

INBDE (Integrated National Board Dental Examination) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

SAMPLE

Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

SAMPLE

1. Primary anterior teeth are positioned _____ to their permanent successors.

- A. Labial**
- B. Lingual**
- C. Mesial**
- D. Distal**

2. What is the most common cause of masticatory pain?

- A. Dental caries**
- B. Myofascial pain syndrome**
- C. Gum disease**
- D. Sinusitis**

3. Dental plan that allows the dentist to charge the patient any difference between what the plan agrees to pay and the dentist's UCR fees is called?

- A. Direct reimbursement**
- B. Capitation**
- C. Indemnity**
- D. Balance billing**

4. Moving the jaw to the right uses which muscle?

- A. Right masseter**
- B. Right lateral pterygoid**
- C. Left masseter**
- D. Left lateral pterygoid**

5. What kind of biopsy would you perform on necrotizing sialometaplasia?

- A. Excisional**
- B. Incisional**
- C. Punch**
- D. Brush**

6. During what stage of tooth development does fluorosis occur?

- A. Calcification**
- B. Eruption**
- C. Initiation**
- D. Proliferation**

7. What layer, made of smooth muscles and elastic fibers, is thicker in arteries?

- A. Tunica Intima**
- B. Tunica Media**
- C. Tunica Adventitia**
- D. Endothelium**

8. What is the least reliable vitality testing method?

- A. Thermal testing**
- B. Laser Doppler flowmetry**
- C. EPT**
- D. Radiographs**

9. What is the most common cause of inadequate attached gingiva?

- A. Improper brushing technique**
- B. Genetic predisposition**
- C. Labial eruption path**
- D. Medications**

10. What type of tertiary dentin is a reaction to major damage?

- A. Primary**
- B. Secondary**
- C. Reactionary**
- D. Reparative**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Primary anterior teeth are positioned _____ to their permanent successors.

- A. Labial**
- B. Lingual**
- C. Mesial**
- D. Distal**

Primary anterior teeth align themselves labially to their permanent successors as the permanent teeth erupt. This means they are situated closer to the lips or front surface of the mouth, rather than towards the back or sides (lingual, mesial, or distal). While the positions of primary teeth may vary slightly from child to child, the direction of eruption is consistent. Therefore, the primary teeth will always be located labially to their permanent successors.

2. What is the most common cause of masticatory pain?

- A. Dental caries**
- B. Myofascial pain syndrome**
- C. Gum disease**
- D. Sinusitis**

Masticatory pain refers to pain in the muscles involved in chewing, such as the jaw muscles. While dental caries (tooth decay) can certainly cause masticatory pain, it is not the most common cause. This is because dental caries can also present with other symptoms, such as toothache or sensitivity, and may not always cause masticatory pain. Likewise, gum disease can cause discomfort in the mouth and jaw, but it is not generally the main cause of masticatory pain. Sinusitis is inflammation or infection of the sinus cavities and can cause pain in the upper teeth and face, but it is not considered a common cause of masticatory pain. Similarly, while sinusitis can cause pain in the jaw, this is usually due to referred pain and not a primary cause of masticatory pain. The most common cause of masticatory pain is myofascial pain syndrome, which is a chronic condition where muscles in the jaw, neck, and face become tender or painful without any apparent reason. This can be due to overuse, poor posture, or stress, among other factors. Therefore, it is important to consider myofascial pain syndrome as a common cause of masticatory

3. Dental plan that allows the dentist to charge the patient any difference between what the plan agrees to pay and the dentist's UCR fees is called?

- A. Direct reimbursement**
- B. Capitation**
- C. Indemnity**
- D. Balance billing**

In a dental plan where the dentist is allowed to charge the patient the difference between what the insurance plan agrees to pay and the dentist's Usual, Customary, and Reasonable (UCR) fees, it is referred to as "balance billing." This practice enables the dentist to bill the patient for any remaining amount not covered by the insurance plan. Option A, Direct reimbursement, refers to a method where the dentist is reimbursed directly by the patient for the services rendered, with the patient later seeking reimbursement from their insurance plan, if applicable. Option B, Capitation, involves a fixed monthly fee paid by the patient to the dentist or the dental practice, regardless of the services provided. This model often includes a set range of covered services. Option C, Indemnity, is a traditional fee-for-service insurance plan where patients can choose their preferred dentist, and the plan will pay a portion of the fees for covered services. Patients may be responsible for the remaining balance after insurance coverage.

4. Moving the jaw to the right uses which muscle?

- A. Right masseter**
- B. Right lateral pterygoid**
- C. Left masseter**
- D. Left lateral pterygoid**

Moving the jaw to the right involves mainly the right lateral pterygoid muscle. The lateral pterygoid muscles are responsible for moving the mandible in various directions, such as opening the mouth and moving the jaw from side to side. When moving the jaw to the right, the left lateral pterygoid muscle contracts to pull the jaw to the opposite side, which in this case is the right side. Therefore, the correct answer is D. The other options (A, C) are not correct as they mention the masseter muscles, which are primarily responsible for closing the jaw (e.g., during chewing) and not specifically for moving the jaw from side to side.

5. What kind of biopsy would you perform on necrotizing sialometaplasia?

- A. Excisional
- B. Incisional**
- C. Punch
- D. Brush

Necrotizing sialometaplasia is a rare condition that affects the salivary glands and can present as a painful ulcer. It is usually self-limiting and benign but it may mimic cancerous lesions. Therefore, it is important to perform a biopsy to confirm the diagnosis. In this case, an incisional biopsy would be the most appropriate as it allows for a larger tissue sample to be obtained, which is important given the nature of this condition. Excisional biopsy involves removing the entire lesion and would not provide enough tissue for examination. Punch biopsy is helpful for superficial lesions but may not be suitable for deeper tissues. Brush biopsy is commonly used for oral lesions but may not be ideal for necrotizing sialometaplasia as it may not adequately capture deeper layers of the lesion. Therefore, incisional biopsy is the most appropriate choice for this case.

6. During what stage of tooth development does fluorosis occur?

- A. Calcification**
- B. Eruption
- C. Initiation
- D. Proliferation

Fluorosis is a condition that occurs when the consumption of excess fluoride during tooth development leads to changes in the appearance and strength of tooth enamel. This usually occurs during the stage of tooth development known as calcification, when the tooth enamel is forming and hardening. At this stage, the tooth is still developing and is more susceptible to the effects of excess fluoride. Options B, C, and D refer to earlier stages of tooth development and therefore do not accurately answer the question about when fluorosis occurs.

7. What layer, made of smooth muscles and elastic fibers, is thicker in arteries?

- A. Tunica Intima
- B. Tunica Media**
- C. Tunica Adventitia
- D. Endothelium

The tunica media is the correct answer because it is the middle layer of an artery responsible for maintaining and adjusting blood pressure. The tunica intima is the innermost layer, consisting of endothelial cells. The tunica adventitia is the outermost layer, providing structural support. The endothelium, while part of the tunica intima, is not a specific layer and is responsible for many functions such as regulating blood flow and maintaining blood vessel health. Therefore, it is thicker in arteries because of its smooth muscles and elastic fibers that allow it to adjust and regulate blood pressure.

8. What is the least reliable vitality testing method?

- A. Thermal testing
- B. Laser Doppler flowmetry
- C. EPT**
- D. Radiographs

EPT (electric pulp testing) is the least reliable vitality testing method because it only measures the ability of a nerve to conduct electricity, rather than directly measuring the nerve's vitality. It can be affected by many factors such as moisture, temperature, and the thickness of dentin. This makes the results less accurate compared to thermal testing, which directly measures the nerve's response to temperature, or laser Doppler flowmetry, which measures blood flow in the pulp. Radiographs, while not a vitality testing method, can also provide information about the health of the pulp and surrounding structures and can help confirm initial test results.

9. What is the most common cause of inadequate attached gingiva?

- A. Improper brushing technique
- B. Genetic predisposition
- C. Labial eruption path**
- D. Medications

Inadequate attached gingiva is most commonly caused by a labial eruption path, in which the eruption of the tooth causes the gum tissue to be stretched and pulled away from the tooth. This can result in a lack of attached gingiva and an increased risk for periodontal disease. Improper brushing technique and genetic predisposition may contribute to inadequate attached gingiva, but they are not the most common cause. Medications can also affect the health of the gingival tissue, but they are not typically the primary cause of inadequate attached gingiva.

10. What type of tertiary dentin is a reaction to major damage?

- A. Primary
- B. Secondary
- C. Reactionary
- D. Reparative**

Reparative tertiary dentin is formed as a response to severe damage or injury to the tooth, this includes trauma, deep decay, or large restoration treatments. Primary tertiary dentin refers to the continuous slow growth of dentin that occurs throughout the life of a tooth. Secondary tertiary dentin is formed in response to moderate damage or irritation. Reactionary tertiary dentin is formed as a result of mild to moderate damage or irritation. It is important to note that reparative tertiary dentin is not formed in response to minor irritations and is only formed when there is severe damage or injury to the tooth. Therefore, options A, B, and C are incorrect.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://inbde.examzify.com>

We wish you the very best on your exam journey. You've got this!

SAMPLE