

Veterinary Dentistry - Dental Diseases Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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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. 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.

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. 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!

Questions

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- 1. If bone loss is greater than this percentage, the tooth needs to be removed?**
 - A. 75%**
 - B. 50%**
 - C. 25%**
 - D. 90%**

- 2. Brushing is an example of which category of home dental care?**
 - A. Chemical home care**
 - B. Surgical home care**
 - C. Mechanical home care**
 - D. Dietary home care**

- 3. Which item is described as a product used to promote healing after cleaning?**
 - A. Doxirobe**
 - B. Sealant**
 - C. Doxycycline**
 - D. COHAT**

- 4. Which interval corresponds to advanced periodontal disease evaluation?**
 - A. 2 weeks**
 - B. 2 months**
 - C. 1 month**
 - D. 3 months**

- 5. Drug in Clindoral?**
 - A. Clindoral**
 - B. Amoxicillin**
 - C. Metronidazole**
 - D. Clindamycin**

- 6. What is a common result of refractory periodontitis?**
- A. Chronic ulcerative paradental stomatitis**
 - B. Gingival hyperplasia**
 - C. Tooth mobility without bone loss**
 - D. Halitosis**
- 7. Which hand scaling tool is used only on the crown?**
- A. Scaler**
 - B. Curette**
 - C. Periodontal probing**
 - D. Polisher**
- 8. Primary bacteria found below the gum line are primarily what type?**
- A. Anaerobic**
 - B. Aerobic**
 - C. Spirochetes**
 - D. Actinomyces**
- 9. What type of toothpaste should be used?**
- A. Enzymatic**
 - B. Fluoride-only**
 - C. Carbonated**
 - D. Saline-based**
- 10. Stage 3 periodontal disease is defined by which combination of furcation involvement and attachment loss?**
- A. Stage 3 with stage 2 furcation and 25-50% attachment loss**
 - B. Stage 2 with stage 1 furcation and less than 25% attachment loss**
 - C. Stage 4 with furcation stage 3 and more than 50% attachment loss**
 - D. Stage 1 with gingivitis only**

Answers

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

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Explanations

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1. If bone loss is greater than this percentage, the tooth needs to be removed?

- A. 75%**
- B. 50%**
- C. 25%**
- D. 90%**

The amount of bone support remaining around a tooth governs whether it can be saved or should be removed. When bone loss reaches about three-quarters (75%) of the root length, there is so little supportive structure left that the tooth is unlikely to function well or stay infection-free, even with treatment. This 75% threshold is the practical tipping point clinicians use to decide extraction. Less than this amount leaves more potential for periodontal therapy and tooth retention, while extremely severe loss (near 90%) reinforces extraction as the appropriate step. So, the 75% figure best represents the point at which extraction becomes the recommended course.

2. Brushing is an example of which category of home dental care?

- A. Chemical home care**
- B. Surgical home care**
- C. Mechanical home care**
- D. Dietary home care**

Brushing is a mechanical home care method because it relies on physical action to remove plaque and debris from tooth surfaces. The brushing motion disrupts and dislodges the dental biofilm, with the bristles providing the mechanical cleaning and the paste aiding lubrication and minor abrasion. While toothpaste can contain chemical ingredients that help protect teeth, the defining category here is the method—physical removal of plaque, not a chemical treatment. Chemical home care would involve substances that act chemically on bacteria or enamel, surgical home care refers to clinician-performed procedures, and dietary home care focuses on nutrition and food choices to influence oral health.

3. Which item is described as a product used to promote healing after cleaning?

- A. Doxirobe**
- B. Sealant**
- C. Doxycycline**
- D. COHAT**

After cleaning, promoting healing in the periodontal pockets is best supported by delivering a therapeutic agent directly to the site to curb bacteria and inflammation. A locally applied antibiotic gel is designed for this purpose, providing high drug concentrations right where they're needed to help tissues recover. Doxirobe fits this role well. It's a gel containing doxycycline that's placed into periodontal pockets after cleaning, promoting healing by reducing the bacterial load and moderating inflammation at the site of disease. A sealant, while useful for sealing tooth surfaces to prevent decay, isn't aimed at healing periodontal tissues. Systemic doxycycline can aid infection control but doesn't deliver the antibiotic specifically to the cleaned pockets. COHAT is the full treatment process, not a post-cleaning product.

4. Which interval corresponds to advanced periodontal disease evaluation?

- A. 2 weeks
- B. 2 months
- C. 1 month**
- D. 3 months

In advanced periodontal disease, you need frequent check-ins to catch rapid changes and adjust treatment quickly. About four weeks (roughly one month) is the ideal window because it gives enough time for tissues to respond to therapy and inflammation to subside, so you can accurately reassess pocket depths, bleeding on probing, and overall healing. This interval allows you to determine whether additional cleaning, adjustments in care, or further interventions are needed while the disease status is still modifiable. Shorter intervals aren't usually necessary for healing to begin, and longer gaps risk missing progression or insufficient response. That's why one month is the best fit for evaluating advanced disease.

5. Drug in Clindoral?

- A. Clindoral
- B. Amoxicillin
- C. Metronidazole
- D. Clindamycin**

Clindoral contains clindamycin, a lincosamide antibiotic. That's why it's the correct choice—the brand name Clindoral refers to the active drug clindamycin. Clindamycin is commonly used in veterinary dentistry for odontogenic infections because of its effectiveness against anaerobic oral bacteria and some Gram-positive organisms, plus it penetrates bone well. Amoxicillin and metronidazole are different antibiotics with separate active ingredients, so they're not what Clindoral contains. Clinically, clindamycin is a good option when penicillin allergy is a concern and for anaerobic-dominant dental infections.

6. What is a common result of refractory periodontitis?

- A. Chronic ulcerative paradental stomatitis**
- B. Gingival hyperplasia
- C. Tooth mobility without bone loss
- D. Halitosis

Refractory periodontitis means the disease continues despite standard therapy, so you look for persistent inflammation and tissue changes around the teeth. In dogs, a classic mucosal manifestation of this ongoing inflammatory state is chronic ulcerative paradental stomatitis, where the mucosa adjacent to the affected teeth becomes chronically ulcerated and inflamed, often on the buccal surfaces near molars and premolars in young dogs. This lesion reflects a persistent plaque-driven inflammatory/immune response that therapy struggles to fully control, making it a representative result of a refractory course. It isn't simply gingival overgrowth, nor is it typically described as tooth mobility without bone loss; halitosis can occur with periodontal disease in general but isn't as characteristic or defining as the mucosal ulceration seen in this refractory scenario.

7. Which hand scaling tool is used only on the crown?

- A. Scaler**
- B. Curette**
- C. Periodontal probing**
- D. Polisher**

The key idea here is differentiating hand instruments by where they're used on the tooth. A scaler is specifically designed to remove calculus from the crown, i.e., the supragingival surfaces above the gumline. Its design targets the exposed tooth surfaces without going beneath the gingiva, which is why it's the instrument you'd use for crown debridement. A curette, in contrast, is built for subgingival work and root surface scaling; its shape and beveling allow access under the gingival margin, so it isn't limited to the crown. Periodontal probing isn't a scaling tool at all—it's used to measure pocket depths and assess periodontal health. A polisher is used after scaling to smooth and polish tooth surfaces, not to remove calculus. So the tool used only on the crown is the scaler.

8. Primary bacteria found below the gum line are primarily what type?

- A. Anaerobic**
- B. Aerobic**
- C. Spirochetes**
- D. Actinomyces**

Beneath the gum line, oxygen is scarce because diffusion into the gingival sulcus is limited and inflammatory fluid uses available oxygen quickly. This creates an environment that favors bacteria that do not require oxygen to grow, or that tolerate very low oxygen levels—anaerobes. So, anaerobic bacteria become the dominant group in subgingival plaque. While spirochetes and Actinomyces can be present in the mouth, their associations are not as defining for the subgingival environment: Actinomyces are often found on the tooth surface and in supragingival plaque and many Actinomyces are facultatively anaerobic. Therefore, the primary bacteria found below the gum line are anaerobic.

9. What type of toothpaste should be used?

- A. Enzymatic**
- B. Fluoride-only**
- C. Carbonated**
- D. Saline-based**

Enzymatic toothpaste is best because it adds an active attack on the dental plaque biofilm, not just a cleaning action. The enzymes work to disrupt the plaque matrix and help reduce gingivitis between professional cleanings, providing ongoing antimicrobial effects as the animal chews and wipes away debris during brushing. It's also formulated to be safe if swallowed, which is essential for dogs and cats that tend to lick or swallow toothpaste, and it's usually flavored to be palatable, making owner brushing easier and more consistent. The other options don't offer the same combination of targeted plaque control and swallow-safe formulation. Carbonated toothpaste lacks proven dental benefits for pets. Fluoride-only formulations emphasize enamel remineralization but do not actively disrupt plaque and can pose ingestion concerns for animals. Saline-based pastes have minimal antibacterial or plaque-targeting action, so they don't provide meaningful help in preventing dental disease.

10. Stage 3 periodontal disease is defined by which combination of furcation involvement and attachment loss?

- A. Stage 3 with stage 2 furcation and 25-50% attachment loss**
- B. Stage 2 with stage 1 furcation and less than 25% attachment loss**
- C. Stage 4 with furcation stage 3 and more than 50% attachment loss**
- D. Stage 1 with gingivitis only**

Stage 3 periodontal disease reflects moderate destruction of the tooth-supporting structures, shown by 25-50% attachment loss and a notable furcation involvement. For multi-rooted teeth, furcation involvement graded as stage II means horizontal bone loss into the furcation area that the probe can enter, but it does not pass completely through to the opposite side. So having 25-50% attachment loss together with stage II furcation fits the moderate, mid-range severity characterized as stage 3. The other scenarios describe either milder disease (less than 25% attachment loss with minimal furcation involvement), more advanced disease (more than 50% attachment loss with a through-and-through furcation), or gingivitis-only, which is not periodontitis.

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://vetdentistrydentaldiseases.examzify.com>

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

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