## **Quiz: Infant Oral Examination**

Correct answers:

- 1. The concept of a dental home includes seeing children at what age for their first dental visit?
  - a. 3 years
  - b. 2 years
  - c. <u>1 year</u>
  - d. 5 years

2. Which organizations have embraced the concept of a dental home?

- a. American Dental Association
- b. American Academy of Pediatric Dentistry
- c. American Academy of Pediatrics
- d. All of the above

3. During the past several decades, the prevalence of dental caries in children younger than 5 years of age has been:

- a. Decreasing
- b. Staying the same
- c. Increasing

4. White line lesions are the earliest sign of caries development.

- a. <u>True</u>
- b. False

5. The most likely source for a child to be infected with cavity-causing bacteria is from his or her:

- a. Neighbor
- b. Father
- c. Mother
- d. Siblings

6. The initial dental exam for a 1-year old should include:

- a. Reviewing the child's medical history
- b. Completing a caries risk assessment
- c. Reviewing the child's dental history
- d. All of the above
- 7. Completing and implementing a caries risk assessment helps to:
  - a. Increase paper work for your team
  - b. Develop an individualized preventive plan for each patient
  - c. Decrease the incidence of early childhood caries
  - d. <u>b. and c.</u>
- 8. One of the best ways to examine a young child's teeth is to:
  - a. Have the child sit in the dental chair like an adult
  - b. Wait until the child is old enough to cooperate fully
  - c. Have your assistant restrain the child
  - d. Have the child sit in his/her caregiver's lap and do a knee-to-knee exam

9. After completing the oral exam and the caries risk assessment, the process of developing and recommending and educational and preventive plan for each patient is called "anticipatory guidance."

- a. <u>True</u>
- b. False

10. Anticipatory guidance can include:

- a. Oral hygiene and appropriate fluoride recommendations
- b. Discussing non-nutritive sucking habits
- c. Discussing diet and feeding practices including the use of bottles, sippy cups and breast feeding on demand
- d. Injury prevention and counseling
- e. All of the above

11. The recommended clinical treatment for white line lesions is:

- a. Application of a fluoride varnish and close monitoring of the situation
- b. Removing the lesions with a high-speed handpiece and placing a composite resin restoration
- c. Re-evaluate in 6 to 12 months
- d. Referral to a pediatric dentist for treatment under general anesthesia

12. If a child has one or two small cavitated lesions, use of Interim Therapeutic Restorations (IRT) is an appropriate treatment method.

- a. <u>True</u>
- b. False

13. It may be appropriate to delay treatment due to a child's behavior when:

- a. The dental treatment needed is not urgent
- b. The dental treatment is related to trauma or an infection
- c. The child's behavior is expected to improve in the foreseeable future
- d. <u>a. and c.</u>

14. Counseling parents about their child's dental needs is best accomplished:

- a. Once the child is 3 years old
- b. After a dental problem is noted
- c. Before the child is born
- d. At a sibling's soccer game

15. Children born to mothers with a high level of cariogenic bacteria are 10 times more likely to develop dental caries than those born to mothers with a low level of cariogenic bacteria.

- a. <u>True</u>
- b. False

16. The concept of the "dental home" will be:

- a. Evolving as new scientific information extends our knowledge about prevention and early childhood caries
- b. Important for every dentist to embrace and integrate into their practice
- c. A major step in the battle against dental problems for our youngest, most susceptible patients
- d. All of the above