Ohio Expanded Function Dental Assistant (EFDA) Board Practice Exam (Sample)

Study Guide

Everything you need from our exam experts!

Questions

1. What cement can be used as a base and obtundant for dental procedures?

A. Zinc phosphate

B. Zinc oxide eugenol

C. Glass ionomer

D. Calcium hydroxide

2. What are the signs of gingivitis that an EFDA should recognize?

A. Red, swollen gums, bleeding when brushing or flossing, and bad breath

B. Tooth discoloration and increased tooth sensitivity

C. Loose teeth and persistent toothache

D. Severe bone loss and gum recession

3. What is one critical factor to consider when handling sharp instruments?

A. Always using proper safety protocols to prevent injury

B. Using the sharpest instrument available for efficiency

C. Disposing of instruments immediately after use

D. Ensuring instruments are cleaned in a specific order

4. Identify an indication for using a space maintainer.

A. When a primary tooth is lost prematurely, maintaining space for the permanent tooth

B. When a permanent tooth is loose and requires reinforcement

C. When a patient has overcrowded teeth

D. For orthodontic purposes and alignment adjustments

5. What step is involved in applying a dental veneer?

A. Tooth extraction

B. Taking impressions

C. Fitting a dental crown

D. Adjusting bite alignment

6. What is the primary purpose of using copal varnish in dental restorations?

- **A. For aesthetic purposes**
- **B. To strengthen enamel**
- **C. To seal the dentin**
- **D. To enhance adhesion**

7. What information should be included in informed consent?

- **A. Details about the procedure, risks, benefits, and alternatives to the proposed treatment**
- **B. Only the benefits of the proposed treatment**
- **C. The treatment cost and time frame**
- **D. A list of all medications prescribed**

8. Which of the following is an important property of zinc oxide eugenol as a dental material?

- **A. High thermal conductivity**
- **B. Good bonding strength**
- **C. Ability to provide pulpal protection**
- **D. Long setting time**

9. Why is it essential to take a thorough medical history from a patient?

- **A. It helps identify emergency contact information.**
- **B. It provides insight into the patient's personal preferences.**
- **C. It helps identify any medical conditions affecting treatment.**
- **D. It ensures that appointment times are efficient.**

10. Which type of dental radiograph is commonly used for diagnosing periodontal disease?

- **A. PANORAMIC radiographs**
- **B. Bitewing radiographs**
- **C. Periapical radiographs**
- **D. Cephalometric radiographs**

Answers

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

Explanations

1. What cement can be used as a base and obtundant for dental procedures?

A. Zinc phosphate

B. Zinc oxide eugenol

C. Glass ionomer

D. Calcium hydroxide

Zinc oxide eugenol is recognized for its properties that make it suitable as a base and obtundant in dental procedures. It has a soothing effect on the pulp due to the eugenol content, which helps in reducing inflammation. This property is particularly beneficial when it is used in deep cavity preparations where the pulp may be sensitive or exposed. The cement also has good sealing abilities and can provide thermal insulation, which helps in protecting the pulp from thermal irritants. Additionally, zinc oxide eugenol can be used with a variety of restorative materials and serves as an effective barrier against bacteria, reducing the likelihood of postoperative complications. Its ease of manipulation and ability to set quickly under moisture are also advantageous in clinical settings. These combined properties make zinc oxide eugenol an ideal choice for dentists when selecting a cement for bases and obtundants in restorative dentistry. In comparison, while other options like zinc phosphate, glass ionomer, and calcium hydroxide also have their own uses in dental applications, they may lack some of the specific soothing properties and sealing capabilities that zinc oxide eugenol offers, making it the more effective choice in this context.

2. What are the signs of gingivitis that an EFDA should recognize?

A. Red, swollen gums, bleeding when brushing or flossing, and bad breath

B. Tooth discoloration and increased tooth sensitivity

C. Loose teeth and persistent toothache

D. Severe bone loss and gum recession

The signs of gingivitis that an EFDA should recognize include red and swollen gums, bleeding when brushing or flossing, and bad breath. These indicators are classic symptoms of gingivitis, which is an inflammation of the gums caused by plaque buildup at the gumline. When the gums are healthy, they appear pink and should not bleed during routine oral hygiene practices such as brushing or flossing. The inflammation can also lead to malodor, contributing to bad breath. In contrast, the other choices present symptoms that are more associated with more advanced stages of periodontal disease or other dental conditions. For example, tooth discoloration and increased tooth sensitivity often relate to dental caries or other dental issues rather than gingivitis specifically. Loose teeth and persistent toothache suggest a significant progression of periodontal disease or infection, while severe bone loss and gum recession are typically characteristics of advanced periodontitis rather than gingivitis. Recognizing gingivitis early through its primary signs can help in preventing further periodontal complications.

3. What is one critical factor to consider when handling sharp instruments?

A. Always using proper safety protocols to prevent injury

B. Using the sharpest instrument available for efficiency

C. Disposing of instruments immediately after use

D. Ensuring instruments are cleaned in a specific order

One critical factor when handling sharp instruments is the adherence to proper safety protocols to prevent injury. Safety protocols are designed to minimize accidents and ensure a safe working environment. This includes techniques such as proper handling and passing of instruments, the use of protective equipment, and being aware of one's surroundings to avoid accidental cuts or punctures. Implementing these safety measures significantly decreases the risk of injuries to both dental professionals and patients, thereby reinforcing the importance of safety in the clinical environment. Other options, while they may seem relevant, do not prioritize the immediate safety considerations when handling sharp instruments. For example, using the sharpest instrument available focuses on efficiency rather than safety, and while sharp instruments can indeed facilitate procedures, they also pose a higher risk of injury if not handled correctly. Likewise, disposing of instruments immediately after use is important for infection control, but it does not address the safe handling of the instruments while they are still in use. Finally, ensuring that instruments are cleaned in a specific order pertains to hygiene rather than the immediate risks associated with handling sharp items. Thus, focusing on safety protocols is paramount.

4. Identify an indication for using a space maintainer.

A. When a primary tooth is lost prematurely, maintaining space for the permanent tooth

B. When a permanent tooth is loose and requires reinforcement

C. When a patient has overcrowded teeth

D. For orthodontic purposes and alignment adjustments

Using a space maintainer is particularly important when a primary tooth is lost prematurely because it helps preserve the space necessary for the proper eruption of the permanent tooth that will eventually replace it. If a primary tooth is lost too early, adjacent teeth may drift into the space where the lost tooth was, causing misalignment or a lack of room for the permanent tooth. This can lead to complications in the dental arch and potentially require more complex orthodontic treatment later on. By maintaining the space, the space maintainer ensures that the permanent teeth have the adequate room they need to erupt properly and align correctly, supporting overall dental health and function. The other situations described do not directly relate to the primary purpose of a space maintainer. For example, when a permanent tooth is loose, it typically requires different intervention than simply maintaining space, such as assessing and possibly stabilizing the tooth. In cases of overcrowded teeth, the focus is often on tooth extraction or orthodontic treatment rather than space maintenance. Lastly, while space maintainers can have implications in orthodontics, they are specifically designed to hold space after premature tooth loss and are not primarily used just for alignment adjustments.

5. What step is involved in applying a dental veneer?

A. Tooth extraction

B. Taking impressions

C. Fitting a dental crown

D. Adjusting bite alignment

Taking impressions is a crucial step in the application of dental veneers. This process involves creating a precise mold of the patient's teeth to ensure that the veneers fit accurately and blend seamlessly with the natural dental anatomy. The impressions capture details such as the contours, shapes, and spaces of the teeth, providing the dental technician with essential information to fabricate custom veneers that will enhance the patient's smile while ensuring proper function. The accuracy of the impressions significantly influences the final outcome, as poorly made impressions could result in ill-fitting veneers. Consequently, taking high-quality impressions is key to achieving both aesthetic and functional success in the veneer application process.

6. What is the primary purpose of using copal varnish in dental restorations?

A. For aesthetic purposes

B. To strengthen enamel

C. To seal the dentin

D. To enhance adhesion

The primary purpose of using copal varnish in dental restorations is to seal the dentin. Copal varnish forms a protective layer over the dentin surface, which helps to seal the tubules and minimize the potential for postoperative sensitivity and discomfort. By effectively sealing the dentin, it reduces the possibility of moisture or other irritants penetrating and affecting the pulp. This is particularly important in restorative procedures where the dentin is exposed during cavity preparation, as it can help protect the tooth structure and maintain pulp health. Using copal varnish does not significantly enhance adhesion or strengthen enamel. While aesthetic considerations may play a role in other materials used for restoration, copal varnish is specifically aimed at providing a barrier for the exposed dentin rather than addressing cosmetic concerns.

7. What information should be included in informed consent?

A. Details about the procedure, risks, benefits, and alternatives to the proposed treatment

B. Only the benefits of the proposed treatment

C. The treatment cost and time frame

D. A list of all medications prescribed

The inclusion of details about the procedure, risks, benefits, and alternatives to the proposed treatment in informed consent is essential because it ensures patients are fully educated about their healthcare decisions. Informed consent serves to empower patients, allowing them to understand what to expect from a treatment, the potential complications that may arise, the advantages of undergoing the treatment, and the alternative options available to them. By providing this comprehensive information, healthcare professionals uphold ethical standards and legal obligations, ensuring that patients can make informed choices aligned with their values and preferences. This level of detailed explanation goes beyond simply stating the benefits and protects patients' rights, as they are informed about possible negative outcomes and can weigh their options effectively. Informed consent is not just a formality; it is a process that fosters trust between the patient and the provider, ensuring transparent communication. Other aspects of the proposed answers, such as treatment costs and specific medication lists, may be relevant in certain contexts but do not encompass the fundamental components of informed consent, which prioritize understanding the medical procedure itself.

8. Which of the following is an important property of zinc oxide eugenol as a dental material?

A. High thermal conductivity

B. Good bonding strength

C. Ability to provide pulpal protection

D. Long setting time

Zinc oxide eugenol (ZOE) is recognized for its important property of providing pulpal protection. This characteristic is particularly significant in dental applications, as it can serve as a base or lining material under restorations, especially in situations where the pulp may be at risk of irritation or damage due to thermal exposure or chemical irritation. The formulation of ZOE allows it to create a barrier that mitigates potential harm to the dental pulp, making it useful for temporary restorations and in endodontic therapy. While zinc oxide eugenol may not exhibit high thermal conductivity, have strong bonding strength, or possess an extended setting time compared to other materials, its capacity to protect the pulp is crucial in various dental procedures, helping to ensure that the underlying tooth structure remains healthy and free from exacerbation due to the restorative materials placed over it.

9. Why is it essential to take a thorough medical history from a patient?

A. It helps identify emergency contact information.

B. It provides insight into the patient's personal preferences.

C. It helps identify any medical conditions affecting treatment.

D. It ensures that appointment times are efficient.

Taking a thorough medical history from a patient is essential primarily because it helps identify any medical conditions that may affect their treatment. Understanding a patient's medical history allows dental professionals to tailor care to individual needs and avoid potential complications. Certain medications, allergies, and pre-existing health conditions can significantly influence treatment options and decisions. For example, a patient with heart disease may require special considerations when administering local anesthetics, while someone with a history of bleeding disorders may need precautions during procedures. In essence, a detailed medical history facilitates safer and more effective dental care by ensuring that the dentist is fully informed about all factors that may impact treatment outcomes.

10. Which type of dental radiograph is commonly used for diagnosing periodontal disease?

A. PANORAMIC radiographs

B. Bitewing radiographs

C. Periapical radiographs

D. Cephalometric radiographs

Bitewing radiographs are commonly used for diagnosing periodontal disease due to their ability to capture the interproximal areas of the teeth and the bone level surrounding them. These films provide critical information about the height of the alveolar bone, which is essential for assessing periodontal health. By showing the relationship between the crowns of the teeth and the supporting bone, bitewing radiographs can highlight areas of bone loss or periodontal pockets, helping to diagnose conditions such as gingivitis and periodontitis. In contrast, panoramic radiographs provide a broad view of the entire mouth, including the teeth, jaws, and surrounding structures, but they lack the detail needed for a specific diagnosis of periodontal disease. Periapical radiographs focus on individual teeth and their roots, which can be useful for assessing certain aspects of periodontal disease but do not provide a comprehensive view of the periodontal status across multiple teeth. Cephalometric radiographs are primarily used in orthodontics for analyzing the skeletal relationships of the jaw and face, which does not directly address periodontal disease diagnosis. Therefore, bitewing radiographs remain the preferred choice for evaluating periodontal health effectively.