Darby: Dental Hygiene, 3rd Edition

Chapter 01: The Dental Hygiene Profession

Test Bank

MULTIPLE CHOICE

1. Which of the following best defines dental hygiene as a discipline?
a. A dental hygienist is a licensed, professional, oral health educator and clinician, who, as a co-therapist with the dentist, uses preventive, educational, and therapeutic methods for the control of oral diseases to aid individuals and groups in attaining and maintaining optimum oral health.
b. Dental hygiene is the study of preventive oral healthcare, including the management of behaviors, to prevent oral disease and promote health.

ANS: B
A discipline is the study of a unique structural hierarchy of knowledge that progresses from a single paradigm to multiple conceptual models and multiple theories derived from each model. The discipline of dental hygiene's paradigm is composed of the major concepts selected for study by the discipline (i.e., the client, the environment, health and oral health, and dental hygiene actions) and statements about the concepts that identify its relevant phenomena in a global manner. The body of knowledge developed in the discipline of dental hygiene guides practice, education, and research.

2. Which of the following is not one of the central concepts in the paradigm for the discipline of dental hygiene?
a. Client
b. Environment
c. Health and oral health
d. Patient
e. Dental hygiene actions

ANS: D
The term "patient" was not selected as one of the central concepts in the paradigm for the discipline of dental hygiene. The term "patient" was not selected because it is limited to an individual and because it connotes illness and a passive role on the part of the recipient of dental hygiene care.

3. Which of the following is not a step in the dental hygiene process of care?
a. Assessment
b. Planning
c. Evaluation
d. Diagnosing
e. Implementation
f. Verification

ANS: F
The dental hygiene process of care consists of the following five steps: assessment, diagnosing, planning, implementing, and evaluating.

4. The Collaborative Practice Model primarily emphasizes which of the following?
a. The concept of multiple categories of dental hygiene care
b. The role of the dental hygienist as a public health educator
c. Dental hygienists working with other healthcare providers to provide optimum client care
d. The role of the dental hygienist as a dental auxiliary

ANS: C
Collaboration is the process of working together for the achievement of common goals. The collaborative practice model assumes that the provision of oral healthcare is a complex process that requires a full spectrum of professional knowledge, skills, and judgments; therefore collaboration between dentists and dental hygienists, working together as colleagues, has the potential for allowing high-quality comprehensive oral healthcare to be offered to the public. In a collaborative practice, dental hygienists and dentists cooperate as colleagues to integrate their respective care regimens into a single comprehensive approach to provide high-quality client care. Although both professions can and should work together to improve the dental health status of the public, each has a specific role that complements and augments the effectiveness of the other.

5. The term "client" is frequently preferred in healthcare settings for which of the following reasons?
a. It connotes wellness as well as illness and suggests an active participant in healthcare.
b. It suggests a sick, dependent person who is in need of therapy.
c. It is limited to an individual.
d. It focuses on the control of the clinician.

ANS: A
The term "client" is broader in scope than the term "patient" because it can refer to a group as well as to an individual. It also connotes wellness rather than illness. Given that the focus of dental hygiene is to prevent oral disease and promote wellness, the term "client" emphasizes that not all those for whom we provide care are in need of treatment for a disease. Lastly, the term "client" emphasizes the self-determination of the recipient of dental hygiene care, because individuals who seek dental hygiene care generally choose to do so and are in a partnership with the dental hygienist to promote and maintain personal oral health and wellness.

6. The vocational model of dental hygiene:
a. Prepares dental hygienists to improve dental hygiene care through the advancement of dental hygiene theory
b. Is based on the mentorship of a dentist
c. Views the dental hygienist as a primary care provider
d. Supports unsupervised dental hygiene practice to increase public access to oral

healthcare

ANS: B
The vocational model of dental hygiene views the dental hygienist as an auxiliary person who implements treatment plans and carries out isolated duties as directed by the supervising dentist.

7. The professional model of dental hygiene emphasizes that the dental hygienist:
a. Implements preventive treatment plans developed by the dentist
b. Views the dental hygienist as a secondary care provider
c. Is technology based
d. Implements self-generated preventive oral care regimens

ANS: D
The professional model views dental hygiene as knowledge based. It views the dental hygienist as an oral healthcare provider who implements self-generated preventive care regimens; uses a process of care to assess needs, diagnose dental hygiene problems, and plan, implement, and evaluate care; collaborates with the dentist and other healthcare professionals; is accountable to the client; and fulfills roles through the functions of clinician, educator, manager, consumer advocate and researcher.

8. The five roles of the dental hygienist are which of the following?
a. Periodontal clinician, pedantic clinician, researcher, change agent, advocate
b. Clinician, theory builder, educator, researcher, change agent
c. Clinician, administrator or manager, researcher, advocate, educator
d. Clinician, administrator, manager, educator, researcher

ANS: C
Dental hygiene includes interrelated roles of clinician, educator, administrator or manager, researcher, and advocate. For example, as a clinician the dental hygienist uses a process of care, helps the client set oral health goals, and collaborates with the client to meet those goals with a minimal cost of time and energy. Dental hygienists assume the role of educator when clients have learning needs. Dental hygienists use management skills when they understand the administrative structure of the employment setting and use this structure to achieve organizational and client goals. As a client advocate the dental hygienist protects and supports clients' rights and well-being, believing that clients have the right to make their own decisions about healthcare after they have been provided with information to make an informed choice. As a researcher the dental hygienist tests assumptions underlying dental hygiene practice and investigates dental hygiene problems to improve oral healthcare and the practice of dental hygiene.

9. Accreditation:
a. Is a formal, voluntary, nongovernmental process that establishes a minimum set of standards to ensure quality in educational institutions
b. Serves as a mechanism to protect the public
c. Requires descriptions of all tasks that a beginning dental hygiene practitioner must consistently perform accurately and efficiently
d. All of the above

ANS: D
Accreditation is the process by which an external agency evaluates an institution or program of study according to predetermined, national standards. Associate degree, diploma, certificate, and baccalaureate degree programs focusing on entry-level dental hygiene education must meet certain national standards to remain accredited and for the protection of the public.

10. Dental practice acts:
a. Do not establishes criteria for dental hygiene education or licensure
b. Are laws established in each state (United States) or province (Canada) to regulate the practice of dental hygiene
c. Are limited in terms of defining dental hygiene practice
d. All of the above

ANS: B
Although the laws that regulate dental hygiene practice vary with each licensing jurisdiction, each Practice Act reflects common elements. In general, practice acts establish criteria for the education, licensure, and relicensure of dental hygienists; define the legal scope of dental hygiene practice; protect the public by making the practice of dental hygiene by uncredentialed and unlicensed persons illegal; and create a board empowered with legal authority to oversee the policies and procedures affecting the practice of dental hygiene.

11. An administrator or manager:
a. Is a person whose official position is to guide and direct the work of others
b. Does not provide clinical care
c. Usually does not engage in decision making
d. Engages in planning, organizing, and staffing only

ANS: A
Interrelated responsibilities commonly associated with the manager include planning, decision making, organizing, staffing, directing, and controlling.

12. As an advocate, the dental hygienist does which of the following?
a. Facilitates client decision making by providing clients with the information they need and by interpreting what the clients' rights are in a given situation
b. Protects clients from possible adverse effects of treatment measures
c. Demonstrates support and respect for the client's decision
d. All of the above

ANS: D
The dental hygienist facilitates client decision making. The dental hygienist interprets findings for the client, identifies other variables and alternatives to consider, involves others in the decision-making process, and helps the client assess the options. Moreover, the dental hygienist helps maintain a safe environment for the client and takes steps to prevent injury and to protect the client from possible adverse effects of treatment measures.

13. Evidence-based decision making:

a. Considers evidence alone as sufficient to make a clinical decision
b. Maintains that the use of current best evidence does not replace clinical expertise or input from the client
c. Considers scientific evidence as the key component in the decision-making process
d. Considers evidence only from randomized controlled trials

ANS: B
Evidence from clinical research is only one key component of the decision-making process and does not tell a practitioner what to do. The use of current best evidence does not replace clinical expertise or input from the client, but rather provides another dimension to the decision-making process, which is also placed in context with the client's clinical circumstances. It is this decision-making process that is referred to as *evidence-based decision making.*

14. The highest level of evidence for evidence-based decision making is which of the following?
a. In vitro (test tube) research
b. Case reports
c. Randomized controlled trials
d. Meta-analysis and systematic reviews

ANS: D
The highest level of evidence, or the "gold standard," consists of the systematic review (SR) and meta-analysis using two or more randomized controlled trials (RCTs) of human subjects. SRs and meta-analyses are considered the gold standard for evidence because of their strict protocols to reduce bias. These reviews provide a summary of multiple research studies that have investigated the same specific question. SRs use explicit criteria for retrieval, assessment, and synthesis of evidence from individual RCTs and other well-controlled methods. Meta-analysis is a statistical process often used with SRs. It involves combining the statistical analyses of several individual studies into one analysis. When data from these studies are pooled, the sample size and power usually increase. As a result, the combined effect can increase the precision of estimates of treatment effects and exposure risks.

15. A well-constructed PICO question includes which of the following four parts?
a. Client problem, implementation, clinical context, outcome
b. Plan, implementation, clinician, outcome
c. Client problem, intervention, comparison, and outcome
d. Problem, client, intervention, outcome

ANS: C

PubMed is designed to provide access to both primary and secondary research from the biomedical literature. PubMed provides access to MEDLINE, the National Library of Medicine's premier bibliographic database covering the fields of medicine, nursing, dentistry, veterinary medicine, the healthcare system, and the preclinical sciences. The database contains over 12 million citations dating back to 1966, and it adds more than 520,000 new citations each year. The PICO question provides the foundation for the search terms used in the MEDLINE database. By combining the client problem or population (P) description with the intervention (I), a comparison (C), and an outcome (O) being considered, one can quickly pinpoint a set of citations that will potentially provide an answer to the question being posed. Although online databases provide quicker access to the literature, knowing how databases filter information and having an understanding of how to use PICO and database features allow a more efficient search to be conducted.