

# DANB General Chairside Practice Test (Sample)

## Study Guide



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**SAMPLE**

## **Questions**

- 1. In the use of a universal matrix band and retainer, what is a true statement regarding their placement?**
  - A. The matrix retainer is placed on the facial surface, and the wedge is placed from the buccal**
  - B. The matrix retainer is placed on the lingual surface, and the wedge is placed from the proximal**
  - C. The matrix retainer is placed on the buccal surface, and the wedge is placed from the lingual**
  - D. The matrix retainer is placed on the occlusal surface, and the wedge is placed from the apical**
- 2. What is typically the first step taken in a dental examination?**
  - A. Application of fluoride treatment**
  - B. Patient medical history assessment**
  - C. Measurement of periodontal depth**
  - D. X-ray imaging**
- 3. In appointment management, what does "downtime" refer to?**
  - A. Time spent cleaning instruments**
  - B. Time before lunch breaks**
  - C. Time during a procedure when waiting is expected**
  - D. Time when patients are not scheduled**
- 4. What action should be taken if a dental assistant feels unqualified to carry out a specific task?**
  - A. Attempt the task anyway for practice**
  - B. Seek confirmation from a patient**
  - C. Notify their supervisor about their qualifications**
  - D. Do not mention it and proceed with the work**
- 5. Which group establishes regulations that govern the practice of dentistry within a state?**
  - A. American Dental Association**
  - B. Board of Dentistry**
  - C. State Dental Association**
  - D. Department of Health**

- 6. General anesthesia is most safely administered in what type of dental office?**
- A. Oral surgeon's**
  - B. Pediatric dentistry**
  - C. Orthodontist's**
  - D. Cosmetic dentistry**
- 7. What is the main reason a composite restoration stays bonded to a tooth?**
- A. Mechanical retention**
  - B. Chemical bonding**
  - C. Physical locking**
  - D. Bonding**
- 8. Which instrument is typically utilized to extract debris or granulation tissue from a surgical site?**
- A. Surgical curette**
  - B. Hemostat**
  - C. Scalpel**
  - D. Explorer**
- 9. Which periodontal procedure is performed to remove bony defects and restore normal contours in the bone?**
- A. Osseous surgery**
  - B. Gingival curettage**
  - C. Flap surgery**
  - D. Bone grafting**
- 10. When extracting information from a patient's record, which guideline should be followed?**
- A. Extract as much information as possible**
  - B. Only extract information related to current treatment**
  - C. Do not extract personal information**
  - D. Share the information with anyone who asks**

## **Answers**

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

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## **Explanations**

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1. In the use of a universal matrix band and retainer, what is a true statement regarding their placement?
- A. The matrix retainer is placed on the facial surface, and the wedge is placed from the buccal
  - B. The matrix retainer is placed on the lingual surface, and the wedge is placed from the proximal
  - C. The matrix retainer is placed on the buccal surface, and the wedge is placed from the lingual**
  - D. The matrix retainer is placed on the occlusal surface, and the wedge is placed from the apical

The choice that states the matrix retainer is placed on the buccal surface, and the wedge is placed from the lingual is correct because it accurately describes the proper placement technique for a universal matrix band and retainer in operative dentistry. When using a universal matrix band, it is important to position the matrix retainer on the buccal aspect of the tooth being prepared. This placement allows for effective contouring of the restoration and proper adaptation to the tooth structure to prevent any gaps that might lead to improper sealing or esthetic issues. The wedge, on the other hand, is inserted from the lingual side. This approach is essential as it helps to ensure that the matrix band is pushed against the proximal surfaces of the adjacent teeth, providing a tight contact point which is crucial for creating a proper seal and achieving the desired interproximal contacts in the final restoration. This technique also minimizes the risk of the matrix band becoming dislodged during the restoration process and facilitates adequate access for the dentist to carry out the filling. While other options present various incorrect placements or orientations of the matrix retainer and wedge, they do not align with the established best practices in dental procedures.

2. What is typically the first step taken in a dental examination?
- A. Application of fluoride treatment
  - B. Patient medical history assessment**
  - C. Measurement of periodontal depth
  - D. X-ray imaging

The first step taken in a dental examination is the assessment of the patient's medical history. This crucial step allows the dental professional to gather important information about the patient's overall health, including any medical conditions, allergies, medications, and previous dental treatments. Understanding a patient's medical history helps in identifying any potential risks, tailoring the dental treatment to the individual needs, and ensuring safe and effective care. Additionally, this step is vital for developing a comprehensive treatment plan, as it provides context for any symptoms the patient may present with during the examination. Establishing this baseline information enables the dental professional to make informed decisions throughout the examination and any subsequent treatments. This focus on the patient's health history is fundamental to providing quality dental care and maintaining patient safety. Other steps, such as the application of fluoride treatment, measurement of periodontal depth, and X-ray imaging, are typically conducted later in the examination process, after the medical history has been reviewed and initial assessments have taken place.

**3. In appointment management, what does "downtime" refer to?**

- A. Time spent cleaning instruments**
- B. Time before lunch breaks**
- C. Time during a procedure when waiting is expected**
- D. Time when patients are not scheduled**

In appointment management, "downtime" refers to periods when the dental practice is not seeing patients and is often considered an opportunity for other necessary tasks or activities. The correct answer highlights the concept of downtime occurring during procedures when waiting is expected. This could occur when a clinician is waiting for lab work to be completed or for a material to set. During these moments, although the procedure is ongoing, there may be intervals when the dental assistant or hygienist has reduced engagement with the patient. Understanding downtime is crucial for effective appointment management, as practices can utilize these moments for workflow optimization, such as cleaning instruments, organizing supplies, or even communicating with other staff members. This understanding helps improve overall practice efficiency, elevating patient care and satisfaction. The other options, while related to time in the practice, do not specifically encapsulate the definition of downtime as it pertains to waiting periods during procedures.

**4. What action should be taken if a dental assistant feels unqualified to carry out a specific task?**

- A. Attempt the task anyway for practice**
- B. Seek confirmation from a patient**
- C. Notify their supervisor about their qualifications**
- D. Do not mention it and proceed with the work**

When a dental assistant feels unqualified to carry out a specific task, it is essential to notify their supervisor about their qualifications. This action is crucial for several reasons. Firstly, it helps ensure patient safety; a patient's health and well-being depend on the competency of the staff performing procedures. Additionally, notifying a supervisor allows for appropriate support or training to be provided, ensuring that the assistant can perform tasks effectively and safely in the future. This process fosters a collaborative and communicative environment in the dental practice, where any gaps in skills can be addressed before attempting potentially complex or sensitive tasks. The other options do not prioritize patient safety or professional duty. Attempting the task without proper qualifications can lead to mistakes that could endanger patients. Seeking confirmation from a patient places the onus of expertise on someone who is not trained to assess the suitability of the procedure being performed. Finally, choosing to ignore the feelings of unqualification and proceeding with the work undermines the professional standards expected in healthcare settings.

**5. Which group establishes regulations that govern the practice of dentistry within a state?**

- A. American Dental Association**
- B. Board of Dentistry**
- C. State Dental Association**
- D. Department of Health**

The Board of Dentistry is the group responsible for establishing regulations that govern the practice of dentistry within a state. This board typically comprises dental professionals and public members who oversee the licensing of dentists and dental hygienists, set standards for dental education, and ensure the enforcement of professional conduct within the field. They enact rules and regulations that define the scope of practice and take disciplinary action against practitioners who violate these standards. The other organizations mentioned, while influential in the dental community, serve different roles. The American Dental Association is a national organization that focuses on advocacy, education, and supporting dental professionals at a broader level, but it does not have regulatory authority within specific states. The State Dental Association offers support and resources to dental practitioners but also lacks regulatory power. The Department of Health may have oversight related to health policies and could work with the Board of Dentistry, but it does not specifically establish the regulations for dental practice. The unique function of the Board of Dentistry makes it the authoritative body in this context.

**6. General anesthesia is most safely administered in what type of dental office?**

- A. Oral surgeon's**
- B. Pediatric dentistry**
- C. Orthodontist's**
- D. Cosmetic dentistry**

The administration of general anesthesia requires specialized training and equipment to ensure the safety and well-being of patients. Oral surgeon's offices are specifically equipped and staffed to handle the complexities associated with general anesthesia. These practices usually have a thorough understanding of surgical procedures, the pharmacology of anesthetic agents, and the management of potential complications. In oral surgery, procedures often involve more significant invasiveness, requiring not just sedation but full anesthesia, which necessitates the presence of a trained anesthetist or the surgeon to monitor the patient's vital signs and ensure a controlled environment. Facilities in this setting adhere to strict guidelines and protocols that promote safety during anesthesia administration. While pediatric dentistry can also use general anesthesia when necessary, these procedures are conducted under specialized pediatric sedation guidelines, which may not be as prevalent in all pediatric dental offices compared to oral surgery settings. Similarly, orthodontists typically do not perform procedures requiring general anesthesia, as their focus is on alignment and movement of teeth. Cosmetic dentists may use sedation techniques, but they usually do not engage in surgeries that would justify or require the comprehensive use of general anesthesia.

**7. What is the main reason a composite restoration stays bonded to a tooth?**

- A. Mechanical retention**
- B. Chemical bonding**
- C. Physical locking**
- D. Bonding**

The main reason a composite restoration stays bonded to a tooth is due to bonding, which involves both mechanical and chemical aspects that contribute to the overall adhesion of the material. In the context of dental restorations, bonding refers to the use of bonding agents that create a strong interface between the composite material and the tooth structure. These agents often contain components that promote both micromechanical retention by penetrating the microscopic porosities of the tooth and chemical interactions that form strong bonds at the molecular level. This bonding process enhances the longevity and durability of the restoration, allowing it to withstand the forces of biting and chewing while preventing debonding over time. Effective bonding is critical in achieving a successful composite restoration that mimics the natural tooth structure in both aesthetics and function.

**8. Which instrument is typically utilized to extract debris or granulation tissue from a surgical site?**

- A. Surgical curette**
- B. Hemostat**
- C. Scalpel**
- D. Explorer**

A surgical curette is specifically designed for the purpose of cleaning out tissue and debris from surgical sites. Its spoon-shaped end allows for effective scraping and removal of granulation tissue, which is important for maintaining a clean wound environment and promoting proper healing. This instrument is commonly used in various surgical procedures, especially in oral and periodontal surgeries, where the removal of tissue debris is crucial prior to further treatment or closure of the wound. In contrast, a hemostat is primarily used to clamp blood vessels or tissues to control bleeding, a scalpel is designed for making incisions in tissues, and an explorer is utilized for examining surfaces of teeth and tissues, typically to detect cavities or other concerns. Each of these tools serves a distinct purpose that does not align with the specific function of removing debris or granulation tissue from a surgical site.

**9. Which periodontal procedure is performed to remove bony defects and restore normal contours in the bone?**

- A. Osseous surgery**
- B. Gingival curettage**
- C. Flap surgery**
- D. Bone grafting**

Osseous surgery is specifically designed to correct and restore the contours of the bone that have been affected by periodontal disease. This procedure involves reshaping the bone around the teeth to eliminate bony defects, which can help improve the overall health of the periodontal tissue and provide better support for the teeth. The goal of osseous surgery is to promote a more harmonious relationship between the teeth and their supporting structures, thereby enhancing the healing environment. While gingival curettage focuses on cleaning the soft tissue and removing diseased tissue from the gums, it does not directly address the bony contours. Flap surgery involves lifting the gums away from the teeth to provide access to the underlying bone and tissue for treatment, but it may not specifically aim to reshape the bone itself. Bone grafting is a procedure that involves adding bone material to areas where bone density is reduced or absent, rather than reshaping existing bone contours. Each of these other procedures plays an important role in periodontal treatment, but osseous surgery is distinct in its specific focus on removing bony defects and restoring the normal architecture of the bone.

**10. When extracting information from a patient's record, which guideline should be followed?**

- A. Extract as much information as possible**
- B. Only extract information related to current treatment**
- C. Do not extract personal information**
- D. Share the information with anyone who asks**

The correct response emphasizes the importance of patient confidentiality and protecting personal information in accordance with ethical guidelines and legal regulations such as HIPAA (Health Insurance Portability and Accountability Act). When handling patient records, it is crucial to respect the privacy of individuals by not disclosing any personal information unless it is necessary for treatment or required by law. This approach not only protects the patient's rights but also fosters trust between the patient and the healthcare provider. Maintaining confidentiality is a cornerstone of healthcare practice, ensuring sensitive information remains secure and is disclosed only to authorized personnel involved in the patient's care. In contrast, other answers may overlook the significance of privacy. Extracting as much information as possible does not consider the relevance of the data to the current treatment. Focusing solely on information related to current treatment is a restrictive approach that may impede holistic care. Sharing information with anyone who asks directly violates the principles of patient confidentiality and can lead to legal repercussions.