was not in contact with the palate during the exposure.
 - patient's head was posterior to the focal trough.
 - patient needed to swallow.
91. When a patient's chin is too high during the panoramic exposure
- the maxillary premolars will be blurred.
 - the floor of the nasal cavity will be superimposed over the roots of the mandibular teeth.
 - a "reverse smile line" will appear on the radiograph.
 - detail of the mandibular region will be lost.
92. When a patient's chin is positioned too low during the panoramic exposure
- the maxillary incisors will appear blurred.
 - the condyles will not be visible.
 - detail in the posterior apical regions will be lost.
 - a reverse smile line will be observed.
93. When a patient's teeth are *not* positioned in the groove of the bite-block and are too far forward, the teeth will appear
- fat.
 - skinny.
 - tall.
 - short.

Chapter 36

94. Which of the following is a small, straw-shaped oral evacuator used during less-invasive procedures to remove excess fluid?
- Saliva ejector
 - High-volume evacuator
 - Spittoon
 - Surgical suction tip

95. A _____ is used to remove solid debris from the oral cavity during a dental restorative procedure.
- high-volume evacuator (HVE)
 - saliva ejector
 - cuspidor
 - surgical suction
96. During a dental procedure, the saliva ejector should be placed _____ the tongue on the _____ where the dentist is working.
- over; same side
 - over; opposite side from
 - under; same side
 - under; opposite side from
97. After it is used, a plastic HVE tip is
- disinfected with an immersion disinfectant.
 - disinfected with a surface disinfectant.
 - sterilized in an autoclave.
 - thrown away.
98. The dental assistant grasps the evacuator in the _____ hand(s) when assisting a right-handed dentist.
- right
 - left
 - right or left
99. The HVE suction tip should be positioned
- after the dentist positions the handpiece and mouth mirror.
 - on the surface of the operative tooth closest to the dentist.
 - so that the bevel of the suction tip is perpendicular to the tooth surface.
 - so that the edge of the suction tip is even with or slightly beyond the occlusal surface or incisal edge.
100. Which of the following is used along with the HVE to complete the rinsing process?
- Dental dam
 - Cup of water
 - Air-water syringe
 - Dry-angle
101. The three most common methods used to isolate a specific area of the mouth include
- mouth prop, index and middle fingers, and gauze square.
 - cotton rolls, dry angles, and the dental dam.
 - cotton roll, dental dam, and index and middle fingers.
 - mouth prop, gauze squares, and cotton rolls.
102. The dental dam is placed _____ the local anesthetic is administered.
- before
 - after
 - before or after
103. Dental dam clamp parts include the bow and the jaws. The bow of a posterior tooth clamp is the rounded portion of the clamp that extends through the dam and is positioned
- toward the gingiva and toward the mesial of the mouth.
 - away from the gingiva and toward the mesial of the mouth.
 - toward the gingiva and toward the distal of the mouth.
 - away from the gingiva and toward the distal of the mouth.

104. The high-volume evacuator (HVE) has three main purposes: (1) retract tongue and cheek; (2) keep mouth free of saliva, blood, debris, and water; and (3)
- reduce the bacterial aerosol spray caused by the high-speed handpiece.
 - keep the patient's mouth fresh.
 - keep oral tissues from dehydrating.
 - curette the tooth socket following extraction of a tooth.
105. All of the following are specific guidelines for positioning the HVE *except*
- position the bevel to be parallel to the tooth surface.
 - place the HVE after the dentist positions the handpiece and mirror.
 - position the HVE tip on the surface of the operative tooth closest to the dental assistant.
 - keep the HVE tip edge even with or slightly beyond the occlusal or incisal surface.
106. All of the following are indications for using the saliva ejector *except*
- control saliva and moisture accumulation.
 - cementation of crown.
 - removal of solid debris.
 - fluoride treatments.
107. All of the following are guidelines for using the air-water syringe *except*
- using air on the mouth mirror when indirect vision is involved.
 - directing the syringe tip toward the tooth being treated.
 - directing the syringe tip toward the patient's nose and lips.
 - keeping a close distance between the tooth and syringe tip.
108. In which method of dental dam placement does one place the clamp and then stretch the dental dam over it?
- One-step method
 - Two-step method
 - Clamp method
 - Frame method
109. The purpose of inverting the dental dam into the gingival sulcus is to
- stabilize the dam.
 - gain better visibility.
 - prevent saliva leakage.
 - provide patient protection.
110. When the high-speed handpiece is positioned on the occlusal surface of tooth #3, where would the assistant position the HVE?
- Buccal surface of #2
 - Buccal surface of #4
 - Lower left buccal vestibule
 - Lingual surface of #3

Chapter 46

111. An impression is a positive reproduction of teeth and surrounding oral tissues. The model created from the impression is a negative reproduction of the structures.
- Both statements are correct.
 - Neither statement is correct.
 - The first statement is correct; the second statement is incorrect.
 - The first statement is incorrect; the second statement is correct.

112. Legally, who can take final impressions?
- Dentist or credentialed dental assistant
 - Dental hygienist
 - Any dental assistant
 - Laboratory technician
113. An impression tray should be sufficiently deep to allow _____ mm of material between the tray and the incisal or occlusal edges of the teeth.
- 0.5 to 1
 - 2 to 3
 - 4 to 5
 - 6 to 7
114. Which irreversible hydrocolloid material is used most widely for preliminary impressions?
- Light-bodied elastomeric impression material
 - Alginate
 - Polysulfide
 - Polyether
115. Alginate impressions must be poured within _____ so that distortion does not occur.
- 5 minutes
 - 30 minutes
 - 1 hour
 - 24 hours
116. Which type of impression is taken to produce a reproduction of the occlusal relationship of the maxilla and mandible teeth when in centric occlusion?
- Final
 - Preliminary
 - Bite registration
 - Articulated
117. Which of the following is an acceptable method for altering the setting time of alginate irreversible hydrocolloid impression material?
- Increase or decrease the water-to-powder ratio.
 - Change the water temperature.
 - Add a colloidal material to the alginate.
 - Use potassium chloride as an accelerator.
118. What are preliminary impressions used to make?
- Diagnostic models
 - Porcelain veneers
 - Cast gold restorations
 - Crowns on implant abutments
119. Impression trays are rigid for all of the following reasons *except* to
- carry the impression material into the oral cavity.
 - warp the completed impression.
 - hold the material close to the teeth.
 - avoid breaking during removal.

120. How is an alginate impression disinfected?
- Spray the alginate with glutaraldehyde.
 - Submerge it in disinfecting solution overnight.
 - Wet it with isopropyl alcohol.
 - Spray the alginate with an intermediate-level disinfectant.
121. How are alginate impressions removed from the mouth?
- Use a gentle rocking movement.
 - Use one quick, snap-out motion.
 - Twist the tray sideways.
 - Use a vigorous back-and-forth action.
122. Which portion of the maxillary impression tray should be seated in the mouth first?
- Anterior
 - Posterior
 - Right side
 - Left side
123. What is the working time of normal-set alginate impression material?
- 1 minute
 - 2 minutes
 - 3 minutes
 - 4 minutes
124. The retromolar area, lingual frenum, and mylohyoid ridge are reproduced in a mandibular impression. The tuberosity, labial frenum, tongue space, and incisive papilla are reproduced in a maxillary impression.
- Both statements are correct.
 - Neither statement is correct.
 - The first statement is correct; the second statement is incorrect.
 - The first statement is incorrect; the second statement is correct.
125. Each of the following can be done to alleviate the gag reflex when taking alginate impressions *except* one. Which one is the EXCEPTION?
- Use fast-set alginate, because it allows the impression tray to be removed from the mouth much sooner than if using normal set alginate.
 - Do not overload the posterior regions of the trays.
 - Have the patient take deep breaths through the nose.
 - Have the patient sit upright with the head tilted backward.
126. Where should alginate and elastomer impressions be disinfected?
- In the laboratory
 - Before leaving the treatment area
 - When the assistant has the time
 - Disinfection is not necessary
127. How should alginate material be loaded into a maxillary impression tray?
- Heavier in the anterior and labial areas
 - Heavier in the palatal area
 - Evenly in the tray
 - Heavier toward the posterior

128. Which listed criteria would *not* be acceptable on an alginate impression?
- Free of voids, air bubbles, and tears
 - Anatomic areas clearly defined
 - Peripheral borders clearly defined
 - Void of frena and tuberosities

Chapter 47

129. Which item is used to polish or trim custom trays, provisional coverage, dentures, and indirect restorations?
- Sandblaster
 - Model trimmer
 - Vacuum former
 - Dental lathe
130. A model consists of the _____ portion, which represents the teeth and tissues of the mouth, and the _____ portion, which forms the base of the cast.
- art; anatomic
 - anatomic; foundation
 - anatomic; art
 - oral cavity; foundation
131. Which of the following statements correctly describes the pouring methods used to create the base portion of a dental model?
- The art portion of the cast is poured first when the double-pour method is used.
 - The completed box should extend at least 1 inch above the palatal area of the maxillary impression when the box-and-pour method is used.
 - The inverted-pour method consists of mixing one large mixture of plaster or stone and pouring both portions of the model in a single step.
 - The “box” used in the box-and-pour method is made of baseplate wax.
132. Which statement regarding infection control in the dental laboratory is accurate?
- It is equally as important as when you are with a patient.
 - It is not as critical as when you are with a patient.
 - It is not a consideration because impressions are disinfected at chairside.
 - It depends on the patient’s medical history.
133. Which statement is incorrect regarding safety precautions in the laboratory?
- PPE should be worn while working in the laboratory.
 - Manufacturer’s instructions should be followed for equipment operation.
 - This is the appropriate place for eating and drinking in the dental office.
 - The work areas should be kept clean before and after procedures.
134. Which method should be used to protect against biohazard contamination in the laboratory from impressions?
- Precleaning
 - Autoclaving
 - Sterilization
 - Disinfecting
135. In minutes, how long should one wait before removing a model from an impression after pouring?
- 10 to 15
 - 15 to 30
 - 30 to 45
 - 45 to 60

136. What should be done to an impression before pouring?
- Dry the impression completely with a blast of air.
 - Use a gentle stream of air to remove excess moisture.
 - Have the impression saturated with moisture.
 - Leave disinfecting solution in the impression.
137. How should a plaster mix *not* be manipulated?
- Complete mix within 2 minutes.
 - Press bowl lightly on the vibrator.
 - Complete mix in 30 seconds.
 - Mix slowly until smooth.
138. Which technique listed would be incorrect when pouring an impression with plaster?
- In small increments
 - In large amounts
 - In the same place
 - In a continuous flow
139. What causes air bubbles in a model?
- Using a vibrator
 - Adding stone in small increments
 - Impression material that is too thick
 - Improper pouring of the impression

Chapter 15

140. The three factors required for the development of caries are a susceptible tooth, specific bacteria, and
- fermentable carbohydrates.
 - any bacteria.
 - fats.
 - acidic food.
141. Demineralization occurs when calcium and phosphate dissolve from _____ in the enamel.
- calcium
 - hydroxyapatite
 - sodium
 - potassium
142. Why is the cementum covering root surfaces more susceptible to caries than enamel?
- Bacteria are able to penetrate dentinal tubules but cannot penetrate the hydroxyapatite crystals found in enamel.
 - Cementum is more prone to toothbrush abrasion, which weakens its structure.
 - Cementum has a lower mineral content than enamel.
 - Cementum has a higher mineral content than enamel.
143. Which of the following can slow or prevent the caries process?
- Eating more carbohydrates
 - Taking antibiotics
 - Increasing salivary flow
 - Using a saltwater rinse

144. Which of the following is one of the causes of rampant caries?
- Xerostomia
 - Not flossing
 - Open tooth contacts
 - Acid reflux
145. Which of the following is true of dental caries?
- It is a communicable bacterial disease.
 - It is a disease that affects older adults but is rare in children.
 - It has been largely eliminated with the use of fluoride.
 - The emphasis in fighting caries is shifting toward restorations.
146. Which of the following is the most common source of transmission of disease-causing mutans streptococci (MS) to infants?
- Food
 - Clothing
 - Furniture
 - Mothers
147. Which is *not* true of dental plaque?
- It is a colorless, sticky coating on the teeth.
 - It contains an adhesive substance called the *pellicle*.
 - It contains food debris and does not contain bacteria.
 - It contains 99% more oral bacteria than the same amount of saliva.
148. Bacteria in dental plaque feed on fermentable carbohydrates, including all but which of the following?
- Sugars
 - Cooked starch
 - Protein and fats
 - Fruit sugar
149. Which of the following is *not* true regarding the demineralization of tooth structure?
- Demineralization is caused by the bacterial acid released after eating a fermentable carbohydrate.
 - Demineralization is increased as fermentable carbohydrates are eaten more frequently.
 - Demineralization is repaired by cooked starch, such as bread, potatoes, rice, and pasta.
 - Demineralization is increased as the teeth are exposed to fermentable carbohydrates more frequently.
150. Which of the following types of caries occurs primarily on occlusal surfaces?
- Smooth surface
 - Pit and fissure
 - Recurrent
 - Root surface
151. Which is *not* true about the process of demineralization and remineralization?
- Demineralization and remineralization may occur without loss of tooth structure.
 - Demineralization and remineralization always causes loss of tooth structure.
 - Caries is an ongoing process characterized by alternating periods of demineralization and remineralization.
 - Caries develops if more demineralization than remineralization occurs.

152. What is the primary reason why root caries is becoming more prevalent?
- There is a greater consumption of fermentable carbohydrates.
 - People are keeping their teeth longer.
 - There are better diagnostic methods.
 - Fluoridated water creates more acid oral conditions.
153. Which of the following is true concerning early childhood caries (ECC)?
- It is not dependent on socioeconomic status.
 - It is not associated with any particular ethnic group.
 - It is not common among children living in an area lacking water fluoridation.
 - It is a transmissible disease.
154. Which of the following is the most prevalent disease of childhood?
- Insulin dependent diabetes
 - Early childhood caries
 - Respiratory infection
 - Tonsillitis
155. Chewing xylitol gum will help to do all *except*
- increase salivary flow.
 - assist in the remineralization of tooth surfaces.
 - replace interproximal plaque disruption with floss.
 - neutralize mouth acids.

Chapter 16

156. Which of the following is the part of the periodontium that connects the cementum covering the root of the tooth with the alveolar bone of the socket wall?
- Epithelial attachment
 - Alveolar bone
 - Periodontal ligament
 - Periodontium
157. Which of the following is the leading cause of tooth loss in adults?
- Grinding teeth (bruxing)
 - Old age
 - Periodontal diseases and dental caries
 - Lack of home care
158. Bacteria in dental _____ cause inflammation by producing enzymes and toxins that destroy periodontal tissues and lower host defenses.
- calculus
 - biofilm
 - scum
 - subgingival calculus
159. Which of the following must be removed by the dentist or the dental hygienist with scaling instruments?
- Food debris
 - Plaque
 - Calculus
 - Erythrosine stain

160. Subgingival calculus
- is found above the margin of the gingiva.
 - is visible as a yellowish-white deposit.
 - occurs frequently near the openings of Wharton's ducts and Stensen's ducts.
 - is not site specific and is found throughout the mouth.
161. Which of the following are the two basic forms of periodontal disease?
- Gingivitis and calculus
 - Calculus and plaque
 - Plaque and periodontitis
 - Gingivitis and periodontitis
162. Gingivitis is
- difficult to treat and control.
 - loss of connective tissue.
 - loss of bone.
 - inflammation of gingival tissue.
163. _____ is inflammation of the supporting tissues of the teeth, progressing from the gingiva into the connective tissue and alveolar bone that support the teeth.
- Gingivitis
 - Supragingival calculus
 - Periodontitis
 - Inflamed gingiva
164. The presence of which of the following conditions indicates periodontitis rather than gingivitis?
- Inflammation
 - Loss of attachment
 - Tight adaptation of tissue to teeth
 - Increased pocket depth without loss of attachment
165. Almost ___% of American adults 65 years and older have some sort of periodontal disease.
- 40
 - 50
 - 60
 - 70
166. Periodontal disease has a proven relationship with
- liver failure.
 - renal disease.
 - several types of cancer.
 - coronary artery disease.
167. An individual with chronic periodontal disease is at increased risk for which of the following respiratory infections?
- Pneumonia
 - Influenza
 - Whooping cough
 - Sinusitis

168. Which of the following is the primary factor causing periodontal disease?
- Type of bacteria present
 - Length of time bacteria are left undisturbed
 - Patient's response to bacteria
 - Plaque
169. Periodontal disease may be triggered by all but which of the following factors?
- Gingival stippling
 - Malocclusion
 - Nutritional deficiencies
 - Some blood pressure medications
170. Which form of periodontal disease is reversible?
- Gingivitis
 - Periodontitis
 - Both gingivitis and periodontitis
 - Neither gingivitis nor periodontitis
171. _____ is not a risk factor for periodontal disease.
- Smoking
 - Osteoporosis
 - Carbohydrate consumption
 - Stress
172. A probing depth of more than _____ mm is associated with gingival disease.
- 2
 - 3
 - 4
 - 6
173. Which of the following characteristics is associated with diseased rather than healthy gingival tissue?
- Uniformly pale pink
 - Attached and stippled
 - Bleeding upon probing
 - Firm and resilient
174. Which of the following is the primary cause of periodontal disease?
- Bacterial plaque
 - Poorly fitting restorations
 - Stress
 - Diabetes
175. Which is not true of subgingival calculus?
- It forms below the root surface.
 - It can be dark due to staining.
 - It is associated with the ducts of the major salivary glands.
 - It increases the damage caused by oral bacteria.

True/False

Indicate whether the statement is true or false.

176. A patient complaining of discomfort is one of the first signs of gingivitis.
177. Loss of connective tissue attachment is associated with periodontitis and not gingivitis.
178. It is important to document home care and that the patient has been informed about the potential for future periodontal disease if home care does not improve

Chapter 13

179. As a dental assistant, your first step as a partner in prevention with your patients is to help patients
- change their behaviors.
 - become partners in recognizing and preventing dental disease in themselves.
 - become partners in recognizing and preventing dental disease in their families.
 - understand what causes dental disease and how to prevent it.
180. Which of the following is the most effective means to prevent dental caries?
- Toothbrushing
 - Fluoride
 - Sealants
 - Flossing
181. How can a parent avoid spreading the types of bacteria that cause caries in a baby?
- Sterilize everything that will go into the mouth of the baby first in an autoclave.
 - The parent should not put anything that has been in his or her own mouth into the mouth of the baby.
 - Do not use disposable "plasticware."
 - Take a bite or sip of each food item first to make sure it is not spoiled.
182. Topical fluoride is the type of fluoride found in
- fluoridated mouth rinses.
 - fluoridated supplements.
 - fluoridated water and food.
 - fluoridated salt.
183. Which of the following is the primary source of topical fluoride?
- Fluoridated drinking water
 - Fluoride mouth rinses
 - Fluoridated toothpaste
 - In-office fluoride treatments
184. The goal of _____ dentistry is to help people of all ages obtain optimal oral health throughout their lives.
- esthetic
 - restorative
 - pediatric
 - preventative
185. Plaque can re-form in about how many hours after a cleaning?
- 6
 - 24
 - 48
 - 72

186. Dental professionals generally recommend that patients use _____ toothbrushes.
- soft-bristled nylon
 - soft-bristled natural
 - hard-bristled nylon
 - hard-bristled natural
187. Things to consider when you are teaching a patient how to brush most effectively include the patient's age, dexterity, and
- type of dental insurance.
 - time remaining in the appointment.
 - time already spent on oral health education.
 - personal preferences.
188. Which of the following can be caused by vigorously scrubbing the teeth with a toothbrush?
- Attrition
 - Abrasion
 - Erosion
 - Abfraction
189. When should dental floss be used in relationship to brushing teeth?
- Before
 - After
 - At a time unrelated to brushing
 - It does not matter whether flossing is performed prior to or following toothbrushing
190. The first step in patient education is to
- instruct the patient on how to remove plaque.
 - select home care aids.
 - listen carefully and make the patient an active and responsible partner rather than a passive object.
 - reinforce home care.
191. Oral hygiene should begin
- before the baby has teeth.
 - when the first tooth erupts.
 - after all teeth are present.
 - when the child can master the skill.
192. The baby should never be put to bed at naptime or at bedtime with a bottle or sippy cup unless it
- has milk in it.
 - has only water in it.
 - has fruit juice in it.
 - is empty.
193. Which is *not* a factor regarding toothbrushes?
- They should be replaced when the bristles begin to splay outward.
 - They should be replaced after an illness.
 - They should be replaced when they begin to show signs of wear.
 - They should be replaced every 8 to 12 weeks.

194. When reviewing toothbrushing with patients who have healthy gum tissue and few plaque deposits, you should not
- recommend a totally new brushing technique.
 - coach them to continue their effective technique.
 - make minor modifications.
 - guide them in techniques to better reach missed areas.
195. Which of the following is true regarding patient toothbrushing recommendations for areas with acute oral inflammation?
- Discontinue all brushing.
 - Brush all areas of the mouth not affected.
 - Continue normal brushing.
 - Rinse with mild saline solution instead of brushing.
196. Which of the following interdental aids is of the greatest value in passing floss under the pontic of a fixed bridge?
- End-tuft brush
 - Bridge threader
 - Automatic flosser
 - Perio-aid
197. For patient education to be effective, it should be
- done properly a single time.
 - delivered by the dentist.
 - reinforced and repeated.
 - done on a separate visit from a treatment appointment.
198. Before topical fluoride gel is applied, the
- teeth must be free of all plaque.
 - teeth must be free of calculus.
 - dental chair is reclined to 45 degrees.
 - patient's head should be tilted back.
199. What instructions should a patient be given regarding the use of a whitening toothpaste?
- They will see immediate results.
 - Tissue irritation is never a problem.
 - The degree of whitening varies.
 - Excellent results can be guaranteed.
200. Which of the following types of toothpastes shows a major effect on reducing the formation of new supragingival calculus?
- Fluoride
 - Antigingivitis
 - Tartar control
 - Whitening