

National Board Dental Hygiene Examination (NBDHE) Dental Hygienist Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of questions,

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

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- 1. Which oral condition results from excessive buildup of plaque and calculus?**
 - A. Halitosis**
 - B. Cavities**
 - C. Periodontal disease**
 - D. Oral candidiasis**
- 2. What is the recommended way to clean a removable prosthesis in a dental clinic?**
 - A. Wash with soap and water**
 - B. Put denture in disinfectant, clean in an ultrasonic and brush with a denture brush**
 - C. Rinse with alcohol**
 - D. Sterilize using heat**
- 3. Which structure is primarily affected by periodontal disease?**
 - A. Enamel**
 - B. Pulp**
 - C. Periodontal ligament**
 - D. Dentin**
- 4. Which type of x-ray is primarily used for visualizing the interproximal areas of teeth?**
 - A. Bite-wing**
 - B. Panoramic**
 - C. Periapical**
 - D. Occlusal**
- 5. If a patient has supragingival calculus covering more than 1/3 but less than 2/3 of the exposed teeth, what calculus rating should the hygienist assign?**
 - A. 1**
 - B. 2**
 - C. 3**
 - D. 4**

6. What type of disease is periodontal disease most often associated with smoking?

- A. Infectious disease**
- B. Autoimmune disease**
- C. Chronic disease**
- D. Genetic disease**

7. What processes fail to fuse during fetal development resulting in a bilateral cleft lip?

- A. Palatine and lateral nasal processes**
- B. Maxillary and medial nasal processes**
- C. Maxillary and palatine processes**
- D. Medial nasal and lateral nasal processes**

8. A veneer will correct all of the following except?

- A. Slightly crooked teeth**
- B. A tooth with a cavity**
- C. Chipped teeth**
- D. Gaps between teeth**

9. Which of the following Gracey area-specific curettes would be appropriate to use on the mesial of posterior teeth?

- A. 3/4**
- B. 7/8**
- C. 11/12**
- D. 13/14**

10. Which brushing technique places the bristles at the attached gingiva and sweeps them apically?

- A. Modified Bass**
- B. Roll**
- C. Charter's**
- D. Stillman's**

Answers

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

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Explanations

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1. Which oral condition results from excessive buildup of plaque and calculus?

- A. Halitosis**
- B. Cavities**
- C. Periodontal disease**
- D. Oral candidiasis**

The correct answer highlights the relationship between excessive buildup of plaque and calculus and its impact on periodontal health. When plaque, a soft bacterial film, is not regularly and thoroughly removed through brushing and flossing, it hardens into calculus (tartar). This accumulation can lead to inflammation of the gums (gingivitis) and, if left untreated, can progress to more severe conditions known as periodontal disease. Periodontal disease encompasses a range of conditions affecting the supporting structures of the teeth, including the gums, periodontal ligament, and alveolar bone. The presence of plaque and calculus creates an environment that promotes the growth of harmful bacteria, leading to destructive processes which can cause gum recession, loss of tooth-supporting bone, and even tooth mobility or loss. In contrast, halitosis refers to bad breath, which may be a symptom of underlying oral health issues but is not directly caused by plaque and calculus alone. Cavities, or dental caries, result from the demineralization of tooth structure due to acids produced by bacteria in plaque but are not directly linked to the buildup of calculus. Oral candidiasis is a fungal infection in the mouth that is unrelated to plaque and calculus accumulation. Thus, periodontal disease is the direct consequence of excessive plaque and calculus

2. What is the recommended way to clean a removable prosthesis in a dental clinic?

- A. Wash with soap and water**
- B. Put denture in disinfectant, clean in an ultrasonic and brush with a denture brush**
- C. Rinse with alcohol**
- D. Sterilize using heat**

The recommended method for cleaning a removable prosthesis in a dental clinic combines multiple effective cleaning techniques to ensure thorough disinfection. Placing the denture in a disinfectant solution is essential for killing microorganisms that may be present on the surface. Following this, using an ultrasonic cleaner can effectively remove debris and deposits that might be hard to reach or may cling to the prosthesis, providing a level of cleaning that manual methods alone might not achieve. Finally, brushing with a denture brush allows for mechanical removal of any remaining plaque or food particles, ensuring the prosthesis is clean and safe for use. This combination of disinfection and mechanical cleaning techniques not only enhances the cleanliness and longevity of the prosthesis but also promotes good oral health by reducing the risk of infections and ensuring that the prosthesis is well-maintained.

3. Which structure is primarily affected by periodontal disease?

- A. Enamel**
- B. Pulp**
- C. Periodontal ligament**
- D. Dentin**

Periodontal disease primarily affects the periodontal ligament, which is a critical structure in the periodontal system. This ligament helps anchor the tooth to the alveolar bone and provides the necessary support for the teeth during chewing and other functions. When periodontal disease occurs, it leads to inflammation, destruction of the periodontal ligament, and potential loss of support for the tooth. This condition can result in mobility of the teeth or even tooth loss if left untreated. Other structures such as enamel, pulp, and dentin are important to tooth health; however, they are not the primary targets of periodontal disease. Enamel can be affected by caries and erosion, pulp can become compromised by various conditions including deep decay or injury, and dentin can suffer from pulpitis or sensitivity issues. While these structures are vital to overall oral health, the hallmark of periodontal disease is its impact on the periodontal tissues, specifically the periodontal ligament and surrounding connective tissues. Thus, the correct answer highlights the most affected area in the context of periodontal disease.

4. Which type of x-ray is primarily used for visualizing the interproximal areas of teeth?

- A. Bite-wing**
- B. Panoramic**
- C. Periapical**
- D. Occlusal**

The bite-wing x-ray is specifically designed for visualizing the interproximal areas of the teeth, particularly in the posterior region of the mouth. This type of radiograph captures the crowns of the teeth and the bone levels between adjacent teeth, making it highly useful in detecting interproximal caries, periodontal disease, and assessing restorative work. The unique positioning of the film or digital sensor in a bite-wing x-ray, which is placed parallel to the biting surface of the teeth, allows clinicians to see the contacts and potential cavities between them clearly. This characteristic makes the bite-wing x-ray an essential tool in routine dental examinations and preventive care. In contrast, panoramic x-rays provide a broad view of the entire dental arch and surrounding structures but do not focus on the details of interproximal spaces. Periapical x-rays capture the full length of individual teeth, including the root, but may miss the finer details of contacts between adjacent teeth. Occlusal x-rays are typically employed to view the occlusal surfaces of teeth or to visualize the jawbone anatomy, which does not prioritize interproximal assessment. Thus, the bite-wing is clearly the most effective option for evaluating the interproximal areas of teeth.

5. If a patient has supragingival calculus covering more than 1/3 but less than 2/3 of the exposed teeth, what calculus rating should the hygienist assign?

- A. 1**
- B. 2**
- C. 3**
- D. 4**

The calculus rating is a way to categorize the amount of supragingival calculus present on the teeth, which helps in determining the appropriate treatment and degree of cleaning needed for the patient. When supragingival calculus covers more than one-third but less than two-thirds of the exposed teeth, the scenario fits the designated criteria for a rating of 2. This rating indicates a moderate amount of calculus present on the teeth, reflecting a level of oral hygiene that may require more intensive periodontal care and professional cleaning. A calculus rating of 2 helps the dental hygienist to plan for the appropriate scaling and prophylactic measures that will effectively address the calculus buildup, promoting better oral health outcomes for the patient. Understanding these categories is essential for accurate assessment and effective treatment planning in dental hygiene practice.

6. What type of disease is periodontal disease most often associated with smoking?

- A. Infectious disease**
- B. Autoimmune disease**
- C. Chronic disease**
- D. Genetic disease**

Periodontal disease is categorized as a chronic disease, particularly in the context of smoking. Chronic diseases are characterized by long-lasting characteristics and typically progress over a longer period. Smoking significantly impacts the health of the periodontium by contributing to the inflammatory processes associated with periodontal diseases like gingivitis and periodontitis. Individuals who smoke are at a greater risk for chronic periodontal disease because tobacco smoke interferes with the host's immune response, making it difficult for the body to combat infections and maintain oral health. As a result, smokers often exhibit more severe periodontal disease and may experience greater attachment loss and bone loss compared to non-smokers. In contrast, infectious diseases, while they can relate to periodontal issues, are generally acute and caused by pathogens. Autoimmune diseases involve the immune system mistakenly attacking the body's own cells, which is a different mechanism than that involved in periodontal disease exacerbated by smoking. Genetic diseases are inherited and typically not modifiable by lifestyle choices such as smoking. Thus, the chronic nature of periodontal disease, especially as influenced by smoking, aligns with its classification as a chronic disease.

7. What processes fail to fuse during fetal development resulting in a bilateral cleft lip?

- A. Palatine and lateral nasal processes**
- B. Maxillary and medial nasal processes**
- C. Maxillary and palatine processes**
- D. Medial nasal and lateral nasal processes**

A bilateral cleft lip occurs due to the failure of fusion between the maxillary processes and the medial nasal processes during fetal development. Normally, during embryogenesis, these structures come together to form a continuous upper lip. If this fusion does not occur correctly, it results in a gap that characterizes a cleft lip. The maxillary processes contribute to the formation of the sides of the upper lip, while the medial nasal processes are responsible for forming the center part. If these areas do not unite, a cleft can form, potentially on both sides of the lip, hence "bilateral." This is a critical aspect of embryonic facial development, and understanding it helps in recognizing the implications for surgical correction and management in affected individuals.

8. A veneer will correct all of the following except?

- A. Slightly crooked teeth**
- B. A tooth with a cavity**
- C. Chipped teeth**
- D. Gaps between teeth**

Veneers are thin shells of porcelain or composite resin that are bonded to the front surface of teeth to enhance their appearance. They are particularly effective for improving the aesthetics of slightly crooked teeth, covering chipped teeth, and closing gaps between teeth. However, their application is not suitable for restoring function or structure to teeth that have active issues, such as cavities. When a tooth has a cavity, it requires restorative treatment to address the decay and prevent further damage. Restorative procedures like fillings or crowns are necessary to repair the health of the tooth structure before any cosmetic treatment like veneers can be considered. Veneers can improve the appearance of a tooth, but they do not treat underlying conditions such as decay. Thus, for a tooth with a cavity, veneers would not be an appropriate solution. This understanding highlights the importance of addressing dental health problems first before considering cosmetic enhancements.

9. Which of the following Gracey area-specific curettes would be appropriate to use on the mesial of posterior teeth?

- A. 3/4**
- B. 7/8**
- C. 11/12**
- D. 13/14**

The Gracey 11/12 area-specific curette is designed specifically for use on the mesial surfaces of posterior teeth. This instrument has a blade that is angulated to allow for optimal adaptation to the contours of the tooth in this area. The unique design of the Gracey curettes, with their cutting edges positioned at a specific angle, enables clinicians to achieve efficient scaling and root planing while minimizing tissue trauma. The 11/12 curette's blade is curved and the cutting edge is specifically configured to facilitate access to the mesial surfaces of the molars and premolars, making it an effective choice for maintaining periodontal health in these regions. Its use is crucial for the removal of plaque and calculus from the mesial aspect, which can often be difficult to access with other instruments. Using the 11/12 for mesial surfaces ensures that the clinician employs the correct tool for effective plaque control, ultimately contributing to better patient outcomes in periodontal therapy.

10. Which brushing technique places the bristles at the attached gingiva and sweeps them apically?

- A. Modified Bass**
- B. Roll**
- C. Charter's**
- D. Stillman's**

The brushing technique that places the bristles at the attached gingiva and sweeps them apically is known as the Roll technique. This technique involves positioning the toothbrush such that the bristles are placed at the gingival margin and then gently rolling the bristles toward the occlusal surface. This action helps to effectively clean the teeth and massage the gums while stimulating the gingival tissues. It is particularly beneficial for removing plaque and debris from the gingival area and can be easy for patients to perform. The other techniques, while they have their specific purposes, do not have the same approach as the Roll technique. For instance, the Modified Bass technique combines a vibratory motion with a slight rolling action, but it starts with the bristles at the gum line and angles them into the sulcus rather than sweeping them apically from the attached gingiva. Charter's technique is primarily designed for cleaning above the gum line and is often recommended for patients with orthodontic appliances. Stillman's technique is utilized for gingival stimulation but also requires a different angle and motion compared to the Roll technique.

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://dentalhygienist-nbdhe.examzify.com>

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

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