EXPANDED FUNCTION DENTAL ASSISTANT (EFDA) BOARD PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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.

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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!

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Questions

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1. What is essential to do before placing a matrix band for a posterior restoration?

A. Verify the size of the band.

B. Isolate the tooth with a rubber dam.

C. Evaluate the occlusion.

D. Ensure proper lighting.

2. Which of the following is a line angle that would contain a retention feature for you to condense into with a class II amalgam preparation?

A. Mesiobuccal

B. Axiobuccal

C. Mesiodistal

D. Gingivoaxial

3. Which anatomical feature must be reproduced in a class V buccal restoration on tooth #21?

A. The buccal groove

B. The buccal pit

C. The buccal convexity

D. The flat gingival third of the tooth

4. After removing the matrix band, you discover your class II amalgam has a large overhang. Which instrument would not be recommended for removing it?

A. Minnesota carver

B. Sickle explorer

C. Hollenback carver

D. Cleoid discoid carver

5. When placing a wooden wedge during the restoration of a class I restoration, which statement is incorrect?

A. Minimizes the possibility of an overhang

B. Separates the teeth slightly to compensate for band space

C. Always is inserted in the lingual embrasure

D. Extends slightly gingival to the gingival margin

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6. Which instrument would be used for a Class II amalgam preparation but not for a Class V amalgam on tooth #3?

A. Explorer

B. Hollenback

C. 1.5 and 2.0 mm diameter condenser

D. Miller articulating paper forceps

7. What can be a reason for a restoration to "feel high" to the patient?

A. Adequate occlusion with adjacent teeth

B. Overbuilt occlusal surface

C. Proper adjustment time

D. Use of less viscous material

8. Retention in a Class II preparation is enhanced primarily by which method?

A. Cavity design

B. Dental bonding agents

C. Addition of composite material

D. Patient compliance

9. True or False: Oblique ridges are found on maxillary first and second molars and involve the ML and DB cusps.

A. True

B. False

10. Which tooth has five functional cusp tips?

A. Mandibular first molars

B. Maxillary first molars

C. Mandibular second molars

D. Maxillary second molars

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Answers

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

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Explanations

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1. What is essential to do before placing a matrix band for a posterior restoration?

A. Verify the size of the band.

B. Isolate the tooth with a rubber dam.

C. Evaluate the occlusion.

D. Ensure proper lighting.

Before placing a matrix band for a posterior restoration, isolating the tooth with a rubber dam is essential for several reasons. The rubber dam provides a clean and dry working area, preventing saliva and blood from contaminating the area where the restoration will take place. This isolation reduces the risk of infection and ensures optimal adhesion for the restorative material. Using a rubber dam also enhances visibility and access to the tooth, which is particularly important for posterior teeth that are often located at the back of the mouth and can be challenging to work on without proper isolation. Additionally, it protects the patient's airway and prevents debris or materials from being inadvertently swallowed or aspirated during the procedure. While verifying the size of the band, evaluating the occlusion, and ensuring proper lighting are all important considerations in the restorative process, they do not address the immediate need for a clean and dry environment as effectively as proper isolation does. Thus, isolating the tooth with a rubber dam is a critical step in the preparation for placing a matrix band for a posterior restoration.

2. Which of the following is a line angle that would contain a retention feature for you to condense into with a class II amalgam preparation?

A. Mesiobuccal

B. Axiobuccal

C. Mesiodistal

D. Gingivoaxial

In a Class II amalgam preparation, one of the key considerations is the retention of the material within the cavity preparation. The axiobuccal line angle is significant because it provides a surface against which the amalgam can be condensed effectively. This line angle lies at the junction of the axial wall and the buccal wall, allowing for the amalgam to interlock and create a mechanically retentive bond. The retention features in a cavity preparation help prevent the restoration from dislodging due to chewing forces and oral movements. In this context, the axiobuccal line angle is particularly advantageous as it offers stability and resistance form, ensuring that the amalgam stays securely in place over time. Other line angles or features, while important for various aspects of the cavity prep, do not provide the same retention capability at the site where the amalgam is expected to condense and bond effectively. Thus, focusing on the axiobuccal angle emphasizes the importance of retention in the success of Class II amalgam restorations.

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3. Which anatomical feature must be reproduced in a class V buccal restoration on tooth #21?

A. The buccal groove

B. The buccal pit

C. The buccal convexity

D. The flat gingival third of the tooth

In a class V buccal restoration on tooth #21, the anatomical feature that must be reproduced is the buccal convexity. This area is critical as it contributes to the overall morphology and aesthetics of the tooth. The buccal convexity represents the natural contour and shape of the tooth, allowing it to blend seamlessly with adjacent teeth and maintain proper function and appearance. Reproducing the buccal convexity ensures that the restoration does not create abrupt transitions or flat areas that may be unesthetic or could lead to plaque accumulation and periodontal issues. This consideration is vital for promoting long-term success and durability of the restoration while ensuring that it matches the natural tooth structure as closely as possible. The other options include features that are either not relevant to the restoration of a class V lesion or do not primarily define the contour in the buccal aspect of the tooth. Thus, the focus remains on maintaining the natural contour of the buccal convexity during the restorative process.

4. After removing the matrix band, you discover your class II amalgam has a large overhang. Which instrument would not be recommended for removing it?

A. Minnesota carver

B. Sickle explorer

C. Hollenback carver

D. Cleoid discoid carver

In addressing the scenario of a large overhang on a class II amalgam restoration, it's essential to select the right instrument for effective overhang removal. The cleoid discoid carver, while commonly used for shaping and carving amalgam restorations, has a specific design that makes it less suitable for addressing large overhangs. The cleoid discoid carver features pointed tips that are primarily designed for refining occlusal surfaces and creating fine details. These tips can be too sharp for safely and effectively removing significant amounts of amalgam, which requires a more controlled and flat surface to prevent damaging the adjacent tooth structure or the restoration itself. In contrast, instruments like the Minnesota carver, sickle explorer, and Hollenback carver are better adapted for this task. They offer better control and are designed to remove excess material without compromising the integrity of the tooth structure or the restoration. Thus, the cleoid discoid carver is not recommended for removing a large overhang from a class II amalgam because its design does not facilitate the removal of larger amounts of material safely and effectively.

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5. When placing a wooden wedge during the restoration of a class I restoration, which statement is incorrect?

A. Minimizes the possibility of an overhang

B. Separates the teeth slightly to compensate for band space

C. Always is inserted in the lingual embrasure

D. Extends slightly gingival to the gingival margin

The statement that a wooden wedge "always is inserted in the lingual embrasure" is incorrect. In dental practice, the placement of a wooden wedge is influenced by the specific clinical situation and the configuration of the restoration being performed. While it is often advantageous to place the wedge in a position that supports the matrix band and helps to create a tight seal against the tooth structure, the positioning can vary. For instance, in certain restorations, especially those involving interproximal areas, the wedge might be placed in the buccal side or even adjusted based on the individual anatomy of the teeth. Thus, stating that the wooden wedge is always inserted in the lingual embrasure does not account for the variability of dental anatomy and technique modifications required in different situations. The other statements are accurate in describing the function of a wooden wedge. For example, wedges indeed help minimize the risk of creating an overhang by aiding in the proper alignment of the materials used in the restoration. They also serve to separate the teeth slightly, which compensates for the space needed by the matrix band, ensuring that the filling material can be adequately shaped and contoured. Furthermore, a properly positioned wedge does extend slightly gingival to the gingival margin to effectively seal the margin

6. Which instrument would be used for a Class II amalgam preparation but not for a Class V amalgam on tooth #3?

A. Explorer

B. Hollenback

C. 1.5 and 2.0 mm diameter condenser

D. Miller articulating paper forceps

In the context of dental procedures, the use of instrumentation is specific to the type of cavity preparation being performed. For a Class II amalgam restoration, which involves the proximal surfaces of posterior teeth, specific instruments aid in shaping the cavity and ensuring proper placement of the restorative material. The Miller articulating paper forceps are specifically designed to handle articulating paper, which is used to check occlusion in a restoration. While these forceps are critical for ensuring proper bite alignment after a restoration has been placed, they do not contribute to the preparation or filling of the cavity itself. In contrast, other instruments listed, such as the explorer, Hollenback, and condensers, are essential for preparing and shaping cavities or condensing amalgam material. The explorer is used to detect caries or irregularities in the tooth structure, the Hollenback is used for carving and contouring restorations, and the condensers are necessary for packing amalgam into the cavity. Since the Miller articulating paper forceps are not involved in the actual preparation or placement of amalgam material within a Class II cavity, their use would not be applicable to a Class V amalgam preparation, which typically involves the gingival margin of anterior or posterior teeth, therefore making this choice

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7. What can be a reason for a restoration to "feel high" to the patient?

A. Adequate occlusion with adjacent teeth

B. Overbuilt occlusal surface

C. Proper adjustment time

D. Use of less viscous material

A restoration can "feel high" to a patient primarily due to the overbuilding of the occlusal surface. When a restoration is finished, it should mirror the natural occlusion of the teeth, allowing for proper bite function. If the occlusal surface is inadvertently built up too high, it can interfere with the way the upper and lower teeth come together during normal chewing and speaking activities. Patients may experience discomfort or pain when biting down if the restoration is not appropriately contoured to align with the existing occlusal plane of adjacent teeth. This misalignment can create pressure points and lead to an incorrect bite, making the restoration feel excessively elevated or "high." In contrast, an adequate occlusion with adjacent teeth would indicate that the restoration aligns properly, contributing to a balanced bite without discomfort. Likewise, proper adjustment time involved in the restoration process suggests that the dentist or assistant dedicated sufficient attention to ensure the final occlusion felt comfortable for the patient. Lastly, using less viscous material generally refers to the flow and ease of application of restorative materials, which would not directly cause the sensation of a restoration feeling high in the mouth.

8. Retention in a Class II preparation is enhanced primarily by which method?

A. Cavity design

B. Dental bonding agents

C. Addition of composite material

D. Patient compliance

The method that enhances retention in a Class II preparation is cavity design, which plays a crucial role in the overall success of restorative procedures. In Class II preparations, the design involves creating specific geometries that allow for mechanical retention of the restorative material. This includes the preparation's outline form and depth, which can influence how well the restoration adheres to the tooth structure. The cavity design may incorporate features such as dovetails or undercuts that lock the restorative material into place, preventing dislodgement due to masticatory forces. Optimal cavity design considers the biomechanical properties of both the tooth and the restorative material, ensuring that they work together effectively. While dental bonding agents can improve the bond between the restorative material and tooth structure, their effect relies heavily on the preparation design for optimal performance. Similarly, although the addition of composite material is essential for filling the cavity, its retention largely depends on the previous steps taken during the cavity preparation. Patient compliance, while important for overall dental health, is not directly involved in enhancing retention of the restoration itself.

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9. True or False: Oblique ridges are found on maxillary first and second molars and involve the ML and DB cusps.

A. True

B. False

The statement is accurate. Oblique ridges are indeed anatomical features observed on the maxillary first and second molars. These ridges are formed by the union of the cusp tips of the mesiolingual (ML) cusp and the distobuccal (DB) cusp. This unique ridge is significant as it contributes to the overall occlusal morphology of these teeth, influencing their function in chewing and the overall dental mechanics during occlusion. Oblique ridges are essential in the context of dental anatomy as they help distribute occlusal forces and assist in the efficient grinding of food. Understanding these structures is vital for dental professionals, especially when considering restorative procedures, as they must take into account the occlusion and integrity of these ridges. Recognizing the presence of oblique ridges can also aid in diagnosis and treatment planning for procedures involving maxillary molars.

10. Which tooth has five functional cusp tips?

A. Mandibular first molars

B. Maxillary first molars

C. Mandibular second molars

D. Maxillary second molars

The tooth with five functional cusp tips is the maxillary first molar. This molar is characterized by having two buccal cusps and three lingual cusps, which collectively create five distinct cusp tips. The first maxillary molar typically has a prominent mesiobuccal cusp and distobuccal cusp on the buccal side, along with the larger mesiolingual and distolingual cusps and the cusp of Carabelli, which is considered the fifth cusp in many cases. In contrast, the mandibular first molar typically has two buccal cusps and two lingual cusps, totaling four functional cusp tips. The second molars, both mandibular and maxillary, generally have similar cusp structures, also presenting four functional cusps. Therefore, the correct response highlights the unique anatomical feature of the maxillary first molar as having five distinct functional cusp tips, distinguishing it from the other choices.

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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.

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

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