

01	☐ A	☒ B	☐ C	☐ D	☐ E
02	☐ A	☒ B	☐ C	☐ D	☐ E
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30	☒ A	☐ B	☐ C	☐ D	☐ E
31	☐ A	☐ B	☐ C	☐ D	☒ E
32	☐ A	☒ B	☐ C	☐ D	☐ E
33	☐ A	☐ B	☐ C	☐ D	☒ E
34	☐ A	☐ B	☐ C	☒ D	☐ E
35	☐ A	☐ B	☐ C	☒ D	☐ E
36	☐ A	☐ B	☒ C	☐ D	☐ E
37	☐ A	☐ B	☐ C	☐ D	☒ E
38	☐ A	☒ B	☐ C	☐ D	☐ E
39	☐ A	☐ B	☐ C	☐ D	☒ E

PRACTICE QUESTIONS

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

EJC

Évaluation du jugement clinique

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 **EJC**, 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, **EJC**
- 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 52-year-old patient presents with a chief complaint of intermittent pain in the lower right quadrant. Clinical examination reveals a cracked lower right first molar with a vital pulp and no periapical pathology. Which of the following is the most appropriate next step in management?

- ☒ **A** Recommend full-coverage crown to protect the remaining tooth structure
- ☐ **B** Begin endodontic therapy
- ☐ **C** Extract the tooth and place an implant
- ☐ **D** Prescribe systemic antibiotics and re-evaluate in two weeks

ANSWER A

WHY For a cracked tooth with a vital pulp and no periapical involvement, full-coverage restoration is the appropriate treatment to protect the remaining tooth structure and prevent further propagation of the crack. Endodontic therapy is not indicated because the pulp is vital and asymptomatic. Extraction and implant placement is overly aggressive given that the tooth is restorable. Antibiotics are not indicated because there is no infection present.

QUESTION 2

SINGLE CHOICE

A 9-year-old child presents within one hour of having her maxillary permanent central incisor completely avulsed. The tooth is recovered and the root appears intact. Which of the following is the most appropriate immediate management of the tooth before replantation?

- ☐ A Allow the tooth to dry in air for transport
- ☒ B Rinse the tooth with saline and soak it in milk during transport
- ☐ C Scrub the root surface with a toothbrush and toothpaste
- ☐ D Immerse the tooth in 3% hydrogen peroxide

ANSWER B

WHY The most appropriate management for an avulsed permanent tooth prior to replantation is to rinse it gently with saline and keep it moist in a physiologic medium such as milk (or saline or saliva). The periodontal ligament cells must be preserved to optimize healing. Allowing the tooth to dry kills PDL cells and worsens prognosis. Scrubbing the root damages the PDL. Hydrogen peroxide is toxic to PDL cells and is not recommended.

QUESTION 3

SINGLE CHOICE

During a routine dental extraction under local anesthesia, a 65-year-old patient becomes diaphoretic, complains of chest pressure, and appears pale and anxious. Vital signs show BP 90/60 mmHg and pulse 48 bpm. What is the most appropriate immediate action?

- ☐ A Continue the procedure and complete the extraction quickly
- ☐ B Administer epinephrine 1:1000 intramuscularly
- ☒ C Stop treatment, position the patient supine, and administer oxygen
- ☐ D Administer oral nitroglycerin

ANSWER C

WHY These signs and symptoms (chest pressure, diaphoresis, hypotension, bradycardia) suggest a cardiac event. The correct immediate response is to stop the dental procedure, ensure the patient is in a safe position (supine if tolerated), administer oxygen, and activate emergency medical services. Epinephrine 1:1000 IM is appropriate for anaphylaxis, not cardiac ischemia. Oral nitroglycerin should not be given if the patient is hypotensive (BP 90/60). Continuing treatment is contraindicated.

QUESTION 4

SINGLE CHOICE

According to current infection control guidelines in Canada, which method is recommended for sterilization of dental handpieces between patients?

- ☐ A Surface disinfection with an intermediate-level hospital disinfectant
- ☒ B Autoclaving using a steam sterilizer after cleaning and lubrication
- ☐ C Immersion in cold sterilant for 10 minutes
- ☐ D Wiping with alcohol-based disinfectant between uses

ANSWER B

WHY Dental handpieces are considered semicritical items that contact mucous membranes and must be heat-sterilized between patients. The recommended method is steam autoclaving after proper cleaning and lubrication according to the manufacturer's instructions. Surface disinfection, short chemical immersion, and alcohol wipes are inadequate because they do not reliably sterilize the internal lumen and may damage the handpiece.

QUESTION 5

SINGLE CHOICE

A 45-year-old patient presents with a persistent, non-healing ulcer on the lateral border of the tongue that has been present for six weeks. The lesion is indurated with raised, rolled borders. Which of the following is the most appropriate next step?

- ☐ A Prescribe a topical corticosteroid and re-evaluate in two weeks
- ☐ B Reassure the patient that the lesion is traumatic and will resolve
- ☐ C Perform an excisional biopsy for definitive diagnosis
- ☒ D Perform an incisional biopsy for definitive diagnosis

ANSWER D

WHY Any oral ulcer persisting longer than two weeks with indurated, raised borders must be considered malignant (squamous cell carcinoma) until proven otherwise. An incisional biopsy is the appropriate diagnostic procedure because it provides a tissue sample for histopathologic evaluation while preserving the lesion for definitive surgical management if malignancy is confirmed. Excisional biopsy would be inappropriate for a lesion of this size and suspicion level. Topical steroids and reassurance are inappropriate and would delay diagnosis of a potentially life-threatening lesion.

QUESTION 6

SINGLE CHOICE

A 7-year-old child with multiple carious lesions on smooth surfaces and a high caries rate has been placed on a comprehensive preventive program. Which community water fluoridation level has been shown to provide optimal caries protection while minimizing the risk of fluorosis in Canadian communities?

- ☐ A 0.05 ppm
- ☒ B 0.7 ppm
- ☐ C 2.0 ppm
- ☐ D 5.0 ppm

ANSWER B

WHY Health Canada recommends an optimal community water fluoridation level of 0.7 mg/L (ppm) to balance caries prevention with the risk of dental fluorosis. A level of 0.05 ppm is below the optimal range and would not provide adequate caries protection. Levels of 2.0 ppm and 5.0 ppm exceed the optimal range and substantially increase the risk of fluorosis and other adverse effects.

QUESTION 7

SINGLE CHOICE

A patient presents with generalized probing depths of 5-7 mm, generalized bleeding on probing, and radiographic evidence of horizontal bone loss. Which of the following is the most appropriate initial therapy for this patient with generalized chronic periodontitis?

- ☐ A Full-mouth extractions and complete denture placement
- ☒ B Scaling and root planing combined with oral hygiene instruction
- ☐ C Gingivectomy to eliminate pseudo-pockets
- ☐ D Systemic antibiotic therapy only

ANSWER B

WHY The standard initial (non-surgical) therapy for generalized chronic periodontitis is scaling and root planing (SRP) combined with patient education on oral hygiene and risk factor modification. SRP reduces inflammation, decreases probing depths, and improves clinical attachment levels. Extractions and full dentures are not indicated when teeth can be maintained. Gingivectomy does not address true pockets associated with bone loss. Antibiotics alone, without mechanical debridement, are inadequate and contribute to resistance.

QUESTION 8

TRUE FALSE

A dentist who suspects that a colleague is impaired due to substance abuse has an ethical and, in most Canadian provinces, a legal obligation to report the concern to the appropriate regulatory authority, even when the suspected impairment has not directly harmed a patient.

☐ A True☒ B False**ANSWER B**

WHY False. In most Canadian provinces, dentists have an ethical obligation to act when they have reasonable grounds to believe a colleague is impaired and may pose a risk to patients. The threshold generally requires evidence that the impairment may affect patient safety, rather than mere suspicion unrelated to clinical practice. While many regulatory bodies encourage voluntary reporting of any suspected impairment, the duty to report typically arises when there is a reasonable belief that patient care may be compromised. Ethical codes (such as those of the Canadian Dental Association) emphasize that patient welfare is paramount and that there is a duty to take action when impairment threatens patient safety, but the precise legal threshold varies by jurisdiction.

QUESTION 9

MULTIPLE CHOICE

A patient with a history of infective endocarditis is scheduled for a dental procedure that is expected to involve manipulation of the gingival tissue. Which of the following statements regarding antibiotic prophylaxis are correct? (Choose two.)

- ☒ **A** Amoxicillin 2 g orally, 30 to 60 minutes before the procedure, is the recommended first-line regimen for patients who are not allergic to penicillin
- ☒ **B** Clindamycin is no longer recommended as an alternative for patients allergic to penicillin due to the risk of *Clostridioides difficile* infection
- ☐ **C** Prophylactic antibiotics are required for all patients with prosthetic heart valves undergoing dental hygiene procedures
- ☐ **D** Post-operative antibiotics for two weeks are required following the procedure

ANSWER A - B

WHY The current (AHA 2021) guidelines recommend amoxicillin 2 g orally as the first-line prophylactic regimen 30–60 minutes prior to dental procedures involving gingival manipulation in at-risk patients. Clindamycin is no longer recommended as an alternative due to its association with *C. difficile* colitis and other adverse events. Prophylaxis is not required for all patients with prosthetic heart valves undergoing dental hygiene procedures; it is indicated only for those undergoing procedures that involve manipulation of gingival tissue or the periapical region of teeth or perforation of the oral mucosa. Post-operative antibiotic courses are not recommended; a single pre-procedure dose is the standard.