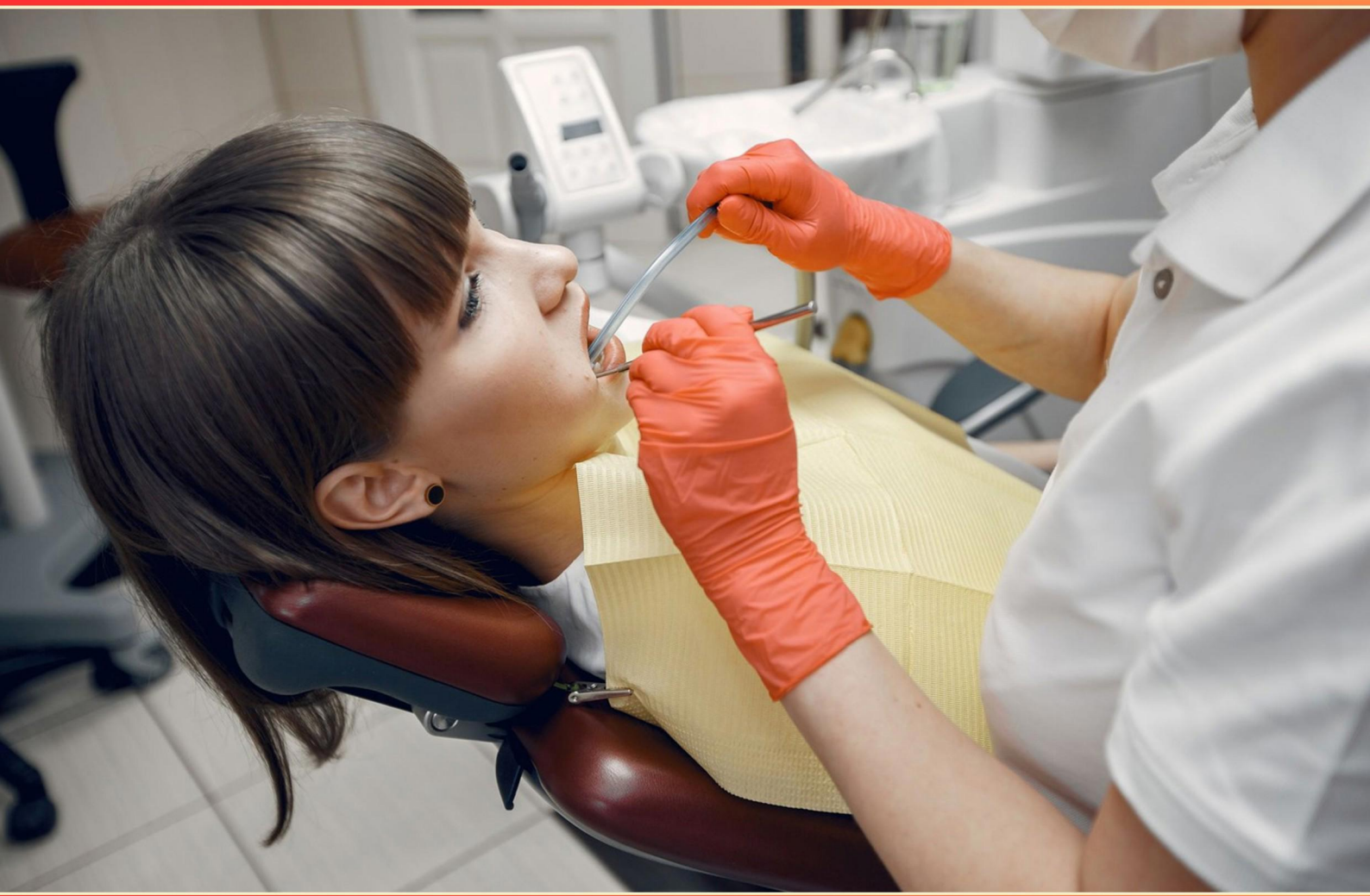
FPC 2 EXAM 2 – PERIODONTAL SCREENING AND RECORDING (PSR) AND PROBING PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://fpc2exam2psrprobing.examzify.com

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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. NOT a criterion for PSR Code 2?

A. PD Above 5.5 mm

B. Bleeding

C. Calculus

D. PD Below 3.5 mm

2. Which term describes the distance from the CEJ to the gingival margin used in recession calculations?

A. PD

B. CEJ-GM distance

C. GM-CEJ distance

D. GM

3. How many sites per tooth are probed during PSR?

A. Two

B. Eight

C. Six

D. Four

4. Which statement is true about PSR in patient care?

A. Increased cost

B. Longer appointment times

C. No recording

D. Risk management

5. In AxiUm, recording plaque on the perio chart yields what?

A. A plaque index score

B. Not recorded

C. A visual estimation only

D. Zero calculation

6. Which statement best describes PSR?

A. A full diagnostic charting system

B. A radiographic technique

C. A modified screening to assess need for comprehensive periodontal exam

D. A prophylaxis protocol

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7. Which PSR code corresponds to PD 3.5-5.5 mm with black band partly visible?

A. Code 2

B. Code 3

C. Code 4

D. Code 0

8. Which describes a limitation of PSR?

A. Takes significantly longer to perform than full exam

B. Provides detailed tooth-by-tooth charts for maintenance

C. Doesn't provide a tooth-by-tooth assessment for later comparison during maintenance

D. Requires radiographs for all sextants

9. Which set of sites is typically probed around each tooth in a full periodontal examination?

A. Mesiobuccal, mesi lingual, distobuccal, distolingual

B. Mesiobuccal, buccal midline, distobuccal, mesi lingual, lingual midline, distolingual

C. Mesiobuccal, buccal, lingual, distolingual

D. Buccal, lingual, mesial, distal

10. Are implants scored with PSR?

A. Implants are not scored as teeth in PSR; they require separate periodontal/implant-specific evaluation.

B. Implants are scored as teeth in PSR.

C. Implants are always Code 0.

D. Implants are excluded from any periodontal eval.

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Answers

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

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Explanations

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1. NOT a criterion for PSR Code 2?

A. PD Above 5.5 mm

B. Bleeding

C. Calculus

D. PD Below 3.5 mm

In PSR, codes categorize a sextant based on pocket depth bands and signs like bleeding or calculus. Code 2 is used when there are shallow pockets up to 3.5 mm and there is additional sign such as calculus or defective margins, or bleeding on probing. This reflects some periodontal involvement without deeper pockets. Pockets deeper than 3.5 mm but up to 5.5 mm fall into Code 3, and pockets deeper than 5.5 mm fall into Code 4. Therefore, probing depths above 5.5 mm are not a criterion for Code 2; that finding corresponds to Code 4. Bleeding and calculus with shallow pockets, or defective margins, fit Code 2, which is why those options align with Code 2.

2. Which term describes the distance from the CEJ to the gingival margin used in recession calculations?

A. PD

B. CEJ-GM distance

C. GM-CEJ distance

D. GM

Gingival recession is quantified by the distance the gingival margin has moved from the cementoenamel junction. The term used to describe that measurement is GM-CEJ distance, since it denotes the gap between the gingival margin (GM) and the CEJ. This distance is what you use in recession calculations to express how much root surface exposure there is. Probing depth (PD) measures the depth of a sulcus or pocket, not the recession, and the margin alone (GM) isn't a distance; CEJ-GM distance would refer to the same gap but the common notation in recession work is GM-CEJ distance, which clearly communicates that you're assessing recession.

3. How many sites per tooth are probed during PSR?

A. Two

B. Eight

C. Six

D. Four

In PSR, each tooth is probed at six sites to capture pocket depths around all surfaces. These six locations are three on the buccal side (mesiobuccal, mid-buccal, distobuccal) and three on the lingual side (mesiolingual, mid-lingual, distolingual). Probing at multiple sites per tooth is essential because periodontal conditions can vary around a tooth, with deeper pockets sometimes present on one aspect but not another. Although PSR uses a WHO probe and records the deepest reading for each sextant during screening, the number of sites assessed per tooth remains six.

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4. Which statement is true about PSR in patient care?

A. Increased cost

B. Longer appointment times

C. No recording

D. Risk management

PSR is a quick, standardized way to screen periodontal health and categorize a patient's risk. The statement that best fits patient care is that PSR supports risk management. By rapidly identifying potential periodontal problems, it guides treatment planning, referrals when needed, and creates clear, auditable documentation. This structured approach reduces clinical and legal risk because decisions are based on consistent findings and can be communicated reliably to patients and other providers. It's designed to be efficient, triaging patients so full periodontal exams are pursued only when indicated. PSR also involves recording in the patient chart with specific codes, so it does not involve "no recording." While costs or appointment length can vary, PSR is intended to streamline care rather than inherently increase time or expense.

5. In AxiUm, recording plaque on the perio chart yields what?

A. A plaque index score

B. Not recorded

C. A visual estimation only

D. Zero calculation

When you enter plaque on the perio chart in AxiUm, it's documented for hygiene status and treatment planning, but it doesn't generate a numeric score. The software doesn't calculate a plaque index from this entry, so there's no numerical value attached to plaque—essentially, it yields zero calculation. In other words, plaque is recorded as a visual/documentation finding and doesn't affect the PSR/periodontal calculations automatically.

6. Which statement best describes PSR?

A. A full diagnostic charting system

B. A radiographic technique

C. A modified screening to assess need for comprehensive periodontal exam

D. A prophylaxis protocol

PSR is a quick screening method used to assess periodontal health and determine whether a full periodontal examination is needed. It uses a specialized probe to screen each sextant and assigns a simple code that flags the level of concern, helping the clinician decide if more detailed charting and probing are warranted. This triage function is what makes PSR distinct: it's designed to identify patients who require a comprehensive periodontal exam, not to provide a full diagnostic chart or detailed treatment plan on its own. It's also not a radiographic technique or a prophylaxis protocol, which are different parts of care.

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7. Which PSR code corresponds to PD 3.5-5.5 mm with black band partly visible?

A. Code 2

B. Code 3

C. Code 4

D. Code 0

The PSR coding is based on how deep the pockets are and how the black band on the PSR probe appears. The black band marks the 3.5 to 5.5 mm range. When a sextant shows a pocket depth in that range and the band is only partly visible, that matches the code assigned for moderate pockets. So the pocket depth of 3.5–5.5 mm with the band partly visible corresponds to the code three. If the depth were shallower (≤3.5 mm), you'd see a different code, and if it were deeper than 5.5 mm, the band would be fully visible, corresponding to code four.

8. Which describes a limitation of PSR?

A. Takes significantly longer to perform than full exam

B. Provides detailed tooth-by-tooth charts for maintenance

C. Doesn't provide a tooth-by-tooth assessment for later comparison during maintenance

D. Requires radiographs for all sextants

PSR is a quick screening method that records a single code for each sextant rather than a full tooth-by-tooth chart. Because only sextant-wide data are captured, it doesn't provide detailed pocket depths for individual teeth to track changes over time during maintenance. That limitation is precisely why this item describes PSR as not giving a tooth-by-tooth assessment for later comparison. In contrast, the other statements don't fit: PSR is designed to be faster than a full exam, it does not produce detailed tooth-by-tooth charts, and radiographs are not required for PSR (though they may be used in the full assessment if indicated).

9. Which set of sites is typically probed around each tooth in a full periodontal examination?

A. Mesiobuccal, mesi lingual, distobuccal, distolingual

B. Mesiobuccal, buccal midline, distobuccal, mesi lingual, lingual midline, distolingual

C. Mesiobuccal, buccal, lingual, distolingual

D. Buccal, lingual, mesial, distal

The important concept is that a full periodontal examination records six probing sites around each tooth to capture where pockets may vary around the tooth. These sites are mesio-buccal, buccal midline, distobuccal on the buccal (facial) side, and mesio-lingual, lingual midline, distolingual on the lingual (palatal/lingual) side. Probing at multiple points ensures you don't miss a localized deep pocket, which could be present on the midfacial or midlingual surfaces even if other areas seem healthier. Other sets that omit the midline sites or reduce the number of sites risk missing these localized pockets and give an incomplete chart.

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10. Are implants scored with PSR?

A. Implants are not scored as teeth in PSR; they require separate periodontal/implant-specific evaluation.

B. Implants are scored as teeth in PSR.

C. Implants are always Code 0.

D. Implants are excluded from any periodontal eval.

PSR is a quick screening tool designed for natural teeth. Implants have different anatomy and disease patterns (peri-implant mucositis and peri-implantitis) and require an implant-specific evaluation that looks at peri-implant probing depths, bleeding on probing around the implant, soft-tissue health, and radiographic bone loss. Because of this, implants are not scored alongside natural teeth in PSR; they need separate periodontal/implant-specific assessment. So the best practice is to assess implants with a separate peri-implant exam rather than a PSR code. The other options aren't correct because implants are not scored as teeth in PSR, they aren't automatically Code 0, and while they aren't part of PSR scoring, peri-implant health is still something that needs evaluation.

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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.

Or visit your dedicated course page for more study tools and resources:

https://fpc2exam2psrprobing.examzify.com

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

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