INBDE Practice Questions
Which permanent tooth is least likely to spontaneously erupt?

A. 2  
B. 5  
C. 6  
D. 29  

Key: C  
CC07, CC08, CC14  
FK4  
Field Test A
Which mechanism of action most likely explains the current complaint?

A. Vitamin K inhibition  
B. Direct thrombin inhibition  
C. Antithrombin III activation  
D. Platelet aggregation inhibition

| Patient |  
|---|---|
| Male, 60 years old |  

| Chief Complaint |  
|---|---|
| “My gums are bleeding for no apparent cause.” |  

| Background and/or Patient History |  
|---|---|
| Prosthetic heart valve  
Medications:  
lithium (Lithobid®)  
metformin (Glucophage®)  
atorvastatin (Lipitor®)  
warfarin (Coumadin®) |  

| Current Findings |  
|---|---|
| Vital signs stable  
No acute distress  
Spontaneous gingival bleeding  
INR: 5 |  

Key: A  
CC09, CC20  
FK8, FK1  
Field Test A
Which is the best treatment for the labial buccal mucosal lesions?

A. Dexamethasone elixir
B. Nystatin suspension
C. Tetracycline oral rinse
D. Valacyclovir (Valtrex®) tablets

**Key:** D

**CC19**

**FK8**

**Field Test A**
Where is the infection most likely located?

A. Buccal vestibule  
B. Canine space  
C. Nasal cavity  
D. Pterygomaxillary space

Key: B  
CC01, CC20, CC31  
FK1, FK2, FK5, FK7  
Field Test A
The most appropriate next step would be to:

A. discontinue current antibiotic and refer to physician.
B. discontinue current antibiotic and substitute with azithromycin (Z-Pak®).
C. recommend loperamide (Imodium®).
D. recommend probiotics.
After demonstration during the first restorative appointment, the next management technique would be:

A. distraction.
B. explanation.
C. rationalization.
D. sedation.

Key: A
CC14
FK9
Field Test A
Post-treatment discomfort is best managed with:

A. acetaminophen (Tylenol®).
B. codeine.
C. ibuprofen (Advil®).
D. tramadol (Ultram®).

**Key:** C

**Patient**

Female, 12 years old

**Chief Complaint**

“My mouth hurts.”

**Background and/or Patient History**

Four first premolars extracted 24 hours ago.

**Current Findings**

No swelling
Before extracting tooth 24, which one of the following is the best option?

A. No antibiotic administration is required.
B. Amoxicillin 2 grams should be taken 30 minutes to 60 minutes before procedure.
C. Warfarin (Coumadin®) should be discontinued the morning before procedure.
D. Clarithromycin (Biaxin®) 500 milligrams should be taken 30 minutes to 60 minutes before procedure.

Key: B
CC01
FK3
Field Test A

<table>
<thead>
<tr>
<th>Patient</th>
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<tr>
<td>Male, 65 years old</td>
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<table>
<thead>
<tr>
<th>Chief Complaint</th>
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<tr>
<td>“My tooth has turned dark grey.”</td>
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<table>
<thead>
<tr>
<th>Background and/or Patient History</th>
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<tbody>
<tr>
<td>Prosthetic heart valve</td>
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<tr>
<td>Medications:</td>
</tr>
<tr>
<td>warfarin (Coumadin®)</td>
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<table>
<thead>
<tr>
<th>Current Findings</th>
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</thead>
<tbody>
<tr>
<td>Necrotic tooth 24</td>
</tr>
<tr>
<td>Not responding to cold</td>
</tr>
<tr>
<td>No swelling present</td>
</tr>
<tr>
<td>INR: 3</td>
</tr>
</tbody>
</table>
What is most likely causing the chief complaint?

A. Gold interfacing with amalgam  
B. PFM bridge  
C. Titanium implants  
D. Zirconia interfacing with amalgam
Which is most important to ask the parent first?

A. “Did the child lose consciousness?”
B. “Do you have the teeth?”
C. “When did the child last eat?”
D. “When did the injury occur?”

Key: A
CC19, CC31, CC38
FK2, FK 5, FK7
Field Test A
### Patient
Male, 14 years old

### Chief Complaint
“I can’t seem to get rid of the sores at the corners of my mouth.”

### Background and/or Patient History
Painful lesion
- recurrent, never go away entirely

### Current Findings

**The most appropriate treatment is:**

A. acyclovir (Zovirax®) cream.
B. amantadine (Symmetrel®).
C. amlexanox (Aphthasol®).
D. nystatin and triamcinolone (Mycolog®-II) cream.

**Key:** D
CC09, CC19
FK8
Field Test A
Before performing a crown lengthening surgery, which one of the following is the best option?

A. No antibiotic administration is required.
B. Amoxicillin 2 grams should be taken 30 minutes to 60 minutes before procedure.
C. Warfarin (Coumadin®) should be discontinued the morning before procedure.
D. Clarithromycin (Biaxin®) 500 milligrams should be taken 30 minutes to 60 minutes before procedure.

Key: B
Which graph best shows the likely plaque pH response after drinking a sugary beverage?

- **A**
- **B**
- **C**
- **D**

**Control**

**Key:** A  
CC24  
FK1  
Presented to ADEA
Which mechanism of action most likely explains the chief complaint?

A. Antithrombin III inactivation
B. Coagulation activation
C. Thrombin inhibition
D. Vitamin K antagonism

**Patient**

| Male, 60 years old |

**Chief Complaint**

“My gums bleed easily.”

**Background and/or Patient History**

- Paroxysmal supraventricular tachycardia
- Pulmonary embolism
- Type 2 diabetes
- Hypertension
- Hyperlipidemia
Medications:
  - metformin (Glucophage®)
  - atorvastatin (Lipitor®)
  - warfarin (Coumadin®)
  - aspirin 81 mg daily

**Current Findings**

| BP: 145/90 |
| Diffuse gingival bleeding |

Key: D
CC020
FK8
Which test would provide a definitive diagnosis of the complaint?

A. Bleeding time  
B. International normalization ratio  
C. Partial thromboplastin time  
D. Platelet count  
E. Serum vitamin K

Patient
Male, 60 years old

Chief Complaint
“My gums bleed easily.”

Background and/or Patient History
Paroxysmal supraventricular tachycardia  
Pulmonary embolism  
Type 2 diabetes  
Hypertension  
Hyperlipidemia  
Medications:  
  - metformin (Glucophage®)  
  - atorvastatin (Lipitor®)  
  - warfarin (Coumadin®)  
  - aspirin 81 mg daily

Current Findings
BP: 145/90  
Diffuse gingival bleeding

Key: B  
CC01, CC20  
FK1
The most appropriate antimicrobial agent is:

A. amoxicillin and clavulanate (Augmentin®).
B. cephalexin (Keflex®).
C. clindamycin (Cleocin®).
D. metronidazole (Flagyl®).

### Patient
- Male, 48 years old

### Chief Complaint
- “I’ve been in pain for two days and now my face is swollen.”

### Background and/or Patient History
- Hypertension
- Type 2 diabetes
- Penicillin allergy

### Current Findings
- Facial edema
- Lymphadenopathy
- Extensive apical radiolucency associated with tooth 6
- Temp: 100.3°F
- BP: 150/93
- Blood glucose 240 mg/dL

**Key:** C  
CC19, CC31, CC38  
FK1, FK2, FK5, FK7
Which screening radiograph would be most helpful in diagnosing a mandibular fracture?

A. Bitewing  
B. Lateral cephalogram  
C. Panoramic  
D. Periapical

**Patient**

Male, 9 years old

**Chief Complaint**

Parent: “My son was hit in the face with a baseball and he’s bleeding and missing teeth!”

**Background and/or Patient History**

Type 1 diabetes

**Current Findings**

Key: C  
CC08, CC38  
FK1, FK2

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Reimplantation is desired. What is the best way to protect permanent teeth after avulsion?

A. Place back into the sockets
B. Place under the tongue
C. Put in a cup of milk
D. Wrap in a wet napkin

Key: A
CC36, CC38
FK1, FK5, FK6
The fractured fragment of tooth 7 has not been found. What is the first step?

A. Administer appropriate pulp therapy  
B. Ask the parent if there was a pre-existing fracture  
C. Evaluate pulpal status  
D. Radiographic image of lower lip

Key: B
CC01, CC03, CC06, CC08, CC31, CC32, CC38
FK1, FK2
Where would a loss of taste be expected?

A. 1 and 2
B. 2 and 3
C. 3 and 4
D. 2, 3, and 4

Key: B
CC21
FK1, FK2
The procedure results in a carious exposure of the pulp. The patient chooses to have the tooth extracted. What is the next step at this appointment?

A. Discontinue dabigatran (Pradaxa®) the morning of the appointment.
B. Obtain an INR the morning of the procedure.
C. Proceed without treatment modification.
D. Use 2% lidocaine (Xylocaine®) with 1:50,000 epinephrine.

Key: C
CC20
FK6, FK8
What is the etiology of this condition?

A. Bacterial infection
B. Fungal infection
C. Viral infection
D. Vitamin B12 deficiency

Key: B
CC42
FK7
A drug has a half-life of 4 hours. Upon discontinuing the drug:

A. 87% will be eliminated in 8 hours.
B. 90% will be eliminated in 24 hours.
C. 94% will be eliminated in 12 hours.
D. 94% will be eliminated in 16 hours.

Key: C
CC20
FK6, FK8
Physician referral is most urgent for the treatment of:

A. anxiety.
B. hypertension.
C. obesity.
D. smoking.

Key: B
CC01, CC10
FK6, FK8
When making decisions about patient treatment, which type of study provides the strongest evidence?

A. Case control  
B. Cohort  
C. Double-blind randomized  
D. Evidence summary  
E. Systematic review

Key: E
Which mechanism of action most likely explains the current complaint?

A. Vitamin K inhibition
B. Direct thrombin inhibition
C. Antithrombin III activation
D. Platelet aggregation

Patient

Male, 60 years old

Chief Complaint

“My gums are bleeding with no apparent cause.”

Background and/or Patient History

Type 2 diabetes
Medications:
- lithium (Lithobid®)
- metformin (Glucophage®)
- atorvastatin (Lipitor®)
- dabigatran (Pradaxa®)

Current Findings

Vital signs stable
No acute distress
Spontaneous gingival bleeding
Blood glucose: 90 mg/dL

Key: B
CC??
FK?
Which anatomical structure is indicated by the arrow?

A. Tooth 1
B. Tooth 2
C. Tooth 16
D. Tooth 17

Key: D

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Which permanent tooth is most likely to erupt next?

A. Tooth marked by a
B. Tooth marked by b
C. Tooth marked by c
D. Tooth marked by d

Key: D
The bilateral radiopacity inferior to the mandible is the:

A. calcified carotid artery.
B. clavicle.
C. hyoid bone.
D. laryngeal skeleton.

Key: C
The most appropriate management is:

A. amalgam restoration.
B. monitor lesion at subsequent visits.
C. resin restoration.
D. sealant.
Which statement is correct regarding the prior skin tumor?

A. The depth of invasion is not important in establishing prognosis.
B. It is formed by malignant Langerhans cells.
C. It is often associated with chronic actinic damage.
D. It often has well demarcated borders.

Key: C
A patient has a maximum opening of 25mm. Each of the following could be a contribution. Which is the EXCEPTION?

A. Condylar ankylosis  
B. Fatigue of the masseter muscle  
C. Hypertrophy of the coronoid process  
D. Pericoronitis

Key: B
The dentist refers the patient to his physician for the complaint of a sore throat. The patient is given a prescription for amoxicillin (Amoxil®), which is taken by the patient for the next three days. The patient returns two weeks later with complaints of pain in multiple joints and an epidermal rash on his trunk area. What is the most likely cause of these new signs and symptoms?

A. An allergy to amoxicillin (Amoxil®)
B. Bacterial endocarditis
C. Erythema multiforme
D. Rheumatic fever

Key: D
CC02
FK?
Definitive management of the lesion would include:

A. an antifungal agent.
B. exfoliative cytology.
C. incisional biopsy.
D. tobacco cessation treatment.

Patient
Male, 53 years old

Chief Complaint
“I don’t like the way I look. I want dentures.”

Background and/or Patient History
Cardiac bypass surgery, 3 years ago
Right hip replacement, 5 years ago
Prostate adenocarcinoma, 3 years ago
Anxiety and Depression
GERD
Post-cancer osteoporosis
Medications:
  alprazolam (Xanax®)
  bupropion (Wellbutrin®)
  clopidogrel (Plavix®)
  omeprazole (Prilosec®)
  simvastatin (Zocor®)
  zoledronic acid (Zometa®)
Has not seen a dentist in 25 years
Smoker (cigarettes), 30 pack-year history

Current Findings
Decayed and missing front teeth with periodontitis
Sensitivity to cold in upper posterior left quadrant
Xerostomia
Which is the most likely cause of the oropharyngeal signs and symptoms?

A. Hand, foot, and mouth viral infection  
B. Mononucleosis  
C. Streptococcal pharyngitis  
D. Varicella zoster infection

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<table>
<thead>
<tr>
<th>Patient</th>
<th>Male, 45 years old</th>
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<tbody>
<tr>
<td>Chief Complaint</td>
<td>“My teeth look bad and are loose. I also have a sore throat and don’t feel good.”</td>
</tr>
</tbody>
</table>
| Background and/or Patient History | Smoker (cigarettes), 12 pack-year history  
Factory worker |
| Current Findings | Temp: 101 F  
Malaise for 4-5 days  
Bilateral tender anterior cervical lymph nodes  
Bilateral enlargement of tonsils |
A patient expresses the desire to quit smoking after a 40 pack-year history. Each of the following would be an appropriate action EXCEPT one. Which is the EXCEPTION?

A. Prescribe a nicotine (NicoDerm-CQ®) patch  
B. Recommend hypnosis  
C. Recommend nicotine (Nicorette®) chewing gum  
D. Recommend use of a smokeless tobacco

Key: D  
CC13  
FK?
The initial treatment should include each of the following EXCEPT one. Which is the EXCEPTION?

A. Bite plane splint therapy
B. Diet modification
C. Minor occlusal adjustment
D. Muscle relaxant prescription

Key: C
CC05
FK?
The bilateral radiopacities are:

A. amalgam tattoos.
B. artifacts.
C. remnants from iatrogenic dentistry.
D. rigid fixation from trauma.

Key: B
CC07
FK?
Which mechanism results in the soft tissue condition identified in the intraoral exam?

A. Activation of cellular autophagy to decrease apoptosis
B. Binding of proinflammatory-related receptors on myeloid cells
C. Increased production of the osteoblastogenesis-related factors
D. Upregulation of receptor antagonists against enzyme activity by Porphyromonas gingivalis

Key: B
CC20
FK?
What is the greatest threat to pulp vitality during preparation of a tooth?

A. Bacteria  
B. Desiccation  
C. Heat  
D. Pressure  

Key: C
Which base or liner may interfere with the polymerization of a resin composite restoration?

A. Calcium hydroxide  
B. Copolymer  
C. Glass ionomer  
D. Zinc oxide eugenol

Key: D
CC28
FK?
Each of the following is true of taurodontism EXCEPT one. Which is the EXCEPTION?

A. Larger pulp chamber due to occlusally displaced furcation
B. Occurs in patients with amelogenesis imperfecta and Down syndrome
C. Permanent and primary teeth may be affected
D. Unusual root shape due to late invagination of Hertwig's root sheath

Key: A
CC32 FK?
Periodontal findings in the mandibular anterior region demonstrate a correlation between:

A. erythema and smoking history.
B. original margin position and post-therapy gingival margin position.
C. probing depths and radiographic findings.
D. soft tissue contours and local factors.

**Patient**
- Male, 45 years old

**Chief Complaint**
- “My teeth look bad and are loose. I also have a sore throat and don’t feel good.”

**Background and/or Patient History**
- Smoker (cigarettes), 12 pack-year history
- Factory worker

**Current Findings**
- Temp: 101 F
- Malaise for 4-5 days
- Bilateral tender anterior cervical lymph nodes
- Bilateral enlargement of tonsils

Key: D
CC20
FK?
The best diagnosis is:

A. candidosis.
B. herpangina.
C. mononucleosis.
D. streptococcal pharyngitis.

<table>
<thead>
<tr>
<th>Patient</th>
<th>Male, 16 years old, accompanied by parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Complaint</td>
<td>“I am here for my cleaning.”</td>
</tr>
<tr>
<td>Background and/or Patient History</td>
<td>Medications: albuterol (Proventil®)</td>
</tr>
<tr>
<td>Current Findings</td>
<td>White plaque covering the areas of the posterior hard and soft palatal mucosa</td>
</tr>
</tbody>
</table>

Key: A
CC37
FK?
Management of the most common opportunistic infection in this case includes which drug?

A. Carbamazepine (Tegretol®).
B. Cephalexin (Keflex®).
C. Clonazepam (Klonopin®).
D. Clotrimazole (Mycelex®).

Key: D
CC24
FK?
What is the most appropriate emergency treatment?

A. Antibiotics and NSAIDs
B. Occlusal adjustment and NSAIDs
C. Pulpectomy and antibiotics
D. Pulpectomy and NSAIDs

Key: D
CC17
FK?
The patient's physician prescribed cephalexin (Keflex®) 2 gm, to be taken prior to the dental treatment. The patient presents to the dental office with a rash and itching on the chest, neck, and arms. Each of the following is an appropriate next step EXCEPT one. Which is the EXCEPTION?

A. Administer diphenhydramine (Benadryl®) and monitor the patient
B. Contact the patient's physician to discuss options for treating the patient
C. Recommend clindamycin (Cleocin®) if an antibiotic is needed for future dental treatment
D. Decrease the dose of cephalexin (Keflex®) to 1 gm prior to dental treatment

Key: D
CC15
FK?
What should be the first action for the dentist to take after the initial oral diagnosis and treatment plan discussion?

A. Encourage the patient to discuss previous traumatic dental experiences.
B. Refer the patient for behavioral therapy prior to initiating dental treatment.
C. Schedule the patient for restorative procedures in one appointment.
D. Schedule the patient for restorative procedures under conscious sedation.

<table>
<thead>
<tr>
<th>Patient</th>
<th>Current Findings</th>
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<tr>
<td>Female, 45 years old</td>
<td>Oral and radiographic examination reveal multiple caries</td>
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<table>
<thead>
<tr>
<th>Chief Complaint</th>
<th></th>
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<tbody>
<tr>
<td>“I want to get my teeth checked.”</td>
<td></td>
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<table>
<thead>
<tr>
<th>Background and/or Patient History</th>
<th></th>
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<tbody>
<tr>
<td>New patient</td>
<td></td>
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<tr>
<td>Self-proclaimed dental phobia</td>
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<tr>
<td>History of infrequent dental care</td>
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<tr>
<td>Suffered traumatic dental treatment experience as a child</td>
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</table>
Which action should be performed by the dentist?

A. Curette the socket and suture the site.
B. Inspect the socket and reassure the mother and infant.
C. Reimplant the tooth and splint to adjacent teeth.
D. Reimplant the tooth but do not splint.

### Patient
Male, 1 year old, accompanied by mother

### Chief Complaint
Mother: “My son fell and a baby tooth came out.”

### Background and/or Patient History
Has never seen a dentist before, but family members are patients of record

### Current Findings
Tooth E has avulsed and is in a cup of milk

Key: B
CC37
FK?
There are four posterior teeth present in the mandibular left quadrant. One tooth has five cusps, two teeth have four cusps, and another tooth has three cusps. Which tooth is missing?

A. 18  
B. 19  
C. 20  
D. 21

**Patient**
- Female, 30 years old

**Chief Complaint**
- “I want my teeth fixed before getting pregnant.”

**Background and/or Patient History**
- Duodenal ulcer  
- Medications: antacids, oral contraceptives  
- Extractions prior to orthodontic treatment  
- 10 years since last dental visit

**Current Findings**
- Missing and carious teeth  
- Gingival swelling and erythema around tooth 17  
- Bilateral tenderness in muscles of mastication

Key: D CC26 FK?
The patient asks about replacement of his missing teeth. What is the most appropriate response?

A. "It will help stabilize your bite."
B. "Replacement isn't essential."
C. “Replacing those teeth will improve esthetics."
D. "Your medical condition precludes replacement."

Key: B
If the patient's father is unaffected and the mother is a carrier, what is the expected incidence of siblings NOT being phenotypically affected?

A. 12.5%
B. 25%
C. 50%
D. 75%
E. 100%
What poses the most prevalent risk of pathogen transmission in the dental office?

A. Aerosals  
B. Dental instruments  
C. Environmental surfaces  
D. Hands

Key: D
OSHA’s bloodborne pathogen standard requires healthcare employers to do each of the following EXCEPT one. Which is the EXCEPTION?

A. Establish an exposure control plan.
B. Implement the use of standard precautions.
C. Make hepatitis C vaccinations available.
D. Provide personal protective equipment.

Key: C
CC44
FK?
Each of the following would be included in the treatment plan discussion EXCEPT one. Which is the EXCEPTION?

A. “Do you understand that you might have to go without teeth for a while?”
B. "The denture will allow you to chew much better than your natural teeth."
C. "What do you expect your denture to do for you?"
D. "You will need to return for regular follow-ups after the first phase of treatment."

Key: B
CC38
FK?
The most accurate predictor of financial stability during retirement is the:

A. ability to time the market gains and losses.
B. duration of time one has to invest.
C. formation of a defined benefit pension plan.
D. mix of stocks and bonds in one's portfolio.

Key: B
CC4
FK?
Each of the following is an appropriate patient management measure EXCEPT one. Which is the EXCEPTION?

A. Antibiotic premedication prior to surgical procedures
B. Respect for patient's autonomy
C. Referral to a dental specialist
D. Use of local anesthetic with epinephrine