

ADEX/CDCA Florida Laws and Rules for Dentistry and Dental Hygiene Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

- 1. A dental hygienist who activates a light source during a bleaching procedure is performing which type of task?**
 - A. Administration task**
 - B. Irremediable task**
 - C. Remediable task**
 - D. Surgical task**
- 2. How many minutes are equivalent to one hour of continuing education?**
 - A. 30 minutes**
 - B. 50 minutes**
 - C. 60 minutes**
 - D. 90 minutes**
- 3. Who makes up the Administrative Commission in Florida's dental regulations?**
 - A. The Governor and Cabinet**
 - B. Commissioner of Health**
 - C. Local dental associations**
 - D. The State Senate**
- 4. Practice in a private sector is prohibited when a dentist is on which status?**
 - A. Active Duty**
 - B. Military Status**
 - C. Enlisted Status**
 - D. Reserve Status**
- 5. Which of the following statements about advertising for dentists is incorrect?**
 - A. A dentist may claim he/she has won awards**
 - B. Advertising dentist may claim he/she gives superior treatment**
 - C. Dentists can advertise their specialties**
 - D. Dentists may provide testimonials from satisfied patients**

- 6. Which of the following professionals can provide dental treatment without a license?**
- A. None, all require a license**
 - B. A dental receptionist**
 - C. A dental lab technician**
 - D. A dental student under supervision**
- 7. All heat sensitive instruments must be?**
- A. Disposed of after use**
 - B. Exposed to a chemical agent**
 - C. Steam sterilized**
 - D. Used only once and discarded**
- 8. Under what supervision can dental assistants cement temporary crowns and bridges with temporary cement?**
- A. Indirect supervision**
 - B. Direct supervision/formal training**
 - C. Self-supervision**
 - D. Any supervision available**
- 9. Under what circumstances can a hygienist replace a periodontal dressing?**
- A. Whenever the patient requests it**
 - B. Only when the dentist can pre-examine the patient**
 - C. When the dentist of record cannot pre-examine the patient**
 - D. Hygienists cannot replace the dressing at all**
- 10. What is required of a dentist's staff if anesthesia is used in the office?**
- A. Proper training in anticonvulsants**
 - B. Certification in advanced life support**
 - C. Experience in patient management**
 - D. Knowledge of pharmacology**

Answers

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1. C
2. B
3. A
4. B
5. B
6. A
7. B
8. B
9. C
10. A

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Explanations

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1. A dental hygienist who activates a light source during a bleaching procedure is performing which type of task?

- A. Administration task**
- B. Irremediable task**
- C. Remediable task**
- D. Surgical task**

A dental hygienist activating a light source during a bleaching procedure is considered to be performing a remediable task. This is because the action involves using equipment or technology to assist in a procedure that can be adjusted or reversed if necessary. Remediable tasks are those that can be amended or corrected without causing lasting harm to the patient. In the context of dental hygiene, activating a light source is a part of the procedural steps that enhance the efficacy of the bleaching process, but if adjustments are needed, these can typically be made without significant risk or complication. In contrast, an administration task typically involves non-clinical duties related to management or organization rather than direct patient care. Irremediable tasks are those that, once performed, cannot be undone or that may cause lasting changes, which is not the case here. Surgical tasks involve invasive procedures that require higher levels of training and are outside the scope of a hygienist's responsibilities during a bleaching procedure. Thus, the choice that aligns with the nature of activating a light source in this setting is clearly a remediable task.

2. How many minutes are equivalent to one hour of continuing education?

- A. 30 minutes**
- B. 50 minutes**
- C. 60 minutes**
- D. 90 minutes**

Continuing education requirements often have specific benchmarks to ensure that practitioners are engaged in meaningful learning. In the context of many professions, including dentistry, one hour of continuing education is typically defined as 60 minutes. This standard is widely accepted and helps create uniformity in measuring educational content. In this case, marking one hour as equivalent to 50 minutes is a notable convention used in some organizations to account for breaks or administrative time that occurs during educational sessions; however, when considering the full duration of active learning and engagement in a session, one hour remains 60 minutes. Understanding this distinction is essential for professionals who need to meet their continuing education requirements properly.

3. Who makes up the Administrative Commission in Florida's dental regulations?

- A. The Governor and Cabinet**
- B. Commissioner of Health**
- C. Local dental associations**
- D. The State Senate**

The Administrative Commission in Florida's dental regulations is comprised of the Governor and Cabinet. This body plays a critical role in overseeing various functions of the Department of Health, including the regulation of dental practices. The Governor and Cabinet's involvement ensures that the state maintains a balance of leadership and accountability in managing public health and professional regulations within the dental field. Their collective actions help to shape policies that protect the public and promote high standards of care in dental practice. Other options, while relevant to different aspects of state governance or dental associations, do not specifically hold the authority to form the Administrative Commission. The Commissioner of Health, for instance, is involved in health oversight but does not constitute the commission. Local dental associations primarily represent the interests of dental professionals and do not engage in legislative oversight. The State Senate, while involved in law-making and oversight, is not the governing body for the commission related to dental regulations.

4. Practice in a private sector is prohibited when a dentist is on which status?

- A. Active Duty**
- B. Military Status**
- C. Enlisted Status**
- D. Reserve Status**

The correct answer is that practice in a private sector is prohibited when a dentist is on military status. This is because individuals in military status are often subject to specific regulations and obligations that prevent them from practicing privately. When a dentist is deployed or engaged in military duties, they must adhere to the protocols of their military service, which can include restrictions on outside employment or practice. Active duty, enlisted status, and reserve status may include various levels of service, but military status encompasses all roles within the military, asserting a comprehensive approach that generally restricts private practice during such periods of service. Understanding this distinction is crucial for dental professionals to remain compliant with both legal and professional standards while serving in military roles.

5. Which of the following statements about advertising for dentists is incorrect?

- A. A dentist may claim he/she has won awards**
- B. Advertising dentist may claim he/she gives superior treatment**
- C. Dentists can advertise their specialties**
- D. Dentists may provide testimonials from satisfied patients**

The statement regarding advertising that is incorrect is the one that claims a dentist may assert they provide superior treatment. In the context of dental advertising, it is important for practitioners to ensure that their claims are not misleading or deceptive. While dentists can share their qualifications and expertise, they cannot misrepresent the quality of their treatment or create unfounded comparisons that imply superiority over other practitioners. This is in line with ethical standards and regulations designed to protect consumers from misleading information in healthcare advertising. In contrast, dentists can legitimately claim awards they have received, as this demonstrates recognition of their professional achievements. Furthermore, advertising specialties is permissible as long as it is backed by proper certification and licenses, thereby informing the public of the dentist's qualifications. Lastly, providing testimonials from patients is allowed, provided those testimonials are truthful and accurately reflect the patients' experiences without exaggeration. This approach maintains transparency and trust in dental practices while adhering to legal advertising standards.

6. Which of the following professionals can provide dental treatment without a license?

- A. None, all require a license**
- B. A dental receptionist**
- C. A dental lab technician**
- D. A dental student under supervision**

All individuals engaging in the practice of dentistry or performing duties that fall under the definition of dental treatment are required to hold a valid dental license to ensure public safety and the delivery of quality care. This requirement protects patients from unqualified individuals performing potentially harmful procedures. While a dental receptionist plays a crucial role in managing the administrative aspects of a dental practice, their duties do not involve performing any clinical dental treatments. Similarly, while a dental lab technician is essential for creating dental appliances and restorations, they also do not provide direct patient care or treatment without proper licensure. A dental student, though not fully licensed, may perform certain procedures under the direct supervision of a licensed dentist as part of their educational curriculum. However, this allowance does not equate to providing treatment independently or without supervision. Thus, the correct understanding is that no professional can deliver dental treatment without a proper license.

7. All heat sensitive instruments must be?

- A. Disposed of after use**
- B. Exposed to a chemical agent**
- C. Steam sterilized**
- D. Used only once and discarded**

Heat-sensitive instruments require careful handling to ensure patient safety and instrument integrity. These instruments cannot withstand high temperatures that are typically necessary for steam sterilization, which is a common method for sterilizing dental tools. Exposing heat-sensitive instruments to a chemical agent is an effective alternative to achieve sterility. Chemical agents can provide the necessary disinfection without exposing the instruments to damaging heat. This process ensures that the instruments are safe for reuse while maintaining their functionality and structural integrity. The other options suggest either disposal or single-use practices, which are not practical or environmentally sustainable approaches in dentistry. Using chemical agents allows for the reuse of instruments, reducing waste while ensuring that patients receive safe and sterilized tools during their dental treatments.

8. Under what supervision can dental assistants cement temporary crowns and bridges with temporary cement?

- A. Indirect supervision**
- B. Direct supervision/formal training**
- C. Self-supervision**
- D. Any supervision available**

The correct response indicates that dental assistants must work under direct supervision or have formal training to cement temporary crowns and bridges with temporary cement. In a dental practice, direct supervision implies that a licensed dentist is present in the office and available to oversee the procedure being performed by the dental assistant. This requirement is crucial for ensuring patient safety and maintaining the quality of care, as the dentist is responsible for the final outcomes of the treatment provided. Formal training is another key aspect that underpins this regulation. It emphasizes that dental assistants should have received specific education or training related to the procedure, reinforcing the importance of competency when performing tasks that affect patient health. This combination of direct supervision and training ensures that there is a qualified professional available to address any issues that may arise during the process and that the assistant has the appropriate knowledge and skills to perform the task safely. In contrast, indirect supervision would not suffice in this case, as it allows for the dentist to be unavailable, which could lead to potential complications or errors not being addressed immediately. Self-supervision would imply that the dental assistant is working independently without oversight, which is not acceptable for procedures that carry risks. The option that any supervision is available lacks the necessary specificity and accountability that governs dental practices and does not align with

9. Under what circumstances can a hygienist replace a periodontal dressing?

- A. Whenever the patient requests it**
- B. Only when the dentist can pre-examine the patient**
- C. When the dentist of record cannot pre-examine the patient**
- D. Hygienists cannot replace the dressing at all**

A hygienist can replace a periodontal dressing when the dentist of record cannot pre-examine the patient. This provision allows hygienists to perform specific functions that are necessary for patient care, especially in situations where access to the dentist is not feasible. The regulation acknowledges the hygienist's training and responsibility to provide care in the interest of patient continuity and wellbeing. This situation is particularly relevant in busy clinical environments where the dentist may be attending to other patients or unforeseen circumstances that prevent them from performing a pre-examination. The hygienist's ability to proceed with the dressing change helps ensure that the patient's treatment is not delayed, facilitating better outcomes in periodontal care. In contrast, replacing the dressing solely based on the patient's request does not align with the professional and regulatory standards guiding dental practice. Similarly, requiring a pre-examination by the dentist for every dressing change could unnecessarily impede timely treatment. The option suggesting that hygienists cannot replace the dressing at all disregards their competencies and the relevant legal framework that allows them to perform certain duties when specific criteria are met.

10. What is required of a dentist's staff if anesthesia is used in the office?

- A. Proper training in anticonvulsants**
- B. Certification in advanced life support**
- C. Experience in patient management**
- D. Knowledge of pharmacology**

In a dental office where anesthesia is utilized, the key requirement for the dentist's staff is to have certification in advanced life support. This certification signifies that the staff members are trained to respond effectively to medical emergencies that may arise during procedures involving anesthesia. Anesthesia can pose various risks, including respiratory complications and cardiac events. Advanced life support training equips the staff with the necessary skills to maintain airway patency, provide cardiopulmonary resuscitation (CPR), and use emergency medications and equipment when needed. This training is crucial for ensuring patient safety, as the dental staff plays a supportive role in responding to any adverse reactions or emergencies that can occur due to anesthesia. While knowledge of pharmacology, experience in patient management, and training in anticonvulsants are all valuable, they do not specifically address the immediate safety and emergency response needs that arise from anesthesia administration. Therefore, certification in advanced life support stands out as the most essential qualification for staff in such situations.