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PRACTICE QUESTIONS

NDEB/BNED - The National Dental Examining Board of Canada / Le Bureau National D'examen Dentaire Du Canada

ECCSD

Examen des connaissances communes aux specialites dentaires

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for NDEB/BNED - The National Dental Examining Board of Canada / Le Bureau National D'examen Dentaire Du Canada **ECCSD**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **ECCSD**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

A patient presents with persistent numbness of the lower lip and chin following the extraction of a mandibular third molar. Which nerve is most likely affected?

- ☐ A Lingual nerve
- ☒ B Inferior alveolar nerve
- ☐ C Buccal nerve
- ☐ D Mylohyoid nerve

ANSWER B

WHY The inferior alveolar nerve runs within the mandibular canal and is at risk during third molar extractions, particularly when the roots are closely associated with the canal. Injury produces anaesthesia or paraesthesia of the lower lip and chin on the affected side, a classic presentation that distinguishes it from lingual nerve injury (which affects tongue sensation). The buccal nerve supplies the cheek mucosa and the mylohyoid nerve innervates the mylohyoid and anterior belly of digastric, not the lower lip.

QUESTION 2

SINGLE CHOICE

During a dental procedure, an adult patient suddenly becomes unresponsive and is found pulseless. What is the first action the dental practitioner should take according to current basic life support guidelines?

- ☐ A Administer epinephrine intramuscularly
- ☐ B Begin chest compressions immediately
- ☒ C Activate the emergency response and obtain an automated external defibrillator
- ☐ D Deliver two rescue breaths

ANSWER C

WHY In an unwitnessed or sudden collapse of an adult, the first action is to activate the emergency medical response and obtain an AED, then return to the patient to begin chest compressions and follow AED prompts. Delivering rescue breaths before compressions is not recommended for trained responders, and intramuscular epinephrine is not the first step in a pulseless patient — it follows once cardiac monitoring and the ACLS algorithm indicate a shockable or non-shockable rhythm.

QUESTION 3 SINGLE CHOICE

A patient reports pain in the preauricular region that worsens with chewing and is associated with clicking sounds on opening. The most likely diagnosis is:

- ☐ A Trigeminal neuralgia
- ☐ B Myofascial pain dysfunction
- ☒ C Temporomandibular joint internal derangement
- ☐ D Glossopharyngeal neuralgia

ANSWER C

WHY Clicking on opening combined with pain in the preauricular area aggravated by function is characteristic of internal derangement of the TMJ, most commonly anterior disc displacement with reduction. Trigeminal neuralgia produces brief, electric-shock-like pains triggered by light tactile stimuli, not clicking. Myofascial pain is muscular and typically reproduces pain with palpation of trigger points rather than joint sounds. Glossopharyngeal neuralgia involves the throat and posterior tongue.

QUESTION 4 SINGLE CHOICE

Which method is considered the most effective means of preventing cross-contamination from patient to patient via the dental handpiece?

- ☐ A Surface disinfection of the handpiece between patients
- ☒ B Sterilization of the handpiece by autoclave between each patient
- ☐ C Use of a disposable barrier sleeve that is changed between patients
- ☐ D Wiping the handpiece with an intermediate-level disinfectant

ANSWER B

WHY Handpieces contact oral fluids and, being internalised devices, cannot be reliably decontaminated by surface wiping or barrier sleeves alone. Current infection control standards require that handpieces be cleaned and heat-sterilized between every patient. Surface disinfection, barrier sleeves, and wipes are insufficient because internal contamination of the turbine and air/water lines cannot be eliminated by external methods.

QUESTION 5

MULTIPLE CHOICE

Which of the following medications place a patient at increased risk of prolonged bleeding after an invasive dental procedure? (Choose two.)

- ☒ **A** Warfarin
- ☐ **B** Metformin
- ☒ **C** Clopidogrel
- ☐ **D** Acetaminophen

ANSWER A • C

WHY Warfarin is a vitamin K antagonist that inhibits the synthesis of clotting factors II, VII, IX, and X, prolonging the international normalized ratio (INR) and bleeding time. Clopidogrel is an irreversible inhibitor of platelet ADP receptors and impairs platelet aggregation. Both increase the risk of post-extraction or surgical bleeding. Metformin is an oral hypoglycemic used in type 2 diabetes and does not affect hemostasis. Acetaminophen has no clinically significant effect on coagulation at therapeutic doses.

QUESTION 6

SINGLE CHOICE

Which property of a dental amalgam restoration most directly accounts for the need to warn the patient about possible sensitivity to cold for a few days after placement?

- ☒ **A** High thermal conductivity of the metal
- ☐ **B** Expansion of the amalgam on setting
- ☐ **C** Galvanic reaction with adjacent restorations
- ☐ **D** Corrosion products sealing the margin

ANSWER A

WHY Dental amalgam has high thermal conductivity compared with tooth structure and composite resins. After placement, particularly in deep cavities, cold stimuli are readily transmitted through the metal to the pulp, producing post-operative sensitivity that usually resolves once a layer of corrosion products and protective secondary dentin forms. Marginal sealing by corrosion is a long-term benefit and is not the cause of the immediate post-operative cold sensitivity. Setting expansion is small and is not responsible for thermal sensitivity.

QUESTION 7

SINGLE CHOICE

A patient receives an inferior alveolar nerve block and immediately develops facial nerve paralysis with inability to close the eye on the injected side. The most likely cause is:

- ☐ A Intravascular injection of local anaesthetic
- ☒ B Direct injection into the parotid capsule with anaesthetic tracking to the facial nerve
- ☐ C Anaphylaxis to the anaesthetic solution
- ☐ D Local anaesthetic systemic toxicity (LAST)

ANSWER B

WHY Transient facial nerve palsy following an inferior alveolar nerve block occurs when the needle is inserted too far posteriorly, depositing local anaesthetic within the parotid gland, which lies in close proximity to the facial nerve as it exits the stylomastoid foramen. The anaesthetic diffuses to the facial nerve, producing motor paralysis of the muscles of facial expression, including the orbicularis oculi. LAST and anaphylaxis are systemic and would produce additional findings such as CNS symptoms or airway compromise, not isolated facial paralysis. Intravascular injection may cause systemic effects but does not selectively paralyse the facial nerve.

QUESTION 8

SINGLE CHOICE

A 58-year-old smoker presents with a persistent, non-healing ulcer on the lateral border of the tongue lasting more than three weeks. The most appropriate immediate action is:

- ☐ A Prescribe a topical antifungal and review in two weeks
- ☒ B Perform an incisional or excisional biopsy for definitive diagnosis
- ☐ C Reassure the patient that trauma is the likely cause
- ☐ D Treat empirically with a corticosteroid rinse

ANSWER B

WHY Any oral ulcer persisting beyond two to three weeks must be considered potentially malignant until proven otherwise, particularly in older patients with risk factors such as tobacco use. A biopsy is required for definitive histological diagnosis because clinical appearance alone cannot reliably distinguish between traumatic, infectious, premalignant and malignant lesions. Empirical treatment with antifungals, corticosteroids, or reassurance delays diagnosis and worsens prognosis if the lesion is a squamous cell carcinoma.

QUESTION 9

MULTIPLE CHOICE

Which of the following measures reduce radiation dose to the patient during intraoral dental radiography? (Choose two.)

- ☒ A Use of a rectangular collimator
- ☐ B Use of D-speed film in place of F-speed film
- ☒ C Use of a thyroid collar
- ☐ D Increasing the kilovoltage to maximum

ANSWER A • C

WHY A rectangular collimator restricts the X-ray beam to the size of the image receptor, reducing patient exposure by roughly 60 percent compared with a round collimator. A thyroid collar shields the highly radiosensitive thyroid gland from scatter and primary beam. F-speed film is more sensitive than D-speed and therefore requires less radiation, so substituting D for F would increase, not decrease, dose. Increasing kilovoltage raises beam quality but also increases penetrating radiation dose to the patient.