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

Study Guide

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Questions

1. What dental feature is defined by three round protuberances on the incisal edge of newly erupted anterior teeth?

A. Cingulum

B. Mamelons

C. Fossa

D. Cusp

2. What are the walls of a molar classified as?

A. Pulpal floor, buccal, distal, lingual, mesial

B. Occlusal, incisal, labial, lingual, proximal

C. Facial, occlusal, mesial, distal, apical

D. Marginal ridge, occlusal, cervical, dentin, pulp

3. Which characteristic of amalgam is influenced by the manipulation of trituration and condensation?

A. Ratios to mercury alloy

B. Size and shape of alloy particles

C. Expansion properties

D. Color variety

4. What phenomenon is described as the slow flow or movement of amalgam?

A. Leakage

B. Creep

C. Fusion

D. Oxidation

5. Which feature is not associated with the occlusal surface of a permanent maxillary molar?

A. Distomarginal ridge

B. Oblique ridge

C. Cusp of carabelli

D. Distobuccal ridge

6. Which technique is essential for maintaining patient safety during a dental procedure?

A. Frequent communication with the patient

B. Use of loud equipment

C. Ignoring patient anxiety

D. Minimizing the use of anesthesia

7. In a Class V preparation, what is the term for the incisal wall of an incisor?

A. Buccal wall

B. Occlusal surface

C. Lateral wall

D. Pulpal wall

8. What term describes the relationship between the working end of the instrument and the tooth surface?

A. Retention

B. Adaptation

C. Manipulation

D. Placement

9. Which category of education is required for EFDA continuing education?

A. General health topics

B. Dental pharmacology

C. Infection control

D. All of the above

10. For easy removal, the diagonal slot of the Tofflemire should be directed towards which area?

A. The buccal

B. The incisal

C. The lingual

D. The gingival

Answers

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

Explanations

1. What dental feature is defined by three round protuberances on the incisal edge of newly erupted anterior teeth?

A. Cingulum

B. Mamelons

C. Fossa

D. Cusp

The feature described as three round protuberances on the incisal edge of newly erupted anterior teeth is known as mamelons. These are small, rounded bumps that can be observed on the incisal surfaces of incisors, particularly when they first emerge into the oral cavity. Mamelons typically appear shortly after tooth eruption as a result of the development of the tooth and represent the lobes of the tooth that have not completely fused during formation. As the teeth undergo wear through normal function, these mamelons often smooth out and become less visible over time. This characteristic can be an important indicator of a tooth's eruption stage and is particularly noted in primary dentition as well as the early phases of permanent teeth. In contrast, other terms such as cingulum, fossa, and cusp refer to different dental structures. The cingulum is a convexity on the lingual surface of anterior teeth, a fossa is a depression or concavity in the surface of a tooth, and a cusp typically refers to the pointed or rounded projections on the occlusal surface of posterior teeth. Each of these features serves different roles in dental anatomy and function, distinguishing them from mamelons.

2. What are the walls of a molar classified as?

A. Pulpal floor, buccal, distal, lingual, mesial

B. Occlusal, incisal, labial, lingual, proximal

C. Facial, occlusal, mesial, distal, apical

D. Marginal ridge, occlusal, cervical, dentin, pulp

The walls of a molar are classified as the pulpal floor, buccal, distal, lingual, and mesial due to their specific orientation and function within the tooth structure. Each of these walls serves a unique purpose in the context of dental anatomy. The pulpal floor acts as a base for the pulp chamber, providing protection and support for the dental pulp. The buccal wall is on the cheek side, while the lingual wall is on the tongue side, defining the outer boundaries of the tooth. The mesial wall faces towards the midline of the dental arch, and the distal wall is oriented towards the back of the mouth. Together, these walls provide structural integrity to the molar. In the context of dental procedures, understanding these classifications is crucial as they help dental professionals identify the specific area of interest when performing treatments such as restorative work, extractions, or endodontic therapy. This classification is integral to the practice because it aids in the communication among dental professionals and ensures that procedures are performed accurately and efficiently.

3. Which characteristic of amalgam is influenced by the manipulation of trituration and condensation?

A. Ratios to mercury alloy

B. Size and shape of alloy particles

C. Expansion properties

D. Color variety

The characteristic of amalgam that is influenced by the manipulation of trituration and condensation is the expansion properties. Trituration refers to the mixing process where mercury is combined with the alloy particles to form the dental amalgam, and this process can significantly affect the physical properties of the resultant material, including how much it expands or contracts during and after setting. Proper trituration ensures that the amalgam is well-mixed, promoting uniform particle distribution and proper chemical reactions, which consequently influences the dimensional changes of the amalgam as it sets. If the amalgam is over-triturated or under-triturated, the resulting expansion or contraction may lead to complications such as postoperative sensitivity or marginal failure of the restoration. Therefore, care in the manipulation during trituration and the technique used during condensation is crucial for achieving the desired properties of the amalgam, particularly its expansion characteristics. In contrast, while the ratios to mercury alloy, the size and shape of alloy particles, and color variety are important factors in the overall quality and aesthetic of the amalgam, they are less directly influenced by the manipulation techniques of trituration and condensation during the placement of the dental amalgam. The expansion properties are specifically tied to how well the amalgam is mixed and packed

4. What phenomenon is described as the slow flow or movement of amalgam?

A. Leakage

B. Creep

C. Fusion

D. Oxidation

The phenomenon described as the slow flow or movement of amalgam is known as creep. This term specifically refers to the gradual deformation of dental amalgam under a sustained load over time. Creep is important in the context of dental restorations because it can affect the integrity and durability of the material. Amalgam restorations, while hard upon setting, can experience slight dimensional changes due to the physical properties of the material, especially under the influence of masticatory forces. These forces can lead to the amalgam slowly flowing or changing shape, which can contribute to clinical issues such as marginal deterioration or loss of retention over time. Understanding creep is essential for dental professionals to ensure the longevity and effectiveness of amalgam restorations in clinical practice. In contrast, the other terms listed refer to different concepts: leakage pertains to the seepage of fluids between the restoration and tooth structure, fusion relates to the joining of materials through heat, and oxidation involves the chemical reaction of materials with oxygen, none of which describe the gradual flow of amalgam.

5. Which feature is not associated with the occlusal surface of a permanent maxillary molar?

A. Distomarginal ridge

B. Oblique ridge

C. Cusp of carabelli

D. Distobuccal ridge

The distobuccal ridge is not a feature commonly associated with the occlusal surface of a permanent maxillary molar. In contrast, the other features listed are integral parts of the anatomy of maxillary molars. The occlusal surface of a permanent maxillary molar includes the distomarginal ridge, which is a boundary at the distal margin of the tooth; the oblique ridge, which runs diagonally across the occlusal surface from the mesiolingual cusp to the distobuccal cusp; and the cusp of Carabelli, a unique cuspal formation present on the mesiolingual cusp of some maxillary first molars. Understanding these features is crucial for proper identification and treatment planning in restorative and surgical dentistry, highlighting the distinct morphology of maxillary molars and their functional significance in occlusion.

6. Which technique is essential for maintaining patient safety during a dental procedure?

A. Frequent communication with the patient

B. Use of loud equipment

C. Ignoring patient anxiety

D. Minimizing the use of anesthesia

Frequent communication with the patient is vital for maintaining safety during a dental procedure. By establishing an open line of communication, the dental professional can ensure that the patient understands what is happening throughout the procedure, which can help alleviate anxiety and enable them to express any discomfort or concerns they may have. This ongoing dialogue allows the practitioner to monitor the patient's condition more effectively and make necessary adjustments to techniques or approaches in real-time, fostering a safer environment. In contrast, the use of loud equipment may increase anxiety and apprehension, potentially distracting both the patient and the provider. Ignoring patient anxiety can lead to negative experiences and may compromise the patient's physiological responses during treatments. Minimizing the use of anesthesia could put the patient at risk for experiencing pain or discomfort, negatively impacting their safety and well-being. Thus, effective communication stands out as the most crucial technique for ensuring patient safety during dental procedures.

7. In a Class V preparation, what is the term for the incisal wall of an incisor?

A. Buccal wall

B. Occlusal surface

C. Lateral wall

D. Pulpal wall

A Class V preparation typically involves the area of a tooth that is located at the gingival third of the facial and lingual surfaces. In the context of an incisor, the term that refers specifically to the wall created at the incisal edge is indeed known as the incisal wall, which corresponds most closely to the occlusal surface in terms of terminology relevant to the orientation of the tooth. While "buccal wall," "lateral wall," and "pulpal wall" describe different aspects or surfaces of a tooth preparation, the incisal edge itself acts similarly to the occlusal surface on posterior teeth due to its functional role in occlusion and aesthetics, as it is related to the biting surface. Therefore, choosing the term "occlusal surface" acknowledges that in the context of an incisor, the incisal edge serves a similar purpose and position as the occlusal surfaces of molars and premolars in this type of preparation.

8. What term describes the relationship between the working end of the instrument and the tooth surface?

A. Retention

B. Adaptation

C. Manipulation

D. Placement

The term that best describes the relationship between the working end of the instrument and the tooth surface is adaptation. In dentistry, adaptation refers to how well the working end of an instrument fits against the contours of the tooth or other dental tissue. Proper adaptation is crucial for effective procedures, as it ensures that the instrument can access all necessary areas for tasks such as scaling, filling, or any other restorative work. When an instrument is well-adapted, it allows for precise manipulation and accurate delivery of dental materials or treatment, making it easier for the dental professional to achieve the desired outcome. Adequate adaptation minimizes potential trauma to the tooth or surrounding tissues and plays a vital role in maintaining the overall health of the dental structure being treated. Understanding this relationship is essential for ensuring optimal results in various dental procedures.

9. Which category of education is required for EFDA continuing education?

A. General health topics

B. Dental pharmacology

C. Infection control

D. All of the above

The requirement for continuing education for EFDAs encompasses a diverse range of topics that are crucial for maintaining competency and enhancing skills in the dental field. Continuing education programs ensure that dental assistants stay updated on the latest practices, regulations, and health standards. General health topics contribute to a broader understanding of patient care and overall health, while dental pharmacology is essential for knowledge regarding medications that may impact dental treatments. Infection control is a critical component that is paramount in ensuring the safety of both patients and dental professionals, as it involves the practices that prevent the spread of pathogens. By requiring all of these areas, the continuing education framework supports comprehensive training that includes relevant knowledge across a spectrum of essential dental and health-related fields. This well-rounded approach ultimately leads to improved patient care and safety, which is the primary goal of maintaining professional standards in dental practice.

10. For easy removal, the diagonal slot of the Tofflemire should be directed towards which area?

A. The buccal

B. The incisal

C. The lingual

D. The gingival

The diagonal slot of the Tofflemire retainer should be directed towards the gingival area to facilitate the easy removal of the matrix band after the restoration process. When placed this way, the orientation allows for better access to the matrix band during removal without disturbing the restoration or the surrounding dental structures. Positioning the diagonal slot towards the gingival area minimizes the chance of tearing or damaging the band when it is removed. The gingival direction provides the best leverage for pulling the band out smoothly, ensuring a clean removal that does not disrupt the dental work just completed. Choosing locations such as the buccal, incisal, or lingual would hinder proper removal, potentially complicating the process by making it more difficult to access the band and risking damage to the restoration and surrounding tissues.