

# Preclinical DH Infection Control Training Practice Test (Sample)

## Study Guide



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**SAMPLE**

## Questions

- 1. What is the meaning of “cross-contamination”?**
  - A. The transfer of harmful microbes from one surface or person to another**
  - B. The process of cleaning shared equipment**
  - C. The reduction of infectious agents in the environment**
  - D. The mingling of pathogens in food**
- 2. To safely remove PPE, the sequence begins with?**
  - A. The gloves, followed by the goggles or face shield, gown, and mask.**
  - B. The gown, gloves, then the goggles or face shield, and mask.**
  - C. The mask first, then remove gloves, goggles, and gown.**
  - D. Any order that minimizes contamination risk.**
- 3. Which is a characteristic of high-level disinfection?**
  - A. It always involves heat sterilization.**
  - B. It requires FDA-registered chemical sterilants.**
  - C. It is not suitable for heat-sensitive instruments.**
  - D. It takes less than 10 minutes for most instruments.**
- 4. Task-specific gloves should be worn by all OHCP to prevent contamination when?**
  - A. Having direct contact with patients infected by pathogens.**
  - B. Handling visibly contaminated patient care items.**
  - C. Anticipating direct contact with blood and OPIM.**
  - D. All of the above are correct.**
- 5. Which statement about PPE is correct?**
  - A. The CDC recommends a sequence for donning and doffing PPE.**
  - B. Used PPE should be placed away from the site of removal.**
  - C. PPE should be put on in any order as per convenience.**
  - D. All of the above are correct.**

- 6. If surfaces are not visibly soiled, which type of disinfectant can be used for cleaning and disinfection?**
- A. EPA-List D low-level disinfectant**
  - B. EPA-List B intermediate-level disinfectant**
  - C. An EPA-list E intermediate-level disinfectant**
  - D. All of the above**
- 7. What should dental students understand about their roles in infection control?**
- A. They are primarily assistants to licensed practitioners**
  - B. They are responsible for implementing and adhering to infection control measures**
  - C. They only need to follow instructions from supervisors**
  - D. They have no responsibility during clinical practice**
- 8. What is the purpose of a dental unit waterline testing?**
- A. To test the pressure of the waterlines**
  - B. To ensure the water used in dental procedures meets safety standards for microbial contamination**
  - C. To improve the flavor of the water used in practice**
  - D. To monitor plumbing for leaks**
- 9. How can dental professionals minimize the risk of aerosol exposure during procedures?**
- A. By using mouth rinses**
  - B. By using high-velocity suction or rubber dams**
  - C. By wearing additional masks**
  - D. By limiting the number of patients**
- 10. What does the term "asepsis" refer to?**
- A. The presence of some pathogens**
  - B. The absence of pathogens or infectious organisms**
  - C. Increased microbial resistance**
  - D. Infection without symptoms**

## **Answers**

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

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## **Explanations**

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## 1. What is the meaning of “cross-contamination”?

- A. The transfer of harmful microbes from one surface or person to another**
- B. The process of cleaning shared equipment
- C. The reduction of infectious agents in the environment
- D. The mingling of pathogens in food

The meaning of “cross-contamination” refers specifically to the transfer of harmful microbes from one surface or person to another. This process can occur through direct contact or indirectly through intermediate surfaces or objects. In the context of infection control and public health, understanding cross-contamination is crucial as it highlights how easily infections can spread if proper precautions are not taken. For instance, in a dental setting, if instruments or surfaces contaminated with pathogens come into contact with clean or sterile items, it can lead to the transmission of diseases. The other options, while related to cleanliness and infection prevention, do not capture the precise essence of cross-contamination. The process of cleaning shared equipment focuses on hygiene practices to mitigate risks rather than the act of transferring microbes. The reduction of infectious agents pertains to sterilization or disinfection methods rather than the act of transferring contamination. Lastly, the mingling of pathogens in food is a more specific context of cross-contamination that emphasizes food safety but does not encompass the broader definition applied in clinical settings. Hence, “the transfer of harmful microbes from one surface or person to another” accurately reflects the core concept of cross-contamination.

## 2. To safely remove PPE, the sequence begins with?

- A. The gloves, followed by the goggles or face shield, gown, and mask.
- B. The gown, gloves, then the goggles or face shield, and mask.**
- C. The mask first, then remove gloves, goggles, and gown.
- D. Any order that minimizes contamination risk.

The correct answer outlines the proper sequence for safely removing personal protective equipment (PPE) to minimize the risk of contamination. This sequence begins with the gown, then the gloves, followed by goggles or face shield, and finally the mask. Starting with the gown is essential because it prevents the spread of contaminants that might be on the outside surface of the gown. By removing it first, the individual reduces the risk of these contaminants spreading to other areas. Next, the gloves are removed, as they directly contact any potentially infectious material, and removing them reduces the risk of transferring pathogens. Goggles or a face shield should be taken off after the gloves to avoid contact with the eyes, and lastly, the mask is removed to avoid inhalation of any pathogens that could have been trapped in the mask material. This specific sequence is based on infection control guidelines, which highlight the importance of reducing exposure to contaminants on hands and body while ensuring personal safety during the removal process. The other options do not follow the recommended protocol that prioritizes safety and minimizes the risk of contamination effectively.

### 3. Which is a characteristic of high-level disinfection?

- A. It always involves heat sterilization.
- B. It requires FDA-registered chemical sterilants.**
- C. It is not suitable for heat-sensitive instruments.
- D. It takes less than 10 minutes for most instruments.

A characteristic of high-level disinfection is that it requires FDA-registered chemical sterilants. High-level disinfection involves the use of specific chemicals that are effective in eliminating a wide range of microorganisms, including bacterial spores, which may not be fully inactivated by lower-level disinfection methods. These chemical agents are carefully regulated for safety and efficacy by the FDA, ensuring that they meet stringent standards for their intended use in medical and dental settings. This process is particularly important in environments where maintaining a sterile environment is crucial for patient safety, such as in dental practices. The proper use of these disinfectants effectively minimizes the risk of infection transmission between patients and healthcare providers. High-level disinfection is often employed for items that can't withstand the rigors of heat sterilization due to their materials.

### 4. Task-specific gloves should be worn by all OHCP to prevent contamination when?

- A. Having direct contact with patients infected by pathogens.
- B. Handling visibly contaminated patient care items.
- C. Anticipating direct contact with blood and OPIM.
- D. All of the above are correct.**

Task-specific gloves are essential for oral health care professionals (OHCP) to reduce the risk of infection transmission and ensure safety during various procedures. Wearing gloves in these scenarios is critical for several reasons. When OHCP anticipate direct contact with blood and other potentially infectious materials (OPIM), gloves serve as a barrier to prevent exposure. This is particularly important because blood and OPIM can harbor a variety of pathogens that could pose serious health risks if they come into contact with skin or mucous membranes. In situations where OHCP have direct contact with patients known to be infected with specific pathogens, gloves are equally important to protect both the healthcare provider and other patients in the vicinity from possible cross-contamination. Additionally, handling visibly contaminated patient care items is another scenario where the use of task-specific gloves is vital. Contaminated items can carry infectious agents, and proper use of gloves helps prevent these pathogens from being transmitted to the healthcare provider and to other surfaces or patients. Given that all these situations involve potential exposure to infectious materials, the correct answer acknowledges that task-specific gloves should be worn in every case mentioned. This comprehensive approach to glove use emphasizes the importance of infection control practices in maintaining a safe environment for both patients and healthcare providers.

**5. Which statement about PPE is correct?**

- A. The CDC recommends a sequence for donning and doffing PPE.**
- B. Used PPE should be placed away from the site of removal.**
- C. PPE should be put on in any order as per convenience.**
- D. All of the above are correct.**

The statement regarding the sequence for donning and doffing personal protective equipment (PPE) being recommended by the CDC is essential for ensuring safety and effectiveness in infection control practices. Proper donning refers to the correct way to put on PPE in a manner that minimizes the risk of contamination before engaging in procedures that may expose a healthcare worker to infectious materials. Similarly, doffing is the process of removing PPE in a way that prevents exposure to pathogens that may be present on the outer surfaces of the equipment. The CDC's guidelines are based on evidence and best practices aimed at protecting healthcare providers and preventing the transmission of infections. By following the recommended sequence, healthcare workers can better ensure that they are adequately protected when encountering potentially infectious materials and reduce the risk of cross-contamination when taking off PPE after use. This structured approach is vital in healthcare settings to maintain a high standard of infection control. In contrast, the other statements present varying levels of misinformation. Placing used PPE away from the site of removal does not conform to the protocols for safe disposal, since it could lead to contamination of other areas. The idea that PPE can be put on in any order based on convenience undermines the importance of following a specific protocol that is designed to enhance safety and reduce the

**6. If surfaces are not visibly soiled, which type of disinfectant can be used for cleaning and disinfection?**

- A. EPA-List D low-level disinfectant**
- B. EPA-List B intermediate-level disinfectant**
- C. An EPA-list E intermediate-level disinfectant**
- D. All of the above**

In situations where surfaces are not visibly soiled, it is acceptable to use a variety of disinfectants for cleaning and disinfection. Low-level, intermediate-level, and any appropriate disinfectants listed by the Environmental Protection Agency (EPA) can be effectively employed under these conditions. Low-level disinfectants are typically effective against a wide range of pathogens but may not be sufficient for more resistant microorganisms. Intermediate-level disinfectants, which include those on EPA's lists B and E, have broader efficacy, targeting mycobacteria, certain viruses, and most bacteria. The flexibility provided by all these options allows for choosing a disinfectant based on specific needs, as long as the requirements for the level of disinfection and the type of surface being treated are maintained. Using any of these disinfectants ensures proper infection control protocols are observed, significantly contributing to safe environments in healthcare and clinical settings. Thus, the inclusion of all these types of disinfectants as valid choices is justified when surfaces are not visibly soiled.

**7. What should dental students understand about their roles in infection control?**

- A. They are primarily assistants to licensed practitioners**
- B. They are responsible for implementing and adhering to infection control measures**
- C. They only need to follow instructions from supervisors**
- D. They have no responsibility during clinical practice**

Dental students must understand that they play a crucial role in infection control within the clinical environment. Being responsible for implementing and adhering to infection control measures is fundamental to ensuring the safety of patients, themselves, and their colleagues. This involves maintaining a clean work environment, properly sterilizing instruments, using personal protective equipment, and following established protocols to prevent the transmission of infectious diseases. Infection control is a critical component of patient care, and students are not merely passive participants; instead, they are active contributors to a safe clinical practice. Their understanding and application of infection control measures are essential, as these practices form the foundation of professional responsibility and patient trust in dental care. Recognizing this responsibility enhances their skills and prepares them for future roles as dental professionals, where such knowledge will be vital in protecting public health. The other options downplay their involvement and can hinder their development as knowledgeable and responsible practitioners.

**8. What is the purpose of a dental unit waterline testing?**

- A. To test the pressure of the waterlines**
- B. To ensure the water used in dental procedures meets safety standards for microbial contamination**
- C. To improve the flavor of the water used in practice**
- D. To monitor plumbing for leaks**

The purpose of dental unit waterline testing is to ensure that the water used in dental procedures meets safety standards for microbial contamination. This is essential because dental units can harbor bacteria and other pathogens in their waterlines, which can pose health risks to both patients and dental practitioners. Regular testing helps to identify any microbial contamination, allowing for appropriate measures to be taken to disinfect and maintain safe water quality. When water meets these safety standards, it reduces the risk of infections and contributes to overall infection control in the dental practice. Maintaining the integrity of water quality is crucial for the safety of dental procedures, making this aspect a critical part of infection control protocols.

**9. How can dental professionals minimize the risk of aerosol exposure during procedures?**

- A. By using mouth rinses**
- B. By using high-velocity suction or rubber dams**
- C. By wearing additional masks**
- D. By limiting the number of patients**

Minimizing aerosol exposure during dental procedures is critical in infection control, particularly in light of increased awareness of airborne pathogens. Utilizing high-velocity suction or rubber dams is particularly effective in this regard because these tools help capture and contain aerosols generated during procedures before they can disperse into the environment or come into contact with the dental team or patients. High-velocity suction systems are designed to effectively remove aerosols, blood, and saliva quickly from the oral cavity, reducing the concentration of pathogens in the air. Similarly, rubber dams create a barrier that not only isolates the treatment area but also cuts down on the spread of droplets and aerosols into the surrounding environment. Together, these strategies create a safer clinical setting for both patients and dental professionals, thereby significantly lowering the risk of infection transmission. In comparison, while mouth rinses may have a role in reducing the bacterial load in a patient's mouth, they do not effectively capture or minimize the generation of aerosols during procedures. Wearing additional masks provides an extra layer of protection but does not directly reduce the aerosol production itself. Limiting the number of patients can help reduce overall exposure but does not address the immediate risk during a procedure. Hence, the combination of high-velocity suction and rubber dams stands out as

**10. What does the term "asepsis" refer to?**

- A. The presence of some pathogens**
- B. The absence of pathogens or infectious organisms**
- C. Increased microbial resistance**
- D. Infection without symptoms**

The term "asepsis" refers to the absence of pathogens or infectious organisms. In the context of infection control and healthcare, asepsis is a critical concept aimed at preventing the spread of infection and ensuring a sterile environment. It is foundational in procedures where maintaining a sterile field is essential, such as in surgical settings or during the use of invasive medical devices. Aseptic techniques encompass various practices, including hand hygiene, use of sterilized equipment, and barriers such as gloves and masks to prevent contamination. Understanding this term is vital for anyone involved in healthcare, as it emphasizes the importance of eliminating or preventing exposure to potentially harmful microorganisms that could lead to infections. Recognizing asepsis in medical and dental practices helps guide infection control measures, ensuring the safety of both patients and healthcare workers.