Evidence-Based Dentistry, Prevention, Infection Control, Ethics and Jurisprudence

National Dental Examining Board of Canada (NDEB) Virtual OSCE and Assessment of Fundamental Knowledge (AFK)

About 5% of the AFK · 5 topics · 2026 blueprint

This area covers evidence-based dentistry, prevention, infection prevention and control, ethics and jurisprudence. It is about 5% of the AFK in NDEB's 2026 blueprint. Its questions test reading a study's design and numbers, choosing preventive care by risk, applying standard and transmission-based precautions, and the national principles of consent, capacity, confidentiality and records. Provincial rules differ; questions here test principles, not one province's law.

You should be able to: A test finds 90 of 100 people with a disease and correctly calls 180 of 200 people without it negative. What is its specificity?

Every topic: the key point and the trap

EB-1 Reading the evidence

The usual hierarchy for questions of treatment effect runs from systematic reviews of randomized controlled trials, to single randomized trials, to cohort studies, case-control studies, case series and expert opinion.

Trap: Dividing 1 by the relative risk reduction (25%) and getting 4 instead of 20.

EB-2 Prevention by risk

Caries risk assessment (history, diet, fluoride exposure, saliva, plaque and existing lesions) decides the recall interval and preventive measures.

Trap: Using the weight of the product or its sodium fluoride content instead of the fluoride ion.

EB-3 Infection prevention and control

Standard precautions apply to every patient: hand hygiene, personal protective equipment by risk, safe sharps handling, respiratory hygiene and cleaning and sterilizing instruments.

Trap: Treating handpieces as non-critical: they touch mucosa and are heat sterilized between patients.

EB-4 Ethics and consent

The core principles are autonomy, beneficence, non-maleficence and justice, with veracity (truthfulness) and confidentiality.

Trap: Treating a signature on a form as consent when the discussion of risks and alternatives never took place.

EB-5 Confidentiality, records and duties

Patient information is confidential; disclosure needs the patient's consent unless the law requires or permits it.

Trap: Withholding a copy of the record until the patient's bill is paid.

Key terms

Number needed to treat: How many patients must be treated for one to benefit: 1 divided by the absolute risk reduction.

Specificity: The share of people without the disease whom the test correctly calls negative.

Spaulding classification: Grouping of items into critical, semi-critical and non-critical to set the level of reprocessing.

Capacity: The ability to understand the information about a decision and appreciate its consequences, judged for each decision.

ExamDragon, examdragon.com/ndeb. Independent exam preparation, not affiliated with or endorsed by the National Dental Examining Board of Canada (NDEB); written in our own words to NDEB's 2026 AFK blueprint. NDEB is a trademark of the National Dental Examining Board of Canada, used only to name the exam.