

Chapter 01: The Dental Hygiene Profession

Bowen: Darby and Walsh Dental Hygiene: Theory and Practice, 5th Edition

MULTIPLE CHOICE

1. If an individual's oral health changes, the dental hygienist, within the scope of dental hygiene practice, provides the highest quality of dental hygiene care to guide the person back to
 - a. a cure for their oral diseases.
 - b. an ideal state of oral hygiene.
 - c. oral wellness.
 - d. reversal of tissue loss.

ANS: C

If oral wellness cannot be achieved, dental hygiene care helps to attain and maintain the best possible level of oral health.

DIF: Recall

REF: 1

OBJ: 1

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

2. Which provides a framework for delivering high-quality dental hygiene care to all types of clients in any environment or professional role?
 - a. The Dental Hygiene Process of Care
 - b. The Dental Hygiene Workforce Model
 - c. The Dental Hygiene National Board
 - d. The American Dental Hygienists' Association

ANS: A

This process requires decision making and assumes that dental hygienists are responsible for supporting positive health behaviors and both identifying and resolving client problems and needs within the scope of dental hygiene practice.

DIF: Comprehension

REF: 2

OBJ: 1

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

3. How many key behaviors, or steps, are found in the dental hygiene process of care?
 - a. Two
 - b. Four
 - c. Six
 - d. Eight

ANS: C

The six steps include assessment, dental hygiene diagnosis, planning, implementation, evaluation, and documentation.

DIF: Recall

REF: 2

OBJ: 1

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

4. Which step of the dental hygiene process of care involves assessment of oral and health conditions and patient behaviors by collecting and interpreting data using measurable outcomes?
- Documentation
 - Assessment
 - Dental hygiene diagnosis
 - Evaluation

ANS: D

Evaluation occurs throughout the process of care and the care plan or treatment implemented is modified as needed.

DIF: Recall

REF: 2

OBJ: 1

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

5. Which is the first step of the dental hygiene process of care?
- Dental hygiene diagnosis
 - Planning
 - Assessment
 - Documentation

ANS: C

During assessment, the dental hygienist conducts and analyzes oral health data collected through a systematic, comprehensive individualized assessment of the client who may be with or at risk for oral disease or complications.

DIF: Recall

REF: 2

OBJ: 1

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

6. Which is a widely accepted worldview of a discipline that shapes the direction and methods of its practitioners, educators, administrators, and researchers?
- Universal principle
 - Paradigm
 - Continuum
 - Justification

ANS: B

A paradigm specifies the unique perspective of each discipline and is the first level of distinction between disciplines and defines the profession's major concepts as its central ideas.

DIF: Recall

REF: 2

OBJ: 2

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

7. Each of the following is a major paradigm concept for the discipline of dental hygiene EXCEPT one. Which is the EXCEPTION?
- The client
 - The environment
 - Reimbursement strategies

d. Health and oral health

ANS: C

The four major paradigm concepts for dental hygiene as defined by the American Dental Hygienists' Association (ADHA) include the client, the environment, health and oral health, and dental hygiene actions.

DIF: Comprehension

REF: 2-3

OBJ: 2

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

8. The term *patient* is narrower than *client*, and it is reserved for recipients of dental hygiene interventions in
- public health programs.
 - schools.
 - community settings.
 - clinical dental hygiene services.

ANS: D

Patient is not used for recipients of dental hygiene interventions in public health programs, schools, and community settings, for example. This does not discount the relation with patients when dental hygienists are providing patient-centered clinical dental hygiene services and engaging them as co-therapists.

DIF: Application

REF: 2-3

OBJ: 2

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

9. The text suggests using the term _____ when referring to dental hygienists' interactions with people in health promotion, oral health education, or motivational activities, and to use the term _____ when referring to clinical care interactions.
- client; client*
 - client; patient*
 - patient; client*
 - patient; patient*

ANS: B

Regardless of the word used or the setting where dental hygienists interact with the public, our aim is wellness and active participation of the recipients of our services, our clients.

DIF: Comprehension

REF: 2-3

OBJ: 2

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

10. Which of the major paradigm concept for the discipline of dental hygiene as defined by the American Dental Hygienists' Association (ADHA) refers to the different settings where dental hygienists interact with various clients?
- Dental hygiene actions
 - Health and oral health
 - The environment
 - The client

ANS: C

Factors that affect a client's or patient's attainment of optimal oral health include, for example, economic, psychologic, cultural, physical, legal, educational, ethical, and geographic variables.

DIF: Comprehension

REF: 1

OBJ: 2

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

11. Changes in healthcare knowledge and practice have expanded the philosophy of dental hygiene to include new roles such as
- oral health education.
 - professional removal of calculus.
 - professional removal of plaque biofilm.
 - entrepreneur.

ANS: D

In the past, the principal services of dental hygienists were oral health education and professional removal of calculus, biofilm, and other exogenous accretions from the tooth surface. Changes in healthcare knowledge and practice have expanded the philosophy of dental hygiene to include the professional roles of clinician, corporate, public health, researcher, educator, administrator, and entrepreneur.

DIF: Comprehension

REF: 3

OBJ: 3

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

12. Dental hygienists can work as independent practitioners in Canada without dental or other employers. Several different practice models in the United States provide opportunities for dental hygienists to serve vulnerable and underserved populations.
- Both statements are true.
 - Both statements are false.
 - The first statement is true, the second is false.
 - The first statement is false, the second is true.

ANS: A

Dental hygienists are working to improve access to preventive oral health.

DIF: Comprehension

REF: 3

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

13. Dental healthcare access has been limited historically in the United States by the lack of dentists practicing in
- suburban areas.
 - small towns.
 - rural or inner-city areas.
 - villages.

ANS: C

Historically, in the United States, dental healthcare access has been limited by the lack of dentists practicing in rural or inner-city areas and serving citizens faced with education, economic, cultural, and health status disadvantages. Some people suffer in pain or delay preventive care and treatment until the oral condition is severe and expensive to correct.

DIF: Comprehension

REF: 4

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

14. Which organization has been advocating for new dental hygiene-based workforce models to extend oral healthcare delivery systems and improve oral health access to underserved populations?
- Food and Drug Administration (FDA)
 - Occupational Safety and Health Administration (OSHA)
 - American Dental Hygienists' Association (ADHA)
 - Centers for Disease Control and Prevention (CDC)

ANS: C

The ADHA, with the support of various policy and professional interest organizations, has been advocating for new dental hygiene-based workforce models.

DIF: Recall

REF: 9

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

15. A mid-level oral health practitioner must be a
- licensed dental hygienist and graduate from an accredited dental hygiene program.
 - licensed dental hygienist; however, he or she need not graduate from an accredited dental hygiene program.
 - graduate from an accredited dental hygiene program; however, he or she need not be licensed.
 - dental hygienist; however, he or she neither must be licensed nor graduate from an accredited dental hygiene program.

ANS: A

Mid-level oral health practitioners have an expanded scope of care, as set forth by the appropriate licensing agency or regulatory authority.

DIF: Comprehension

REF: 4

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

16. How many states provide legal avenues for dental hygienists to provide patient care outside the private dental office without the physical presence of a dentist as of 2018?
- 10
 - 20
 - 30
 - 40

ANS: D

Examples of states that have specifically enacted Mid-Level Oral Health Care Workforce Models include Minnesota, Maine, and Vermont.

DIF: Recall REF: 4 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

17. Which Mid-Level Oral Health Care Workforce Model requires that the provider must be dually licensed as a dental hygienist?
- Michigan
 - Minnesota
 - Maine
 - Vermont

ANS: D

In Vermont, the Dental Therapist must be dually licensed as a dental hygienist. Michigan is pursuing a Mid-Level Oral Health Care Workforce Model but it is not yet in place. The Advanced Dental Therapist in Minnesota may be dually licensed as a dental hygienist. In Maine, the Dental Hygiene Therapist may be dually licensed as a dental hygienist.

DIF: Comprehension REF: 4 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

18. Dental hygienists prepared as mid-level providers and providing direct access to dental hygiene services help the professions of dentistry and dental hygiene meet the oral healthcare needs of the community. The development of these Mid-Level Oral Health Care Workforce Models should result in cost-effective, quality, primary dental care, and healthier citizens in the United States.
- Both statements are true.
 - Both statements are false.
 - The first statement is true, the second is false.
 - The first statement is false, the second is true.

ANS: A

Many states are pursuing Mid-Level Oral Health Care Workforce Models for that reason.

DIF: Comprehension REF: 5 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

19. Direct access is the ability of a dental hygienist to initiate treatment based on their assessment of a patient's needs _____ the specific authorization of a dentist, treat the patient _____ the presence of a dentist, and maintain a provider-patient relationship.
- with; with
 - with; without
 - without; with
 - without; without

ANS: D

This is the ADHA definition of direct access. Many other models exist as a means of providing direct access to dental hygiene care in addition to mid-level provider models and independent dental hygiene practice.

DIF: Recall REF: 5 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

20. Where can a dental hygienist find supervision requirements in the United States?
- The American Dental Association (ADA).
 - The American Dental Hygienists' Association (ADHA) or applicable state regulatory agency website.
 - The American Dental Education Association (ADEA)
 - The Dental Trade Alliance (DTA)

ANS: B

Dental hygienists can check the ADHA or applicable state regulatory agency websites for supervision requirements and dental hygienists' involvement in regulation in the United States, and the CDHA website for practice regulation authority in Canada.

DIF: Comprehension REF: 5 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

21. The collaborative practice model emphasizes the distinct roles of the dental hygienist and
- patient.
 - dentist.
 - dental hygiene program.
 - insurance company.

ANS: B

In this model the dentist and the dental hygienist are in a co-therapist relationship. In a collaborative practice, dental hygienists are viewed as experts in their field, are consulted about appropriate dental hygiene interventions, are expected to make clinical dental hygiene decisions, and are given freedom in planning, implementing, and evaluating the dental hygiene component of the overall care plan.

DIF: Recall REF: 6 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

22. Each of the following is generally part of a collaborative practice agreement EXCEPT one. Which is the EXCEPTION?
- Description of the scope of dental hygiene services
 - Responsibilities of the collaborating dentist regarding consultation with the dental hygienist
 - Practice protocols
 - Methods for reimbursement

ANS: D

A collaborative practice agreement generally includes the following: a legally defined protocol defining the circumstances in which the dental hygienist can initiate treatment, description of the scope of dental hygiene services, practice protocols, responsibilities of the collaborating dentist regarding consultation with the dental hygienist, maintenance of the dental record, emergency management plan, and referral methods.

DIF: Application REF: 6 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

23. Independent dental hygiene practice is also called
- collaborative practice.
 - unsupervised practice.
 - practice under direct supervision.
 - practice under general supervision.

ANS: B

Some dental hygienists owning their own businesses offer dental hygiene services to vulnerable and underserve populations while having legal arrangements for dentist collaboration or general supervision. Although these practices are independently owned, they are not independent dental hygiene practices.

DIF: Recall REF: 6 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

24. Which is the most common chronic disease in children?
- Type 1 diabetes
 - Dental caries
 - Congenital birth defects
 - Asthma

ANS: B

Dental caries is the most common chronic disease in children, and a significant number of adults have untreated caries and chronic periodontal disease.

DIF: Recall REF: 6 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

25. A dental hygienist working in a long-term care facility with a registered nurse to monitor residents' oral healthcare is an example of
- interprofessional collaboration.
 - professional regulation.
 - a mid-level oral health practitioner.
 - dental supervision.

ANS: A

Interprofessional collaboration is shared responsibility and collaboration among healthcare professionals in patient-centered care healthcare delivery systems to attain optimal health outcomes for populations with, or at risk of, oral diseases. Dental hygienists in long-term care facilities work with nurses' aides and registered nurses to monitor residents' oral health, care for dentures, provide preventive oral healthcare, and make dental care referrals.

DIF: Application REF: 6 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

26. Each of the following is, in general, accomplished by a dental hygiene practice act EXCEPT one. Which is the EXCEPTION?
- Establishes criteria for dental hygiene education, licensure, and relicensure.
 - Determines which patients are eligible for dental insurance benefits.
 - Protects the public by making illegal the practice of dental hygiene by uncredentialed and unlicensed persons.
 - Defines the legal scope of dental hygiene practice.
 - Creates a board empowered with legal authority to oversee the policies and procedures affecting the dental hygiene practice in that jurisdiction.

ANS: B

Dental and dental hygiene practice acts are laws established in each applicable jurisdiction, that is, states (United States) or provinces (Canada), to regulate the practice of dental hygiene. Although the laws that regulate dental hygiene practice vary with each licensing jurisdiction, they have common elements.

DIF: Application REF: 7 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

27. Due to the limitation of single states requiring repeat licensing examinations for dental hygienists who are relocating, some state boards have established licensing by
- suspension.
 - relinquishment.
 - credential.
 - competence.

ANS: C

Licensing by credential recognizes the dental hygiene license received in other states when appropriate. Documents are provided for the board's approval in meeting licensure requirements, so the dental hygienist does not have to repeat a practical examination after relocating.

DIF: Recall REF: 7 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

28. The National Board Dental Hygiene Examination (NBDHE) is administered by the
- The American Dental Association (ADA).
 - The American Dental Hygienists' Association (ADHA).
 - state board of the state where the candidate intends to practice.
 - dental hygiene program where the candidate was a student.

ANS: A

To be eligible for regional and/or state clinical licensure examinations, after graduation from an accredited dental hygiene program, dental hygienists must also pass the written National Board Dental Hygiene Examination administered by the American Dental Association Joint Commission on National Dental Examinations.

DIF: Recall REF: 7-8 OBJ: 4
TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

29. Which organization wrote the *Standards for Clinical Dental Hygiene Practice*?
- The American Dental Association (ADA)
 - The American Dental Hygienists' Association (ADHA)
 - The American Dental Education Association (ADEA)
 - The International Federation of Dental Hygienists (IFDH)

ANS: B

The ADHA *Standards for Clinical Dental Hygiene Practice* define and guide professional dental hygiene practice. The primary purpose is to provide a resource for dental hygiene practitioners seeking to provide client-centered and evidence-based clinical care.

DIF: Recall

REF: 8

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

30. Each of the following is a facet of the *Standards for Clinical Dental Hygiene Practice* EXCEPT one. Which is the EXCEPTION?
- Define the activities of dental hygienists unique to dental hygiene.
 - Provide consumers, employers, and colleagues with guidelines as to what constitutes high-quality dental hygiene care.
 - Provide guidelines for establishing goals for clinical dental hygiene education.
 - Serve as the foundation to assure competence and for continued professional development.
 - Recommend brands and types of products for clinical and consumer use.

ANS: E

The standards provide a framework that describes a competent level of dental hygiene care based on the dental hygiene process of care. These standards are likely to be continuously evaluated and modified as necessary as new scientific evidence and federal and state regulations develop to ensure optimal, comprehensive client care.

DIF: Application

REF: 8-9

OBJ: 4

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

31. The *Journal of Dental Hygiene* and *Access* are published by the
- The American Dental Association (ADA).
 - The American Dental Hygienists' Association (ADHA).
 - The American Dental Education Association (ADEA).
 - The National Dental Hygienists' Association (NDHA).

ANS: B

The official publications of the ADHA include the *Journal of Dental Hygiene* and *Access*.

DIF: Recall

REF: 9

OBJ: 5

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

32. Which association's actions are directed toward its members with specific measurable outcomes, including public policy environment, public recognition, professional practice, professional knowledge, and leadership?

- a. The International Federation of Dental Hygienists (IFDH)
- b. The American Dental Hygienists' Association (ADHA)
- c. The Canadian Dental Hygienists Association (CDHA)
- d. The National Dental Hygienists' Association (NDHA)

ANS: C

With a structure similar to that of the ADHA, the CDHA has provincial organizations supported by local components. The CDHA publishes *The Canadian Journal of Dental Hygiene* as its official journal and has played a prominent role in developing continuing education, formal dental hygiene education, portability of licensure, and dental hygiene research and theory.

DIF: Recall

REF: 9

OBJ: 5

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care

33. Which organization represents academic dentistry?
- a. The American Public Health Association (APHA)
 - b. International Association for Dental Research (IADR)
 - c. The American Dental Education Association (ADEA)
 - d. The Dental Trade Alliance (DTA)

ANS: C

The ADEA is the only national organization representing academic dentistry, thus, the voice of dental education. Members include educators, corporations, and institutions from general dentistry, specialties, dental hygiene, dental assisting, and dental laboratory technology.

DIF: Recall

REF: 10

OBJ: 5

TOP: NBDHE, Provision of Clinical Dental Hygiene Services, 3.0 Planning and Managing Dental Hygiene Care