

Oklahoma Dental Hygienist Jurisprudence Practice Exam (Sample)

Study Guide



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SAMPLE

Questions

- 1. Which gas is dental assistants NOT permitted to administer?**
 - A. Oxygen**
 - B. Nitrous oxide**
 - C. Carbon dioxide**
 - D. Helium**
- 2. What is the procedure called for the removal of periodontal packs?**
 - A. Debridement**
 - B. Scaling**
 - C. Extraction**
 - D. Removal**
- 3. What is the focus area of the specialty known as prosthodontics?**
 - A. Child dental care**
 - B. Restoration and replacement of teeth**
 - C. Diagnosis of oral diseases**
 - D. Management of dental radiology**
- 4. What type of supervision is required for dental hygienists to perform advanced procedures?**
 - A. Unspecific supervision**
 - B. Direct supervision only**
 - C. Indirect or Direct supervision**
 - D. Remote supervision**
- 5. What type of planning is involved in dental hygiene procedures that can be delegated to dental hygienists?**
 - A. Assessment and treatment**
 - B. Diagnosis and evaluation**
 - C. Consultation and assessment**
 - D. Research and planning**

- 6. How many continuing education hours are typically required for dental hygienists during a reporting period?**
- A. 10 hours**
 - B. 20 hours**
 - C. 30 hours**
 - D. 40 hours**
- 7. When do temporary dental hygiene licenses typically expire?**
- A. After two years**
 - B. On the date of the next clinical examinations**
 - C. At the end of the calendar year**
 - D. Upon notice from the Board**
- 8. What type of requirements is the Board authorized to establish for dental professionals?**
- A. licensing requirements**
 - B. continuing education requirements**
 - C. training requirements**
 - D. certification requirements**
- 9. Which situation would require a dental treatment to be evaluated promptly?**
- A. The client is a new patient**
 - B. The nature of the procedure indicates it**
 - C. The treatment is scheduled for the next day**
 - D. The patient lives in a remote area**
- 10. When does the reporting period for dental hygienists begin?**
- A. January 1st**
 - B. April 1st**
 - C. July 1st**
 - D. October 1st**

Answers

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

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Explanations

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1. Which gas is dental assistants NOT permitted to administer?

- A. Oxygen**
- B. Nitrous oxide**
- C. Carbon dioxide**
- D. Helium**

Dental assistants are primarily trained to support dental procedures under the supervision of a licensed dentist, and their scope of practice is governed by state laws and regulations. In the context of this question, nitrous oxide, commonly known as laughing gas, is typically classified as a sedative agent that requires specific training and certification to administer safely. The administration of nitrous oxide involves not only understanding the drug's effects but also monitoring the patient's vital signs and ensuring their safety throughout the procedure. Because of its implications for patient care and the potential for adverse reactions, the administration of nitrous oxide is generally reserved for licensed dental professionals who have completed the requisite training and certification. In contrast, gases such as oxygen, carbon dioxide, and helium may be used in various dental contexts and do not carry the same level of regulatory restriction. For example, oxygen may be used to support patients in resuscitation or in cases of respiratory distress, carbon dioxide has limited applications, and helium is sometimes used in dental labs for specific purposes. Therefore, nitrous oxide is the gas dental assistants are not permitted to administer.

2. What is the procedure called for the removal of periodontal packs?

- A. Debridement**
- B. Scaling**
- C. Extraction**
- D. Removal**

The procedure referred to for the removal of periodontal packs is best described as "removal." This term specifically denotes the action of taking out the periodontal packs that have been placed over surgical sites in the mouth to protect healing tissues or to facilitate oral hygiene. Understanding the context is important: periodontal packs are often used after surgical procedures to stabilize the area and support healing, and thus, removing them requires a careful and specific approach. "Removal" accurately captures the essence of what is being done, which is to take out the existing material that has served its purpose. While debridement relates to the cleaning of a wound or the removal of debris in dental practice, it doesn't specifically pertain to the act of taking out packs. Scaling is focused on cleaning the teeth and removing plaque and calculus, while extraction refers to the removal of a tooth. Each of these procedures has its own specific context and application, making "removal" the most appropriate answer when it concerns the act of taking out periodontal packs.

3. What is the focus area of the specialty known as prosthodontics?

- A. Child dental care**
- B. Restoration and replacement of teeth**
- C. Diagnosis of oral diseases**
- D. Management of dental radiology**

The specialty of prosthodontics primarily focuses on the restoration and replacement of teeth. This field encompasses various procedures that address conditions such as missing teeth or compromised tooth structure, using different solutions like crowns, bridges, dentures, and implants. Prosthodontists play a crucial role in improving the functionality and aesthetics of a patient's smile, emphasizing both the technical skills involved in fabricating dental restorations and the artistic aspect of enhancing oral appearance. Prosthodontics is distinguished from other dental specialties by its specific commitment to rebuilding dentition. While child dental care pertains to pediatric dentistry and focuses on the unique oral health needs of children, and the diagnosis of oral diseases refers to the field of oral pathology, prosthodontics specifically targets the rehabilitative aspects of dental care. Additionally, the management of dental radiology is related to imaging techniques and technology rather than the physical restoration of teeth. Thus, the focus of prosthodontics on the restoration and replacement of teeth is what defines this specialty clearly.

4. What type of supervision is required for dental hygienists to perform advanced procedures?

- A. Unspecific supervision**
- B. Direct supervision only**
- C. Indirect or Direct supervision**
- D. Remote supervision**

In Oklahoma, the performance of advanced procedures by dental hygienists is contingent upon the type of supervision stipulated by state law. The correct answer indicates that both indirect and direct supervision are permissible for dental hygienists when undertaking advanced procedures. Direct supervision implies that a dentist is present in the office to oversee the procedure directly, allowing for immediate input and guidance. Indirect supervision, on the other hand, permits dental hygienists to perform certain tasks under the general oversight of a dentist who is not necessarily in the same room but has planned and approved the treatment. The option of allowing both types of supervision maximizes the flexibility in practice while ensuring that dental hygienists maintain a collaborative relationship with dentists, which is vital in delivering comprehensive patient care. This combination reflects the evolving scope of practice for dental hygienists, aligning with legislative changes that aim to enhance access to dental care while still ensuring high standards and patient safety. Thus, dental hygienists are equipped to perform advanced procedures under these defined supervisory conditions, reinforcing their integral role within the dental healthcare team.

5. What type of planning is involved in dental hygiene procedures that can be delegated to dental hygienists?

- A. Assessment and treatment**
- B. Diagnosis and evaluation**
- C. Consultation and assessment**
- D. Research and planning**

The option that states "assessment and treatment" is the correct choice because dental hygienists are specifically trained to perform both assessment and treatment procedures within their scope of practice. In this context, assessment refers to the clinical evaluation of a patient's oral health status, including gathering health histories, performing oral examinations, and identifying potential issues such as periodontal disease or cavities. Following the assessment, dental hygienists are authorized to carry out various treatment procedures, which may include scaling and root planing, administering preventive care such as sealants and fluoride treatments, as well as educating patients about oral hygiene practices. This dual role of assessing and treating is essential for the comprehensive care of patients and is a key component of dental hygiene practice. Other options involve aspects of dental practice that are not typically delegated to dental hygienists. For instance, diagnosis and evaluation are mainly the responsibilities of the dentist, as they require clinical judgment and decision-making based on comprehensive evaluations. Consultation may occur, but it usually involves dentists discussing treatment options, making it less relevant to the specific duties of dental hygienists. Research and planning might pertain to broader public health initiatives or educational programs rather than direct patient care. Thus, the combination of assessment and treatment is the primary focus within the delegated tasks for dental

6. How many continuing education hours are typically required for dental hygienists during a reporting period?

- A. 10 hours**
- B. 20 hours**
- C. 30 hours**
- D. 40 hours**

In Oklahoma, dental hygienists are required to complete 20 hours of continuing education during each reporting period. This requirement ensures that dental hygienists stay current with the latest developments in dental science, technology, and patient care practices. Continuing education serves to enhance the knowledge and skills of dental hygienists, ultimately benefiting their professional growth and the quality of care they provide to patients. This requirement reflects the importance of lifelong learning in the healthcare field, where advancements are frequent, and staying informed is crucial for maintaining professional competency and delivering safe and effective care. Regularly engaging in continuing education helps dental hygienists adapt to emerging practices and changing regulations, thereby upholding the standards of the profession.

7. When do temporary dental hygiene licenses typically expire?

A. After two years

B. On the date of the next clinical examinations

C. At the end of the calendar year

D. Upon notice from the Board

Temporary dental hygiene licenses are designed to be short-term permits that allow individuals to practice while waiting to take and pass their clinical examinations. The expiration of these licenses is specifically aligned with key milestones in the licensure process. In Oklahoma, temporary licenses typically expire on the date of the next clinical examinations. This ensures that the license is valid only until the applicant has the opportunity to demonstrate their competence through the required testing, after which they would move forward with obtaining a full, permanent license if they pass. Understanding the timing of the temporary license's expiration is essential for prospective dental hygienists to ensure they can continue practicing legally until they have completed all necessary licensure requirements. Therefore, the connection to the next scheduled clinical examination reflects the regulatory body's intent to maintain a standard of practice and competency in the profession.

8. What type of requirements is the Board authorized to establish for dental professionals?

A. licensing requirements

B. continuing education requirements

C. training requirements

D. certification requirements

The Board is authorized to establish continuing education requirements for dental professionals to ensure that they remain current with advancements in the field, techniques, and regulatory practices. Continuing education is crucial in maintaining professional competence, as dental practices and technologies continually evolve. This mandate helps promote high standards of patient care and enhances the overall quality of dental services provided to the public. Licensing requirements, while also necessary, are typically focused on the initial qualifications needed to practice. Training requirements may refer more to specific education or skills development, while certification requirements are specific credentials that may be earned in specialties but do not encompass the ongoing professional development expected through continuing education. Thus, continuing education is a vital aspect that the Board emphasizes to maintain the professionalism and proficiency of dental hygienists and other dental professionals throughout their careers.

9. Which situation would require a dental treatment to be evaluated promptly?

- A. The client is a new patient**
- B. The nature of the procedure indicates it**
- C. The treatment is scheduled for the next day**
- D. The patient lives in a remote area**

The situation that requires prompt evaluation of dental treatment is one where the nature of the procedure indicates it should be assessed without delay. Certain dental treatments, such as extractions, root canals, or surgeries, carry inherent risks and complexities that necessitate immediate attention to ensure the safety and well-being of the patient. Recognizing the urgency of such procedures is essential for effective patient management, as postponing evaluation could lead to complications or exacerbation of the patient's condition. In contrast, while being a new patient may warrant a thorough review of their dental history, it does not inherently imply that immediate evaluation is necessary. A scheduled treatment for the next day might not demand urgent assessment if there are no concerning symptoms or indications necessitating prompt action. Similarly, a patient's residence in a remote area does not automatically elevate the urgency of evaluating the treatment unless combined with other factors, such as the nature of the procedure. Thus, highlighting the connection between the urgency of specific types of dental procedures and the necessity for prompt evaluation is crucial in dental practice.

10. When does the reporting period for dental hygienists begin?

- A. January 1st**
- B. April 1st**
- C. July 1st**
- D. October 1st**

The reporting period for dental hygienists in Oklahoma begins on July 1st, aligning with the state's continuing education and license renewal requirements. This timing allows dental hygienists to track and complete their mandated continuing education units during the first half of the calendar year, ensuring they are up to date with their professional knowledge and skills prior to their license renewal. It is a structured approach that promotes ongoing professional development and compliance with state regulations, facilitating a clear timeline for professionals to manage their educational pursuits effectively.