

VIRGINIA BOARD OF DENTISTRY
EXAM COMMITTEE MEETING AGENDA**FRIDAY, MAY 20, 2022****PERIMETER CENTER, 9960 MAYLAND DRIVE, SECOND FLOOR CONFERENCE CENTER, HENRICO, VA 23233**

<u>TIME</u>		<u>PAGE</u>
9:00 a.m.	Call to Order – Dr. Sultan E. Chaudhry, DDS, Chair	
	Introduction of Board Members, Staff and Guests	
9:05 a.m.	Public Comment – Dr. Chaudhry, DDS	
	Approval of Minutes	1-4
	Jurisprudence by State	5-76
	CE Reporting Companies Presentation	
	• CE Broker	77
	• CE Zoom	--
	Next Meeting	
	Adjourn	

**VIRGINIA BOARD OF DENTISTRY
EXAM COMMITTEE MEETING MINUTES
March 5, 2021**

TIME AND PLACE:

The virtual Exam Committee Meeting ("Committee") of the Virginia Board of Dentistry was called to order at 9:07 a.m., on March 5, 2021, at the Perimeter Center, 9960 Mayland Drive, Henrico, Virginia 23233.

CALL TO ORDER:

Dr. Bryant called the meeting to order.

Consistent with Amendment 28 to HB29 (the Budget Bill for 2018-2020) and the applicable provisions of § 2.2-3708.2 in the Freedom of Information Act, the Board is convening today's meeting virtually to consider such regulatory and business matters as are presented on the agenda necessary for the board to discharge its lawful purposes, duties, and responsibilities.

Dr. Bryant provided the Board members, staff, and the public with contact information should the electronic meeting be interrupted.

**COMMITTEE MEMBERS
PRESENT VIRTUALLY:**

Nathaniel C. Bryant, D.D.S., Chair
Jamiah Dawson, D.D.S.
Margaret F. Lemaster, R.D.H.
Dagoberto Zapatero, D.D.S.

**OTHER PARTICIPATING
BOARD MEMBERS
PRESENT VIRTUALLY:**

Augustus A. Petticoles, Jr., D.D.S.

**STAFF PRESENT AT THE
PERIMETER CENTER:**

Jamie C. Sacksteder, Deputy Executive Director, Board of Dentistry
Donna M. Lee, Discipline Case Manager, Board of Dentistry

**OTHERS PRESENT
VIRTUALLY:**

Sandra K. Reen, Executive Director, Board of Dentistry
Richard Archer, D.D.S., VCU School of Dentistry, Board Consultant

**ESTABLISHMENT OF A
QUORUM:**

A roll call of the Board members and staff was completed. With four members of the Committee present, a quorum was established.

PUBLIC COMMENT:

Dr. Bryant explained the parameters for public comment and opened the public comment period. Dr. Bryant also stated that written comments were received from Brett Seigel, Dr. Bruce D. Horn, Dr. Frank Luorno, Jr., and Tracey Martin, R.D.H, which were sent by email to Committee members and will be posted with the draft minutes.

Brett Seigel, VCU ASDA Chapter President Elect – Mr. Seigel addressed the Committee concerning the negative impact of using human subjects in clinical licensing examinations by candidates seeking a dental license, which the ASDA is convinced is flawed and unethical. The ASDA would support alternatives that are preferable to the current process of using human subjects.

Bruce D. Horn, D.D.S., Director of Dental Examinations with the Western Regional Examination Board – Dr. Horn stated that it was not the content of the WREB examination that is in question; however, the score report seems to be an issue with the Board. He submitted the current WREB score report that has been used for about one year, which contains the Operative score of each procedure, Class III anterior composite, and Class II alloy or composite that is clearly detailed for conjunctive assessment by the Board. Dr. Horn requested that candidates who use the WREB exam be permitted to come to Virginia with those results.

APPROVAL OF MINUTES:

Dr. Bryant asked if there were any edits or corrections to the January 31, 2020 minutes. Ms. Lemaster stated that the time for the adjournment of the meeting has 11:27 p.m. instead of 11:27 a.m. Dr. Zapatero moved to approve the minutes with the correction noted by Ms. Lemaster. Following a second, a roll call vote was taken. The motion passed.

EXAM ACTION TIMELINE AND EXAM COMPARISON:

Dr. Bryant stated that the Board voted to have the Exam Committee discuss the testing agency exams in more detail, consider a timeframe to require passage of the ADEX exam, and report its findings to the Board.

Ms. Sacksteder reviewed the exam action timeline, which started in November 2019 through December 2020, and discussed the outcome and/or recommendations from each meeting. She also explained the dental exams chart, dental hygiene exams chart, and the ADA exam comparison chart.

Dr. Archer stated that VCU has only used ADEX for the last five years. He also stated that the manikin exam has really evolved and that ADEX is accepted in all states except for Delaware and New York. Dr. Archer answered questions from the Committee pertaining to the cost comparison for students to take the exam, the quality of the typodont used for testing, what parties would feel aggrieved if only the ADEX exam is accepted, and test preparation differences between live patients and a typodont.

Dr. Archer further explained that there are fewer differences for the dental hygiene exam and it is a successful and reliable exam. Ms. Lemaster informed the Committee that there are 5 different typodonts and the selection is randomized, and is not able to be memorized.

ADEX EXAM:

Ms. Sacksteder reiterated that the ADEX acceptance map indicated that the exam is not accepted in New York and Delaware for dentists; and the ADEX acceptance map for dental hygiene showed the exam is not accepted in Nebraska, Delaware and Georgia.

Ms. Lemaster moved that the Committee recommend to the Board that it only accept the ADEX Exam for dentists. Following a second, a roll call vote was taken. The motion passed.

Ms. Lemaster moved that the Committee recommend to the Board that it only accept the ADEX Exam for dental hygiene. Following a second, a roll call vote was taken. The motion passed.

**PROPOSED
DEFINITIONS:**

Ms. Sacksteder explained the proposed drafted language for the following definitions: Clinical Competency Exam; Compensatory Scoring; Conjunctive Scoring; and Substantially Equivalent. She informed the Committee that the Executive Director recommended that the definition for Clinical Competency Exam be changed to read as follows: "means a formal test of knowledge and proficiency in the evaluation, diagnosis, and treatment of dental conditions and the prevention of dental diseases which includes live patient and/or manikin based testing methods to demonstrate the skills needed to safely provide care and treatment of patients."

After discussion, the Committee unanimously agreed by consensus to change the word "proficiency" to "competence" in the proposed definition recommended by the Executive Director for Clinical Competency Exam.

Ms. Lemaster moved that the Committee recommend to the Board that it adopt the definitions, as amended, into regulations and/or guidance document and applications. Following a second, a roll call vote was taken. The motion passed.

**REQUIRED CLINICAL
EXAM COMPONENTS
FOR DENTAL
APPLICANTS:**

Ms. Sacksteder provided an overview of the required clinical exam components and scoring requirements for dental applicants by examination and credentials. The Committee agreed by consensus to accept the exam components and scoring requirements presented.

Dr. Dawson moved that the Committee recommend to the Board to adopt the amended required clinical exam components for dental applicants into regulations. Following a second, a roll call vote was taken. The motion passed.

**REQUIRED CLINICAL
EXAM COMPONENTS
FOR DENTAL HYGIENE
APPLICANTS:**

Ms. Sacksteder presented the required clinical exam components and scoring requirements for dental hygiene applicants by examination and credentials.

Dr. Dawson moved that the Committee recommend to the Board to adopt the required clinical exam components for dental hygiene applicants into regulations. Following a second, a roll call vote was taken. The motion passed.

Dr. Petticolas moved that the Committee address with Board counsel at the March Board meeting a recommendation that requires clinical exam components for dental and dental hygiene applicants be adopted into the applications and/or guidance document. Following a second, a roll call vote was taken. The motion passed.

SCORE CARDS:

Ms. Sacksteder provided sample score cards and reports that are received by the Board from applicants in the past and also reviewed the drafted language for acceptable score cards and reports.

Dr. Dawson moved that the Committee recommend to the Board to adopt these required components of a score card into regulation and/or guidance document and applications. Following a second, a roll call vote was taken. The motion passed.

Dr. Dawson moved that the Committee address with Board counsel at the March Board meeting a recommendation that required components of a score card be added into the applications and/or guidance document. Following a second, a roll call vote was taken. The motion passed.

ADJOURNMENT:

With all business concluded, the Committee adjourned at 10:55 a.m.

Nathaniel C. Bryant, D.D.S., Chair

Sandra K. Reen, Executive Director

Date

Date

Jurisprudence by State

State	Requires Jurisprudence for Licensure	Cost	Discipline	Open Book	Provider
Alabama	X	Free with paid application		X	The Board- The exam is emailed to applicant
Alaska	X			X	The Board- The exam is emailed to applicant
Arizona	X	\$35.00	X	X	<u>Esslearning?</u>
Arkansas	X	Free with paid application		X	The Board- The exam is emailed to applicant
California	X	\$125.00			<u>PSI</u>
Colorado					
Connecticut					
Delaware	X	Free		X	get a copy online, take and notarize
DC	X	Free		X	Take home test- since October 2021, it has been waived
Florida	X	\$135.00		X	<u>CDCA</u>
Georgia	X	Free		X	get a copy online, take and notarize
Hawaii					
Idaho	X			X	The Board-The exam is emailed to the applicant
Illinois					
Indiana	X	Free with paid application		X	The Board- the exam is emailed of the applicant
Iowa		Depends on provider		X	several different ones

Jurisprudence by State

State	Requires Jurisprudence for Licensure	Cost	Discipline	Open Book	CE	Provider
Kansas	X	Free		X		Either a dental school who agrees to proctor ora dental or dental hygiene school, educational institution, testing center, or local library
Kentucky	X	Free		X		Can get online and take and then mail to the Board
Louisiana	X	Free with paid application				The Board- in person
Maine	X	Free		X		Can get online and take and then mail to the Board
Maryland	X	Free		X		Can get online and take and then mail to the Board
Massachusetts	X	Free		X		The Board- Emailed
Michigan		Depends on provider				
Minnesota	X	\$60		X	X	CE provider <u>PSJ</u>
Mississippi	X	Free with paid application		X		The Board
Missouri	X	Free with paid application		X		The Board
Montana	X	\$85		X		The Board
Nebraska	X	Free with paid application		X		The Board: ProProfs
Nevada	X	Free with paid application		X		The Board

Jurisprudence by State

State	Requires Jurisprudence for Licensure	Cost	Discipline	Open Book	CE	Provider
New Hampshire	X	Free with paid application		X		The Board
New Jersey	X	Free with paid application		X		The Board
New Mexico	X	Free with paid application		X		The Board
New York						
North Carolina	X	Free with paid application		X		<u>The Board, take online</u>
North Dakota	X	Free with paid application		X	X	<u>The Board, take online</u>
Ohio	X	Free with Paid Application		X		The Board, get online then notarized
Oklahoma	X	Free with paid application		X		The Board, in person
Oregon	X	Free with paid application		X		The Board
Pennsylvania						
Rhode Island						
South Carolina	X	Free with paid application		X		The Board, take online
South Dakota	X	\$225		X		The Board
Tennessee	X	Free with paid application		X		<u>The Board: Online</u>
Texas	X	\$54				<u>The Board: Online</u>
Utah						
Virginia	X	Free	X	X		The Board: Online
Washington	X	unknown		unknown		The Board
West Virginia	X	unknown		unknown		unknown
Wisconsin	X	Free		X		The Board
Wyoming						

DELAWARE



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
BOARD OF DENTISTRY AND DENTAL HYGIENE

TELEPHONE: (302) 744-4500
FAX: (302) 739-2711
WEBSITE: DPR.DELAWARE.GOV
EMAIL: customerservice.dpr@delaware.gov

JURISPRUDENCE EXAMINATION FOR DENTIST CANDIDATES

INSTRUCTIONS

The successful completion of this examination fulfills the Jurisprudence requirement for the Delaware Board of Dentistry and Dental Hygiene for *dentist* licensure candidates. This is an "open-book" examination. The answers are in the Board's License Law and Rules and Regulations, both of which are available on the Board's website.

1. Each question has **one** correct answer.
 - For Multiple Choice questions, enter the letter of the correct answer in the **ANSWER** space following the question.
 - For True/False questions, check the box next to the correct answer.
2. When you have finished the examination, complete the **AFFIDAVIT** *in the presence of a notary*.
3. Mail the completed, signed and notarized exam to the attention of the Board of Dentistry and Dental Hygiene at the address above.

IDENTIFYING AND CONTACT INFORMATION

Name: _____ Application ID: _____
Address: _____
Phone: _____ Email: _____
Date of Exam: _____

QUESTIONS

1. Vacancies occurring in the Board of Dentistry and Dental Hygiene shall be filled by the
 - A. Delaware Dental Hygienists' Association
 - B. Delaware State Dental Society
 - C. Governor
 - D. Division of Professional Regulation
 - E. All of the above

ANSWER: _____

2. Which of these is a requirement for appointment to the Board of Dentistry and Dental Hygiene?
 - A. Resident of Delaware for five years preceding appointment
 - B. Officer of a professional association
 - C. Faculty member at a dental hygiene or dental school
 - D. Licensed professional with a minimum of ten years experience

ANSWER: _____

3. Re-licensure shall be issued upon

- A. Completion of continuing professional education
- B. Certification in cardiopulmonary resuscitation
- C. Payment of a fee
- D. All of the above

ANSWER: _____

4. The Board of Dentistry and Dental Hygiene shall consist of all the following except

- A. Consumer/public member
- B. Dental assistant
- C. Dental hygienist
- D. Dentist

ANSWER: _____

5. Who appoints the Dental Hygiene Advisory Committee?

- A. The Board of Dentistry and Dental Hygiene
- B. The Delaware Dental Hygienists' Association
- C. The Delaware State Dental Society
- D. The Governor
- E. All of the above

ANSWER: _____

6. Who appoints the members of the Board of Dentistry and Dental Hygiene?

- A. The Governor
- B. The President pro tem of the Senate
- C. The General Assembly with the approval of the Governor
- D. The Division of Professional Regulation

ANSWER: _____

7. You can obtain continuing professional education credits by

- A. Self study
- B. Attending scientific sessions of professional associations or society meetings
- C. Teaching professional courses or making presentations to dental societies or dental hygiene associations
- D. Publishing an article in a professional journal
- E. All of the above

ANSWER: _____

8. The functions of the Delaware Board of Dentistry and Dental Hygiene include all of the following except

- A. Establishing guidelines for professional fees
- B. Granting licenses to practice dentistry and dental hygiene
- C. Establishing rules and regulations affecting the practice of dentistry and dental hygiene
- D. Suspending or revoking licenses or imposing other discipline in appropriate cases

ANSWER: _____

9. **Public members of the Delaware Board of Dentistry and Dental Hygiene have full voting privileges except for**
- A. Granting licenses
 - B. Adopting rules and regulations
 - C. Suspending or revoking licenses
 - D. None of the above

ANSWER: _____

10. **The certificate to practice dentistry or dental hygiene shall be exposed to public view in the place of business of the licensee.**

True False

11. **If a dentist or dental hygienist fails to submit proof of continuing education, his or her license will not be renewed and he or she cannot practice in the State of Delaware.**

True False

12. **A dentist or dental hygienist must renew his or her license every**

- A. Year
- B. Two Years
- C. Four Years
- D. License is permanent

ANSWER: _____

13. **A dental hygienist is required to have 24 hours of continuing education every two years.**

True False

14. **A dentist's or dental hygienist's license may be revoked if the license was procured through fraud or misrepresentation.**

True False

15. **An applicant for licensure or renewal as a dentist or dental hygienist shall not have a criminal conviction record nor pending criminal charge relating to an offense, the circumstances of which substantially relate to the practice of dentistry or dental hygiene.**

True False

16. **A dentist's or dental hygienist's license may be revoked if he or she is guilty of the excessive use or abuse of drugs.**

True False

17. **A licensed dentist or dental hygienist who is found to have practiced in an incompetent or grossly negligent manner or who has otherwise been guilty of misconduct or unprofessional conduct may be subject to discipline by the Board.**

True False

18. **The employment and duties of dental hygienists include all of the following except**

- A. Performing prophylactic measures including application of chemicals to the teeth
- B. Making instrumental examinations of the teeth for cavities
- C. Establishing an office for the practice of dental hygiene
- D. Removing calculus deposits, plaque, accretions and stains from all surfaces of the teeth
- E. Assembling all necessary information for use by the dentist in diagnosis and treatment planning

ANSWER: _____

19. The practice of dentistry is defined as all of the following except

- A. Being a proprietor of a place for performing dental operations
- B. Accepting fees for dental operations
- C. Diagnosing or treating diseases or lesions of teeth, jaws or oral tissues
- D. Reviewing insurance claims related to the practice of dentistry
- E. Using the word "Dentist," Dental Surgeon," "D.D.S.," or "D.M.D." in connection with his or her name

ANSWER: _____

20. If a consumer wishes to have the Board consider a complaint against a licensed dentist or dental hygienist, the consumer should make the complaint in writing addressed to the

- A. Delaware State Dental Society
- B. Delaware Dental Hygienists' Association
- C. Division of Professional Regulation
- D. Better Business Bureau

ANSWER: _____

21. A licensed dentist may be subject to a \$5,000 fine by the Board if the Board finds that he or she has engaged in a single act of consumer fraud or deception.

- True False

22. All licensed dentists are required by statute to carry malpractice insurance.

- True False

23. There is a limit on the number of hours in practice management or personal self-improvement that may be submitted for license renewal.

- True False

24. For any dentist administering anesthesia, an anesthesia permit is required for all of the following except

- A. Local anesthesia
- B. Conscious sedation
- C. Deep sedation
- D. General anesthesia

ANSWER: _____

25. If any adverse occurrences occur as a result of the administration of conscious sedation or general anesthesia, the dentist is required to report this occurrence within 30 days to the

- A. Delaware State Dental Society
- B. Division of Professional Regulation
- C. Delaware Board of Dentistry and Dental Hygiene
- D. Malpractice insurer

ANSWER: _____

26. Members of the Delaware State Board of Dentistry and Dental Hygiene are appointed for terms of four years.

- True False

27. Which of the following is not required for the general supervision by a dentist of a licensed dental hygienist?
- A. If the dentist is not to be present, the patient must be notified as soon as it is known that the dentist will not be present and given the option to reschedule to a time when the dentist will be present in the office.
 - B. The patient must be offered a discount on any fee because the dentist is not present.
 - C. The dentist is required to review the treatment records of each patient prior to and following the patient treatment.
 - D. Patients for whom it is medically or dentally contraindicated may not be scheduled when the dentist is not present.
 - E. A second office employee must be present in the treatment facility at all times when patient care is performed.

ANSWER: _____

28. How many hours of continuing education is a dentist required to complete every two years?
- A. 24
 - B. 36
 - C. 40
 - D. 50

ANSWER: _____

29. If an applicant fails the practical examination once, how many more times is he or she allowed to retake the examination *without* having to provide evidence of mitigating circumstances to the satisfaction of the Board?
- A. One
 - B. Two
 - C. Three
 - D. Unlimited times

ANSWER: _____

30. The practical test in dentistry and dental hygiene and its methods of administration are validated as to content and scoring by a member of the faculty of an accredited school of dentistry who cannot be licensed to practice dentistry in Delaware.
- True False

AFFIDAVIT OF APPLICANT

I, _____, do hereby certify under oath the following:

I understand that this is an open-book examination and that the only authorized sources of assistance for completing this examination are the License Law and Rules and Regulations of the Delaware Board of Dentistry and Dental Hygiene.

I have read the Delaware License Law and Rules and Regulations in its entirety and have completed this examination without the aid or assistance of any individual or other unauthorized source.

I further understand that in accordance with 24 Del.C. § 1122(d), which states: *Where the Board has found to its satisfaction that an applicant has been intentionally fraudulent, or that false information has been intentionally supplied, the Board shall deny the application and report its findings to the Attorney General for further action.*

Witnessed my signature, the _____ day of _____, 20_____.

Signature of Applicant: _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public: _____

NOTARY SEAL

My Commission Expires: _____

GEORGIA

GEORGIA BOARD OF DENTISTRY

2 Peachtree Street, N.W.

6th Floor

Atlanta, Georgia 30303

CANDIDATES MUST SUBMIT A COMPLETED JURISPRUDENCE EXAM ALONG WITH A COMPLETE APPLICATION WITH NECESSARY SUPPORTING DOCUMENTS IN ORDER TO HAVE A COMPLETED APPLICATION.

Name _____

Social Security Number _____

Address _____

Date _____

DENTAL EXAMINATION **Dental Laws and Rules Examination**

Place your answer on the line to the left of each question.

Choose the best answer for each question:

- _____ 1. A patient has been terminated from a practice. In order for the dentist not to be accused of patient abandonment, a location for emergency care must be provided for at least how many days?
- A. 14
 - B. 30
 - C. 45
 - D. 60
- _____ 2. In order to obtain a conscious sedation permit the dentist must be trained in _____.
- A. safety
 - B. management of medical emergencies
 - C. safety and management of medical emergencies
 - D. none of the above
- _____ 3. A dental assistant may perform which of the following delegated duties with expanded duties training?
- A. placement of rubber dam
 - B. placement of topical anesthetic
 - C. placement of retraction cord
 - D. placement of a temporary crown

- _____ 4. In order to refuse to grant a license, revoke a license or discipline a licensee the Board must vote _____.
- A. by a majority
 - B. by $\frac{3}{4}$ of the Board
 - C. unanimously
 - D. none of the above
- _____ 5. Advertising using full names of practitioners at a specific location must comply with which of the following _____.
- A. no names are required
 - B. name of at least one practitioner at that location
 - C. name of practice owner
 - D. none of the above
- _____ 6. An expanded duties assistant under direct supervision of the dentist may perform the placement of sealants and retraction cord.
- A. True
 - B. False
- _____ 7. In order for a dentist to renew his license to practice dentistry he must
- A. have a current DEA registration
 - B. be a member of the Georgia Dental Association
 - C. be a member of the American Dental Association
 - D. be currently certified in cardiopulmonary resuscitation
- _____ 8. In order to fulfill the requirements for an enteral/enteral inhalation conscious sedation permit, the applicant must have at least how many patient experiences which shows competency in enteral/enteral inhalation conscious sedation?
- A. 5
 - B. 10
 - C. 15
 - D. 20

- _____ 9. A dental hygienist working under the direct supervision of a dentist may perform all of the following EXCEPT _____.
- A. periodontal probing
 - B. administer local anesthesia
 - C. take oral x-rays
 - D. root planning with hand instruments
- _____ 10. The dental assistant without expanded duties training can perform all of the following duties EXCEPT _____.
- A. monitor nitrous-oxide and adjust with supervision
 - B. polish enamel and restorations of the anatomical crown
 - C. remove dry socket medication
 - D. place and remove rubber dams
- _____ 11. A dental hygienist can perform which of the following?
- A. removal of calculus deposits
 - B. polishing of teeth
 - C. removal of stains from the teeth
 - D. all of the above
- _____ 12. A dental license may be refused or revoked for each of the following, EXCEPT _____.
- A. unprofessional conduct which affects fitness to practice dentistry
 - B. taking a 20 day vacation
 - C. Pleading "no contest" to a felony
 - D. Making fraudulent representations to the Board
- _____ 13. Following the end of the renewal biennium, a dentist must maintain documentation of continuing education course attendance for _____.
- A. 1 year
 - B. 3 years
 - C. 5 years
 - D. 10 years

- _____ 14. All complaints must be made in writing to which of the following?
- A. American Dental Association
 - B. Governor's office
 - C. Georgia Board of Dentistry
 - D. Georgia Dental Association
- _____ 15. Of the required 40 continuing education hours, a minimum of how many hours must involve the actual delivery of dental services to patients?
- A. 10
 - B. 20
 - C. 30
 - D. 40
- _____ 16. A report of all incidences of morbidity and mortality must be submitted to the Board within _____.
- A. 30 days
 - B. 60 days
 - C. 180 days
 - D. 1 year
- _____ 17. A dentist shall not allow a dental technician to visit his/her office to see a patient EXCEPT to assist in the selection of a tooth shade.
- A. True
 - B. False
- _____ 18. A dental assistant may perform all of the same duties of a dental hygienist under which conditions?
- A. when the hygienist is on sick leave
 - B. when there are too many patients to be seen
 - C. no circumstances
 - D. when the hygienist instructs the dental assistant to do so

- _____ 19. A patient requests conscious sedation. He currently takes Prozac as prescribed by his physician. A dentist without a conscious sedation permit may administer _____.
- A. nothing without consulting the prescribing physician
 - B. additional dose of Prozac only
 - C. local anesthetic only
 - D. N₂O and local anesthetic
- _____ 20. A dental assistant must work under what type of supervision in a dentist office?
- A. telephone supervision by the dentist
 - B. hour-to-hour supervision by the dentist
 - C. direct supervision and control by the dentist
 - D. indirect supervision and control by the dentist
- _____ 21. Face bow transfers, place periodontal dressings, make night guard impressions and place cavity liner and base over unexposed pulps are all duties that can be performed by _____.
- A. the dental assistant
 - B. the expanded duties assistant
 - C. the lab technician
 - D. the sterilization technician
- _____ 22. Pit and fissure light cured sealants may be applied by _____.
- A. the dental assistant
 - B. the hygienist and expanded duty assistant
 - C. the x-ray technician
 - D. both a and b
- _____ 23. What is the maximum number of practicing dental hygienists can a dentist supervise under general supervision?
- A. 1
 - B. 2
 - C. 4
 - D. unspecified

- _____ 24. The voluntary surrender of a license has the same effect as revocation and is subject to reinstatement by the Board.
- A. True
 - B. False
- _____ 25. An expanded duties dental assistant must obtain which of the following?
- A. a certificate of completion from the General Dentistry Association
 - B. Course I, II, & III certificate of completion
 - C. a certificate of completion from a school recognized and approved by the board
 - D. membership in any Georgia professional organization
- _____ 26. What happens if the applicant fails to appear before the Board for a hearing?
- A. he/she is excused
 - B. the Board will carry on with a decision
 - C. the Board will not meet
 - D. his /her license is automatically revoked
- _____ 27. The expanded duties dental assistant may perform changing of the in-office bleaching agent with direct supervision only after _____.
- A. the light blinks twice
 - B. 20 minutes have elapsed
 - C. desensitizing medications have been applied
 - D. the dentist has applied the initial application
- _____ 28. How many years after the date of the last treatment must a dentist maintain a patient's treatment record?
- A. 2 years
 - B. 3 years
 - C. 10 years
 - D. 7 years

_____ 29. What device does conscious sedation require by law?

- A. pulse oximeter
- B. approved N₂O/O₂ delivery unit
- C. positive pressure O₂ delivery system
- D. both A and C

_____ 30. Who is authorized to use air abrasive equipment in a dentist office for removal of stains?

- A. the dental hygienist
- B. the expanded duties assistant
- C. the licensed dentist
- D. both A and C

_____ 31. A dental hygienist practicing under general supervision can perform which of the following functions?

- A. oral prophylaxis
- B. scaling and root planing
- C. debridement
- D. all of the above

END OF EXAM

GEORGIA BOARD OF DENTISTRY

2 Peachtree Street, N.W.

6th Floor

Atlanta, Georgia 30303

**Georgia Board of Dentistry
Jurisprudence Examination Dental/Dental Hygiene**

Rule 150-3-.01(6); Rule 150-5-.02(9): In determining whether an applicant has met the requirements for licensure, an applicant must receive a passing score of 75 or greater on the Georgia jurisprudence examination. Such score will be deemed valid for a period not to exceed one year from the date in which the examination was administered.

AFFIDAVIT of Applicant:

I, _____, do hereby certify under oath the following:

I understand that this is an open book examination and the only authorized sources of assistance for completing this examination are the Georgia Law and Rules.

I have read the Georgia Law and Rules regulating the practice of dentistry in its entirety and have completed this examination without the aid or assistance of any individual or other unauthorized source.

I further understand that in accordance with O.C.G.A. § 43-11-47(a)(2) and O.C.G.A. § 43-11-72, the Board shall have the authority to refuse to grant a license or to revoke a license or to discipline a licensee upon a finding by a majority of the Board that a licensee or applicant has knowingly made misleading, deceptive, untrue, or fraudulent representations in the practice of dentistry or on any document connected therewith.

Witness my signature, the _____ day of _____, 20__.

Signature of Affiant

Sworn to and subscribed before me this _____ day of _____, 20__.

Notary Public

My Commission Expires:

06/15/2018

KENTUCKY

JURISPRUDENCE EXAMINATION

Name as it appears on your application.

Last/Suffix

First

Middle

Applying for: Dental licensure

Dental hygiene licensure

Phone number _____

The following questions refer to the statutes and regulations which govern the practice of dentistry in the Commonwealth of Kentucky. This is an open book examination; you may refer to the laws published on the website of the Board or Legislative Research Commission. You must answer at least 45 of 50 questions correctly to pass this examination. Please return a signed and completed examination to the Board office at the address at the end of test.

- 1) The Law Enforcement Committee shall consist of:
 - a) Five members
 - b) Four members
 - c) Three members
 - d) Ten members

- 2) How many dentists sit on the Kentucky Board of Dentistry who may vote on business?
 - a) Five dentist.
 - b) Seven dentists.
 - c) Ten dentists.
 - d) Six dentists.

- 3) As a requirement for renewal of your dental or hygienist's license or registration of a dental assistant, you must maintain with no more than a 30 day lapse CPR certification which meets or exceeds the guidelines set forth by the American Heart Association unless a hardship waiver is submitted to and approved by the Board?
 - a) True
 - b) False

- 4) When the Dental Practice Act was last updated?
 - a) 1999
 - b) 2000
 - c) 2009
 - d) 2010

- 5) The Board has the authority to issue a subpoena for the production of documents in a complaint investigation.
- a) True
 - b) False
- 6) To practice under General Supervision of each employing dentist, a dental hygienist MUST register with the Board for each dentist.
- a) True
 - b) False
- 7) All fees and fines paid to the Board are non-refundable.
- a) True
 - b) False
- 8) How Many dental hygienists sit on the Kentucky Board of Dentistry?
- a) One.
 - b) Two.
 - c) Three.
 - d) Four.
- 9) The Well Being Committee of the Board deals with:
- a) Only cases involving drugs or controlled substances.
 - b) Only cases involving alcohol.
 - c) Any type of impairment but not limited to drugs or alcohol.
 - d) Only issues of patient wellbeing.
- 10) Dental hygienists may perform local anesthesia if they have been formally trained in this technique and have registered with the Board.
- a) True
 - b) False

- 11) How many days does an individual have to respond to the Board a written response once served with a complaint investigation notice?
- a) Ten days.
 - b) Fifteen days.
 - c) Twenty days.
 - d) Thirty days.
- 12) To properly terminate the patient doctor relationship a licensed dentist must;
- a) Provide written notice to the patient.
 - b) Provide emergency treatment for the patient for thirty days from the date of termination.
 - c) Retain a copy of the termination letter in the patient record.
 - d) All of the above.
- 13) The registration of Dental Assistants in the Commonwealth expires:
- a) Every December 31.
 - b) December 31 of years ending with even numbers.
 - c) December 31 of years ending with odd numbers.
 - d) December 31 every other year.
- 14) A registered dental assistant may perform coronal polishing if they have completed the coronal polishing course and registered with the board.
- a) True.
 - b) False.
- 15) What is the process for writing the board and requesting the Board to explain what the laws or regulations mean called?
- a) Open Meetings Act.
 - b) Email or Letter request of explanation.
 - c) Advisory Opinion
 - d) Discussion under Open Meeting Act.
- 16) A Charitable Dental Event regulation requirement is for documentation of patient records, infection control procedures, and may be subject to infection control inspection.
- a) True.
 - b) False.

- 17) A dental hygienist may practice dental hygiene in a manner that is separate or independent from the dentist and a dental practice and may establish or maintain an office or practice that is primarily devoted to the provision of dental hygiene services.
- True.
 - False.
- 18) Dentists are authorized to prescribed controlled substances and are subject to the following laws and regulations.
- KRS Chapter 313
 - KRS 218A Controlled Substance Act
 - Title 21 Code of Federal Regulations.
 - All of the above.
 - A and C only.
- 19) In 201 KAR 8:540 Dental Practice and Prescribing regulations, prescription writing privileges and a dentist may prescribe if;
- Licensed by the Kentucky Board of Dentistry.
 - Dentist has obtained his or her DEA registration specific to Kentucky.
 - He or she has enrolled and utilizes the KASPER or electronic system that tracks prescribing of controlled substances in Kentucky.
 - All of the above.
- 20) Under 201 KAR 8:540 the following action shall occur prior to the prescribing a controlled substance. Review KASPER, document relevant patient information, consider available information and determine medically appropriate, obtain complete medical history and physical exam, have written treatment plan, discuss risks and benefits of controlled substance with patient or guardian including risks of tolerance and drug dependence and obtain written consent.
- True.
 - False.
- 21) The Board requires an acceptable written plan of correction to any complaint which is found to have merit.
- True.
 - False.

- 22) The authority to conduct investigations, hold hearings and impose punishments is delegated to:
- a) Full Board.
 - b) Executive Director.
 - c) Board Attorney
 - d) The Executive Director, Board Attorney and hearing panel.
- 23) Every dental hygiene license in the Commonwealth expires;
- a) Every other December 31.
 - b) Every December 31.
 - c) Every December 31 in years ending in odd numbers.
 - d) Every December 31 in years ending in even numbers.
- 24) Dentist may only prescribe drugs which are necessary and within the scope of the practice of dentistry.
- a) True.
 - b) False.
- 25) A dental hygienist may provide dental health education, nutritional counseling, prepare a generalized oral screening with subsequent referral to a dentist, apply fluoride on patients, demonstrate oral hygiene technique and apply sealants in a volunteer community health setting without the supervision of a dentist.
- a) True.
 - b) False.
- 26) What is the minimum number of continuing education hours required for dentist renewal licensure must be taken in a live interactive presentation format?
- a) 3
 - b) 10
 - c) 15
 - d) 30
- 27) A registered dental assistant shall only practice under the direct supervision order, control and full responsibility of a licensed dentist in the Commonwealth.
- a) True.
 - b) False.

- 28) The renewal application of a registered dental assistant must be signed by the supervising dentist as to the continued competency in the duties assigned to him or her from the delegated duties list.
- a) True.
 - b) False.
- 29) The fee to renew a general dental license is;
- a) \$ 100.00
 - b) \$ 150.00
 - c) \$ 295.00
 - d) \$ 325.00
- 30) The Board only recognizes specialties which are recognized by the American Dental Association.
- a) True.
 - b) False.
- 31) The Kentucky Board of Dentistry regulations have a fine assessable for each continuing education hour a dentist is found deficient during licensure renewal, what is that amount?
- a) \$ 100.00
 - b) \$ 200.00
 - c) \$ 250.00
 - d) \$ 300.00
- 32) For dentist or hygienist licensure, if you fail to renew your license prior to January 1 following the year your license expires, you may legally continue to practice until you get it properly renewed?
- a) True.
 - b) False.
- 33) The law requires all members of committees or subcommittees to be appointed members of the Board.
- a) True.
 - b) False.

- 34) The Kentucky Board of Dentistry is required or empowered by statute to charge fees or fines for services or infractions of the laws.
- a) True.
 - b) False.
- 35) How many voting members make up the Kentucky Board of Dentistry?
- a) Seven.
 - b) Eight.
 - c) Ten.
 - d) Fourteen.
- 36) A drug induced state in which a patient responds normally to tactile stimulation and verbal commands and where the ventilator and cardiovascular function are maintained without assistance is known as:
- a) General Anesthesia.
 - b) Moderate enteral sedation.
 - c) Incremental dosing.
 - d) Minimal sedation.
- 37) By statute, how many times must the Board meet per year?
- a) Three.
 - b) Four.
 - c) Six.
 - d) Twelve.
- 38) To start an intravenous access line, a dental hygienist or registered dental assistant working under the direct supervision of a dentist, and the dentist holds a sedation or anesthesia permit issued by the Board, the hygienist or dental assistant must have met the requirements set out in regulations.
- a) True.
 - b) False.
- 39) License holder are subject to additional fees if they do not renew their license before midnight on December 31 of the year of expiration.
- a) True.
 - b) False.

- 40) The law requires every license or registration issued by the Board be posted in a conspicuous place in each place of employment of the dentist, hygienist or dental assistant.
- True.
 - False.
- 41) Which committee has the authority to require a licensee or registration holder to submit to a mental or physical exam?
- Well Being Committee.
 - Credentials Committee.
 - Licensing Committee.
 - Law Enforcement Committee.
- 42) The Kentucky Board of Dentistry is
- Regulatory agency overseeing the practice of dentistry in the Commonwealth.
 - Organized and works with Associations to promote and support dentists.
 - Licensing agency empowered by the state of Kentucky.
 - All of the above.
 - A and C.
- 43) The delegated Duties list provides duties which may be performed by;
- Dental assistants only.
 - Dental Hygienists only.
 - Dental auxiliaries only.
 - All of the above.
- 44) The members of the Law Enforcement committee must consist of;
- Consumers only.
 - Mix of all Board members.
 - All dentists.
 - At least two dentists.
- 45) It is the sole responsibility of each licensee to obtain verification of continuing education hours and maintain a record for these for;
- Three Years.
 - Four years.
 - Five Years
 - It is the responsibility of the CE provider to keep records for four years.

- 46) A registered dental assistant may take radiographs if he or she has completed a Board approved radiography technique and safety course.
- a) True.
 - b) False.
- 47) You are required to notify the Board within 30 days of changes in personal and business contact information in KRS 313.080 Grounds discipline or for revocation or suspension of license or registration, this includes a current name, address, telephone number or email address.
- a) True
 - b) False.
- 48) Dentist may only use dental labs properly and currently registered with the Kentucky Board of Dentistry.
- a) True.
 - b) False.
- 49) Direct Supervision is defined and means that the dentist is physically present in the dental office or treatment facility, personally diagnoses the condition to be treated, authorizes the procedures to be performed, remains in the dental office or treatment facility while the procedures are being performed, and evaluates the performance of the individual supervised.
- A) True
 - B) False.
- 50) Discipline, revocation or suspension may result if convicted of a misdemeanor which involve fraud, deceit, breach of trust, or physical harm or endangerment to self or others, abuse, misuse or misappropriate any drug placed in the custody of the licensee, or falsify or fail to make essential entries on essential records.
- a) True.
 - b) False.

Version July 2018

Mail To:
Kentucky Board of Dentistry
312 Whittington Parkway Suite 101 Louisville KY 40222

MAINE

NAME: _____

DATE: _____

**Maine Board of Dental Practice
Dentist Jurisprudence Examination**

To successfully complete this examination, 9 of the 10 questions must be answered correctly by the applicant. It is an open book examination. The answers may be obtained by going to our website www.maine.gov/dental, and click on "Statutes and Rules" on the home page. Please circle the letter identifying the correct answer.

1. 32 M.R.S. § 18321(1) identifies the Board's sole purpose, which is to protect one of the following:
 - a. Board members.
 - b. Dental professionals.
 - c. Public health and welfare.
 - d. Educational institutions.

2. Which list reflects board membership and terms pursuant to 32 M.R.S. § 18322?
 - a. 9 dentists; 10-year term.
 - b. 6 dentists, 3 hygienists, 1 denturist; 5-year term.
 - c. 5 dentists, 2 hygienists, 1 denturist, 1 public member; 5-year term.
 - d. 5 dentists, 2 hygienists, 1 denturist, 1 public member; 10-year term.

3. Which statutory provision outlines the Board's authority to investigate complaints regarding violations of its statute and rules?
 - a. 32 M.R.S. § 18323.
 - b. 32 M.R.S. § 18305.
 - c. 32 M.R.S. § 18325.
 - d. 32 M.R.S. § 18324.

4. 32 M.R.S. § 18325(1) identifies grounds for disciplinary action that the board may take. Which most accurately reflects the Board's statutory authority:
 - a. Obtaining a license by fraud, deceit, or misrepresentation; incompetent practice, unprofessional conduct.
 - b. Aiding and abetting unlicensed practice; any violation of board rule; failure to provide supervision as required.
 - c. Misuse of alcohol, drugs or other substances that has resulted or may result in endangering the health or safety of patients.
 - d. All of the above.

5. Which Board Rule identifies failure to adhere to the practice standards, including failure to utilize the CDC Guidelines set forth in Board Rule Chapter 12, as unprofessional conduct?
 - a. Board Rule, Chapter 1.
 - b. Board Rule, Chapter 2.
 - c. Board Rule, Chapter 9.
 - d. Board Rule, Chapter 14.

6. Pursuant to 32 M.R.S. § 18352, licensees and applicants are required to report into the Board within 10 days after any of the following changes or events:
 - a. Change of name or address.
 - b. Criminal convictions.
 - c. Disciplinary action taken in Maine or any other jurisdiction.
 - d. All of the above.

7. Dentists, as part of their scope of practice, are authorized to delegate certain duties to unlicensed individuals pursuant to one of the following statutory provisions:
 - a. 32 M.R.S. § 18342(1).
 - b. 32 M.R.S. § 18347.
 - c. 32 M.R.S. § 18371(3).
 - d. 32 M.R.S. § 18379.

8. Dentists who prescribe opioid medications must complete the following continuing education requirement as a condition to prescribe pursuant to 32 M.R.S. § 18308(4):
 - a. 6 hours of continuing education related to every year.
 - b. 6 hours of continuing education every two years.
 - c. 3 hours of continuing education every year.
 - d. 3 hours of continuing education every two years.

9. Board Rule, Chapter 14 identifies the following sedation and anesthesia permits issued by the Board:
 - a. Minimal, moderate, deep sedation, general anesthesia, and site permits.
 - b. Moderate and deep sedation; general anesthesia; and itinerant dental sedation.
 - c. Moderate, deep sedation, general anesthesia, and site permits.
 - d. Moderate, level I; moderate – level II, deep sedation and general anesthesia, and itinerant dental sedation.

10. Board Rule, Chapter 13 requires that a dentist obtain the following continuing education hours in order to qualify for re-licensure as follows:
 - a. 40 hours per biennium; 30 hours in category 1 and 10 hours in category 2.
 - b. 40 hours annually; 30 hours in category 1 and 10 hours in category 2.
 - c. 40 hours per biennium.
 - d. 40 hours annually; 10 hours in category 1 and 30 hours in category 2.

MARYLAND

MARYLAND STATE BOARD OF DENTAL EXAMINERS
SPRING GROVE HOSPITAL CENTER • BENJAMIN RUSH BUILDING
55 WADE AVENUE/TULIP DRIVE • CATONSVILLE, MARYLAND 21228
PHONE – 410-402-8511 • FAX – 410-402-8505
www.health.maryland.gov/dental

Please mail your completed test, affidavit and a check or a money order in the amount of \$50.00 (non-refundable) made payable to the Maryland State Board of Dental Examiners to the address listed above.

Name _____ Date _____
Address _____ Social Security Number _____
_____ Telephone Number _____

DENTIST – JURISPRUDENCE EXAMINATION – 2022

The successful completion of this examination fulfills the Jurisprudence requirements for the Maryland State Board of Dental Examiners for Dentists. Each question has one correct answer. Circle the letter next to the correct answer. This examination is open book.

1. **It is the responsibility of the licensee to notify the Maryland State Board of Dental Examiners within 60 days of any change of office address.**
 - a. True
 - b. False

2. **In Maryland It is a violation of the dental law to hold oneself out to the public as a specialist in:**
 - a. Implantology
 - b. Cosmetic dentistry
 - c. TMJ therapy
 - d. All of the above
 - e. Answers a. and b. only

3. **An advertisement by a dentist must include:**
 - a. The fee for the service advertised
 - b. The name of a licensed dentist providing the dental services being advertised
 - c. The license number of the dentist providing the dental services being advertised
 - d. The telephone number of a licensed dentist providing the dental services being advertised
 - e. All of the above

- 4. Allowing an individual who does not have a dental license or a dental hygiene license to scale and / or polish teeth may cause the dentist:**
- a. To be charged by the Board with unprofessional conduct and criminally charged with a misdemeanor
 - b. To be charged by the Board with unprofessional conduct and criminally charged with a felony
 - c. None of the above
- 5. You wish to hire an individual to take and expose radiographs in your dental office. The individual is not licensed or certified in another state to take and expose radiographs. For the individual to receive certification in Maryland to take and expose radiographs the individual must:**
- a. Provide to the Board a sworn statement by a Maryland licensed dentist that the individual is competent to place and expose dental radiographs
 - b. Satisfactorily complete the Board approved educational requirements established by the Maryland State Dental Association or the Maryland Dental Society
 - c. Pass an examination administered or approved by the Board for qualifying to place and expose radiographs
 - d. Answers b. and c. only
- 6. Which of the following conditions must be met for a dental hygienist to perform dental hygiene procedures in a private dental office without a dentist on the premises?**
- a. Treatments authorized by the supervising dentist to be provided by the dental hygienist are rendered no later than 7 months from the date the patient was examined and evaluated by the supervising dentist.
 - b. A supervising dentist may not employ more than 2 dental hygienists to work under the dentist's general supervision at any given time
 - c. Written emergency procedures are in place and the dental hygienist is trained to implement the emergency procedures
 - d. In any 3-month period the number of hours a dental hygienist works without a licensed dentist on the premises must be less than 60 percent of the dental hygienist's total hours
 - e. All of the above

7. **There are certain continuing education requirements for each two-year license renewal cycle for dentist to be licensed in the state of Maryland. Which of the following statements is false?**
- a. **Cardiopulmonary resuscitation certification must be continuously maintained and must not expire**
 - b. **Of the required 30 hours, 2 hours must be in infection control. The two hours of infection control count toward the 30 hours**
 - c. **Each licensee must complete a Board-approved course on abuse and neglect as it relates to Maryland law for each four-year cycle**
 - d. **Up to 20 hours of continuing education credit may be earned by self-study activities**
8. **In order to renew a dental or dental hygiene license in 2005 or thereafter, a dentist or dental hygienist must:**
- a. **Complete not less than 30 full hours of clinical continuing education including 2 hours of infection control**
 - b. **Maintain cardiopulmonary resuscitation certification**
 - c. **Provide and document at least 10 hours of pro bono dental services at a facility licensed by either the Maryland Department of Health and Mental Hygiene, or a federally qualified community health care program that provides dental care to the poor, elderly or handicapped**
 - d. **All of the above**
 - e. **Answers a. and b. only**
9. **Records to document continuing education credits are:**
- a. **Forwarded to the Board as credits are earned by the licensee**
 - b. **Maintained by the Secretary/Treasurer of the Board**
 - c. **Maintained by the licensee for five (5) years and made available to the Board upon request**
 - d. **Answers a. and b. only**
10. **You have a patient that is dissatisfied with your services. The patient requests that a copy of their dental records be sent to them. The patient has an undisputed balance due to you of \$100.00.**
- a. **You may withhold providing a copy of the records until the patient pays the balance due**
 - b. **You may withhold providing a copy of the records until the appropriate copying fee is paid**
 - c. **If the records are to be mailed, you may charge the patient for the actual cost for postage and handling**
 - d. **You may not withhold providing a copy of the records for any reason**
 - e. **Answers b. and c. only**

- 20. A dental assistant certified by the Dental Assisting National Board, Inc. (DANB) may perform the following duties under the direct supervision of a dentist:**
- a. Photography (not conventional or digital x-ray)
 - b. Take alginate impressions for study models or diagnostic casts
 - c. Construct athletic mouth guards on models
 - d. All of the above
 - e. None of the above
 - f. Answers a. and c. only
- 21. A dental assistant certified by the Dental Assisting National Board as qualified in general duties may:**
- a. Apply topical anesthesia
 - b. Take alginate impressions for study models or diagnostic casts
 - c. Place and remove a matrix band
 - d. Place and remove a retraction cord
 - e. Polish teeth or restorations
 - f. All of the above
 - g. Answers a., b., c., and d. only
- 22. A dental assistant certified by the Dental Assisting National Board as qualified in orthodontics may:**
- a. Apply topical anesthesia
 - b. Adjust an arch wire
 - c. Prepare a temporary crown
 - d. Place and remove a matrix band
 - e. Remove a suture
 - f. All of the above
 - g. Answers b. and d. only

- 23. A dental hygienist may:**
- a. Perform a preliminary dental examination
 - b. Place subgingival medicaments
 - c. Perform a brush biopsy
 - d. Place and remove a retraction cord
 - e. All of the above
 - f. Answers a., b., and d. only
- 24. The Board may deny a general license to practice dentistry, a limited license to practice dentistry, or a teacher's license to practice dentistry to any applicant, reprimand any licensed dentist, place any dentist on probation, or suspend or revoke the license of any licensed dentist if the applicant or licensee:**
- a. Provides professional services while under the influence of alcohol
 - b. Has had a license to practice dentistry revoked or suspended in any other state
 - c. Uses in connection with the practice of dentistry a business entity name or a trade name that is not authorized by law
 - d. Uses or promotes or causes the use of any misleading, deceiving, or untruthful advertising matter
 - e. All of the above
 - f. Answers a., b., and d. only
- 25. A dental hygienist may own or operate a dental practice or a dental hygiene practice.**
- a. True
 - b. False

MARYLAND STATE BOARD OF DENTAL EXAMINERS

**BENJAMIN RUSH BUILDING • SPRING GROVE HOSPITAL CENTER
55 WADE AVENUE/TULIP DRIVE • BALTIMORE, MARYLAND 21228
PHONE – 410-402-8511 • FAX – 410-402-8505
www.health.maryland.gov/dental**

PLEASE PRINT CAREFULLY. THIS WILL BE USED TO NOTIFY YOU OF YOUR RESULTS

**JURISPRUDENCE EXAMINATION
FROM THE MARYLAND STATE BOARD OF DENTAL EXAMINERS**

NAME _____

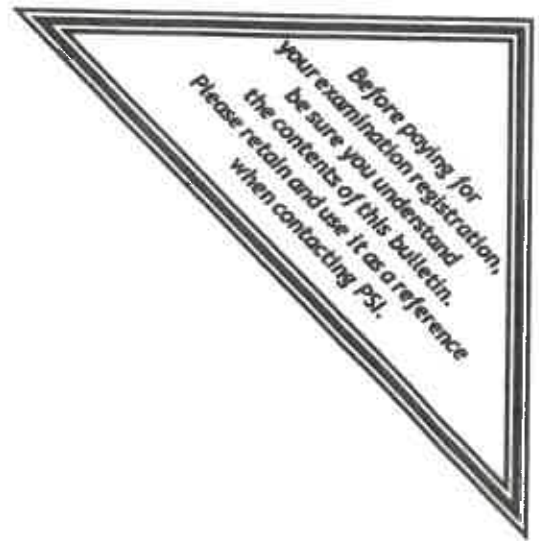
ADDRESS _____

SCORE: _____

PASSED

FAILED

MINNESOTA



PSI Services LLC
 3210 E Tropicana
 Las Vegas, NV 89121
 Phone: (855) 557-0618
 Fax: (702) 932-2666
 E-mail: examschedule@psionline.com
www.psillexams.com

**m1 MINNESOTA
 BOARD OF DENTISTRY**

**JURISPRUDENCE EXAMINATION
 CANDIDATE INFORMATION BULLETIN**

Examinations by PSI Services LLC	2	Required Identification	4
Examination Payment and Scheduling Procedures.....	2	Security Procedures	4
Fees	2	Taking the Examination by Computer	5
On-line, via the Internet Registration	2	Identification Screen	5
Telephone Registration	2	Tutorial.....	5
Fax Registration	2	Test Question Screen.....	5
Email Registration	2	Examination Review	5
Mail Registrations	2	Score Reporting	5
Rescheduling/Canceling an Examination	3	Duplicate Score Reports	5
Re-taking a Failed Examination	3	Non-Scored Questions	5
Missed Appointment or Late Cancellation.....	3	Tips for Preparing for your License Examination	5
Exam Accommodations.....	3	Examination Content Outlines.....	6
Emergency Examination Center Closing	3	Approved Schools	6
Examination Site Locations.....	3	Examination Registration Form.....	7
Reporting to the Examination Site	4	Exam Accommodations Request Form.....	End of Bulletin

Please refer to our website to check for the most updated information at www.psillexams.com

EXAMINATIONS BY PSI SERVICES LLC

This Candidate Information Bulletin provides you with information about the examination process for becoming licensed as a Dental Professional in the State of Minnesota.

All dental professional applicants (dentists, dental hygienists and dental assistants) who are applying for licensure must take and pass the Minnesota Dental Jurisprudence Examination. Additionally, dental assistants must take and pass the Dental Assistant State Licensure Examination.

The Minnesota Board of Dentistry has contracted with PSI Services LLC (PSI) to conduct the examination program. PSI works closely with the Board to make certain that these examinations meet the State's as well as nationally established technical and professional standards for examination development and administration. PSI provides these examinations through a network of computer examination centers in Minnesota.

For licensing information, please contact:

Minnesota Board of Dentistry
University Park Plaza
2829 University Avenue SE, Suite 450
Minneapolis, MN 55414-3249
Phone: 612.617.2250
Fax: 612.617.2260
www.dentalboard.state.mn.us

EXAMINATION PAYMENT AND SCHEDULING PROCEDURES

There are no eligibility requirements to take the Jurisprudence Examination. You may take this examination on an unlimited basis.

Dental Assistants must take both the Dental Assistant Licensure Examination as well as the Jurisprudence Examination. If you choose too, you may schedule all examinations on the same day. [Click here for the Dental Assistant Licensure Examination Candidate Information Bulletin.](#)

EXAMINATION FEES

Jurisprudence Examination \$60

EXAMINATION FEES ARE NOT REFUNDABLE OR TRANSFERABLE. THE EXAMINATION FEE IS VALID FOR ONE YEAR FROM THE DATE OF PAYMENT. THE MINNESOTA BOARD OF DENTISTRY DOES NOT RECEIVE ANY OF THIS FEE.

ONLINE (WWW.PSIEXAMS.COM)

For the fastest and most convenient examination scheduling process, register for your examinations online by accessing PSI's registration Web site at www.psiexams.com. Internet registration is available 24 hours a day.

- Log onto PSI's website and create an account. Please enter your email address and first and last name. This information must match exactly with the information submitted on your application. Be sure to check the box next to "Check here to attempt to locate existing records for you in the system"
- You will be asked to select the examination and enter your SS#. Your record will be found and you will now be ready to pay for and schedule the exam. Enter your zip code and a list of the testing sites closest to you will appear. Once you select the desired test site, available dates will appear. If you have problems, contact PSI at (855) 557-0618 for help.

TELEPHONE REGISTRATION

The second fastest method of registering and scheduling is via the telephone. Call (855) 557-0618 to speak with a live registrar Monday through Friday between 6:30 am and 9:00 pm, and Saturday-Sunday between 8:00 am and 4:30 pm, Central Time.

To register by phone, you need a valid credit card (VISA, MasterCard, American Express or Discover.)

FAX REGISTRATION

Complete the PSI registration form (found at the end of this bulletin), including your credit card number and expiration date. Fax the completed form to PSI at (702) 932-2666. Fax registrations are accepted 24 hours a day.

Please allow 4 business days to process your Registration. After 4 business days, you may go online or call PSI to schedule the examination.

EMAIL REGISTRATION

Complete the PSI registration form (found at the end of this bulletin), including your credit card number and expiration date. Email the completed form to PSI at examschedule@psionline.com. Email registrations are accepted 24 hours a day.

Please allow 4 business days to process your Registration. After 4 business days, you may go online or call PSI to schedule the examination.

STANDARD MAIL REGISTRATION

Complete the PSI registration form (found at the end of this bulletin), and send the form with the appropriate examination fee to PSI. You may pay fees by credit card (VISA, MasterCard, American Express or Discover), company check, money order or cashier's check, made payable to PSI. Print your name in the memo section of the company check, money order or cashier's check so we can ensure the payment is applied to your registration. CASH and PERSONAL CHECKS ARE NOT ACCEPTED.



Please allow PSI 2 weeks to process a mailed registration. After 2 weeks, you may go online or call PSI to schedule the examination.

RESCHEDULING/CANCELING AN EXAMINATION APPOINTMENT

You may cancel and reschedule an examination appointment without forfeiting your fee if your *cancellation notice is received 2 days before the scheduled examination date*. For example, for a Monday appointment, the cancellation notice would need to be received on the previous Saturday. You may call PSI at (855) 557-0618 or use the PSI website.

Note: A voice mail message is NOT an acceptable form of cancellation. Please use the PSI Website or call PSI and speak directly to a Customer Service Representative.

RETAKE A FAILED EXAMINATION

It is not possible to make a new examination appointment on the same day you have taken an examination; this is due to processing and reporting scores. A candidate who tests unsuccessfully on a Wednesday can call the next day, Thursday, and retest as soon as Friday, depending upon space availability. You may access a registration form at www.psiexams.com. You may also call PSI at (855) 557-0618.

MISSED APPOINTMENT OR LATE CANCELLATION

If you miss your appointment, you will not be able to take the examination as scheduled, further you will forfeit your examination fee, if you:

- Do not cancel your appointment 2 days before the scheduled examination date;
- Do not appear for your examination appointment;
- Arrive after examination start time;
- Do not present proper identification when you arrive for the examination.

EXAM ACCOMMODATIONS

All PSI examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990, and exam accommodations will be made in meeting a candidate's needs. A candidate with a disability or a candidate who would otherwise have difficulty taking the examination must follow the instructions on the Exam Accommodations Request Form at the end of this Candidate Information Bulletin.

EXAMINATION SITE CLOSING FOR AN EMERGENCY

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (855) 557-0618. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You will not be penalized. You will be rescheduled at no additional charge.

EXAMINATION SITE LOCATIONS

The following directions are generated from the most current mapping services available. However, new road construction and highway modifications may result in some discrepancies. If you are not familiar with the specific area of the testing site, please consult a reliable map prior to your test date.

DULUTH

416 WEST SUPERIOR STREET
DULUTH, MN 55802

GOING SOUTH ON MESABA, TURN LEFT ON FIRST ST. TURN RIGHT AT N 6TH AVE. TURN LEFT ON SUPERIOR ST. PSI IS LOCATED ON THE RIGHT HAND SIDE ON THE SECOND BLOCK. IT IS HALF A BLOCK DOWN FROM THE DULUTH PUBLIC LIBRARY.

MOORHEAD

819 30TH AVE SOUTH, SUITE 108
MOORHEAD, MN, 56560

FROM I-494 W, MERGE ONTO I-94 W/US-52 N TOWARD ST. CLOUD (KEEP LEFT). TAKE THE US-75 EXIT TOWARD MOORHEAD. TURN LEFT ONTO S 8TH ST. TURN LEFT ONTO S 30TH AVE.

ROCHESTER

3155 SUPERIOR DRIVE NW
ROCHESTER, MN 55901

FROM HIGHWAY 14, GO NORTH ON HIGHWAY 52, EXIT AT 55TH STREET NW TO GO WEST. 55TH STREET NW/COUNTY ROAD 22/WEST CIRCLE DRIVE WILL VEER SLIGHTLY LEFT TURNING INTO 41ST AVENUE NW/COUNTY ROAD 22/WEST CIRCLE DRIVE. WHEN YOU HAVE GONE 2.2 MILES FROM 52 YOU WILL COME TO A TRAFFIC LIGHT AT VALLEYHIGH ROAD NW. TURN RIGHT, THEN TAKE THE FIRST, ALMOST IMMEDIATE LEFT ONTO SUPERIOR DRIVE NW. TAKE THE FIRST RIGHT INTO THE PARKING LOT. THEN TAKE THE SECOND RIGHT SO YOU ARE BEHIND THE UNITS THAT ARE FACING SUPERIOR DRIVE. PSI WILL BE THE SECOND-TO-LAST UNIT ON YOUR LEFT.

WOODBURY

6053 HUDSON RD, SUITE 210
WOODBURY, MN 55125

FROM I-94 GO SOUTH ON CENTURY TO THE FIRST LEFT (WHICH IS THE FRONTAGE ROAD ENTRANCE TO THE COUNTRY INN). ENTER THE OFFICE COMPLEX THROUGH THE ENTRANCE NEXT TO THE GREEN MILL RESTAURANT. 6053 IS THE BUILDING DIRECTLY AHEAD. THE ENTRANCE ON THAT (WEST) SIDE IS ACTUALLY ON THE 2ND FLOOR. SUITE 210 IS DOWN THE CORRIDOR TO THE RIGHT. PLEASE USE THE WEST ENTRANCE ON SATURDAYS.

Only the Jurisprudence Examination may be taken at any of the PSI testing sites throughout the U.S. Please visit our website for a listing of other sites www.psiexams.com.

REPORTING TO THE EXAMINATION SITE

On the day of the examination, you should arrive 30 minutes before your appointment. This extra time is for sign-in, identification, and familiarizing you with the examination process. *If you arrive late, you may not be admitted to the examination site and you will forfeit your examination registration fee.*

All examination sites will provide ear plugs upon request.



REQUIRED IDENTIFICATION

Candidates must register for the exam with their LEGAL first and last name as it appears on their government issued identification. All required identification below must match the first and last name under which the candidate is registered. Candidates are required to bring two (2) forms of valid (non-expired) signature bearing identification to the test site. If the candidate fails to bring proper identification or the candidate names do not match, the candidate will not be allowed to test and their examination fee will not be refunded.

PRIMARY IDENTIFICATION (with photo) - Choose one or two from this list:

- ✎ State issued driver's license
- ✎ State issued identification card
- ✎ US Government Issued Passport
- ✎ US Government Issued Military Identification Card
- ✎ US Government Issued Alien Registration Card
- ✎ Canadian Government Issued ID
- ✎ Unexpired International Passport with photo
- ✎ Consular IDs

NOTE: ID must contain candidate's photo, be valid and unexpired.

SECONDARY IDENTIFICATION - Choose one if two will not be provided from the above list:

- ✎ Credit/Debit Card (must be signed)
 - ✎ Social Security Card
 - ✎ US issued Birth Certificate with Raised Seal
- *NOTE: Student ID and employment ID are **NOT** acceptable forms of identification.

SECURITY PROCEDURES

The following security procedures apply during examinations:

- You will be given a piece of scratch paper and a pencil. These will be returned to the proctor at the end of your examination.
- Candidates may take only approved items into the examination room.
- All personal belongings of candidates should be placed in the secure storage provided at each site prior to entering the examination room. Personal belongings include, but are not limited to, the following items:
 - Electronic devices of any type, including cellular / mobile phones, recording devices, electronic watches, cameras, pagers, laptop computers, tablet computers (e.g., iPads), music players (e.g., iPods), smart watches, radios, or electronic games.
 - Bulky or loose clothing or coats that could be used to conceal recording devices or notes. For security purposes outerwear such as, but not limited to: open sweaters, cardigans, shawls, scarves, vests, jackets and coats are not permitted in the testing room. In the event you are asked to remove the outerwear, appropriate attire, such as a shirt or blouse should be worn underneath.
 - Hats or headgear not worn for religious reasons or as religious apparel, including hats, baseball caps, or visors.
 - Other personal items, including purses, notebooks, reference or reading material, briefcases, backpacks,

wallets, pens, pencils, other writing devices, food, drinks, and good luck items.

- Although secure storage for personal items is provided at the examination site for your convenience, PSI is not responsible for any damage, loss, or theft of any personal belongings or prohibited items brought to, stored at, or left behind at the examination site. PSI assumes no duty of care with respect to such items and makes no representation that the secure storage provided will be effective in protecting such items. If you leave any items at the examination site after your examination and do not claim them within 30 days, they will be disposed of or donated, at PSI's sole discretion.
- Person(s) accompanying an examination candidate may not wait in the examination center, inside the building or on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors.
- No smoking, eating, or drinking is allowed in the examination center.
- During the check in process, all candidates will be asked if they possess any prohibited items. Candidates may also be asked to empty their pockets and turn them out for the proctor to ensure they are empty. The proctor may also ask candidates to lift up the ends of their sleeves and the bottoms of their pant legs to ensure that notes or recording devices are not being hidden there.
- Proctors will also carefully inspect eyeglass frames, tie tacks, or any other apparel that could be used to harbor a recording device. Proctors will ask to inspect any such items in candidates' pockets.
- If prohibited items are found during check-in, candidates shall put them in the provided secure storage or return these items to their vehicle. PSI will not be responsible for the security of any personal belongings or prohibited items.
- Any candidate possessing prohibited items in the examination room shall immediately have his or her test results invalidated, and PSI shall notify the examination sponsor of the occurrence.
- Any candidate seen giving or receiving assistance on an examination, found with unauthorized materials, or who violates any security regulations will be asked to surrender all examination materials and to leave the examination center. All such instances will be reported to the examination sponsor.
- Copying or communicating examination content is violation of a candidate's contract with PSI, and federal and state law. Either may result in the disqualification of examination results and may lead to legal action.
- Once candidates have been seated and the examination begins, they may leave the examination room only to use the restroom, and only after obtaining permission from the proctor. Candidate will not receive extra time to complete the examination.

TAKING THE EXAMINATION BY COMPUTER

The examination will be administered via computer. You will be using a mouse and computer keyboard.

IDENTIFICATION SCREEN

You will be directed to a semiprivate testing station to take the examination. When you are seated at the testing station, you



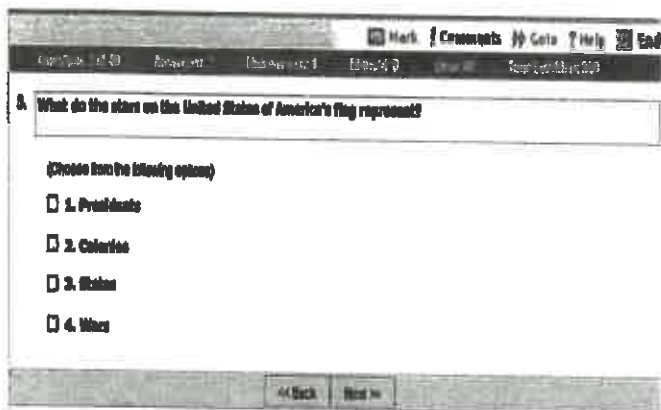
will be prompted to confirm your name, identification number, and the examination for which you are registered.

TUTORIAL

Before you start your examination, an introductory tutorial is provided on the computer screen. The time you spend on this tutorial, up to 15 minutes, DOES NOT count as part of your examination time. Sample questions are included following the tutorial so that you may practice answering questions, and reviewing your answers.

TEST QUESTION SCREEN

The "Function Bar" at the top of the test question provides mouse-click access to the features available while taking the examination.



One question appears on the screen at a time. During the examination, minutes remaining will be displayed at the top of the screen and updated as you record your answers.

IMPORTANT: After you have entered your responses, you will later be able to return to any question(s) and change your response, provided the examination time has not run out.

EXAMINATION REVIEW

PSI, in cooperation with the Board, will be continually evaluating the examinations being administered to ensure that the examinations accurately measure competency in the required knowledge areas. Comments may be entered by clicking the Comments link on the function bar of the test question screen. Your comments regarding the questions and the examinations are welcomed.

Comments will be analyzed by PSI examination development staff. While PSI does not respond to individuals regarding these comments, all substantive comments are reviewed. If a discrepancy is found during the comment review, PSI and the Board may re-evaluate candidates' results and adjust them accordingly. This is the only review of the examination available to you.

SCORE REPORTING

Your score will be given to you immediately following completion of the examination. The following summary describes the score reporting process:



WWW.PSIEXAMS.COM

- If you pass, you will receive a successful score report.
- If you do not pass you will receive a diagnostic report indicating your strengths and weaknesses by examination type on the score report.

DUPLICATE SCORE REPORTS

You may request a duplicate score report after your examination by emailing scorereport@psionline.com or by calling (855) 557-0618.

NON-SCORED QUESTIONS

In addition to the number of examination questions specified in the "Examination Content Outlines", "non-scored" questions may be administered to candidates during the examinations. These questions will not be scored and the time taken to answer them will not count against examination time. The administration of such unscored, experimental questions is an essential step in developing future licensing examinations.

TIPS FOR PREPARING FOR YOUR LICENSE EXAMINATION

The following suggestions will help you prepare for your examination.

- Only consider the actual information given in the question, do not read into the question by considering any possibilities or exceptions.
- Planned preparation increases your likelihood of passing.
- Start with a current copy of this Candidate Information Bulletin and use the examination content outline as the basis of your study.
- Read study materials that cover all the topics in the content outline.
- Take notes on what you study. Putting information in writing helps you commit it to memory and it is also an excellent business practice.
- Discuss new terms or concepts as frequently as you can with colleagues. This will test your understanding and reinforce ideas.
- Your studies will be most effective if you study frequently, for periods of about 45 to 60 minutes. Concentration tends to wander when you study for longer periods of time.

EXAMINATION CONTENT OUTLINES AND STUDY MATERIALS

Jurisprudence Examination
100 Scored Items - 120 Minutes - 80% Correct to Pass
10 Non-Scored Items

Scope - Tests a candidate's knowledge of all Minnesota statutes and rules related to the practice of dentistry, including the

Infection control guidelines established by the Centers for Disease Control.

CONTENT OUTLINE

Subject Area	% Items
Record Keeping	12%
Personal Conduct and Ethical Behavior	6%
General Duties	28%
Infection Controls	26%
Delegation of Duties	28%

References for the Jurisprudence exam

This examination is used for all applicants for Minnesota licensure. Dental, dental therapy, dental hygiene and dental assisting applicants all take the same examination and should study all of the statutes and rules, not just those applicable to a particular profession.

This examination is OPEN BOOK.

Board Statutes and Rules

- Board Administrative Rules 3100.0100 - 3100.9600
- Board Statutes 150A.01 - 150A.31

Board Related Regulations

- Access to Health Records - MN Statutes 144.291-144.298
- Employments Licensed By State - MN Statutes 326.56
- Examining and Licensing Boards MN Stat. 214.001 - 214.40
- Identification of Health Care Providers - MN Statutes 144.6585
- Infection Control Rules - MN Rules 6950.1000 - 6950.1080
- Professional Firms Act - MN Statutes 319B
- Reporting Requirements-Maltreatment of Minors - MN Statutes 626.556
- Reporting Requirements-Maltreatment of Vulnerable Adults - MN Statutes 626.557
- X-Ray Regulations - MN Rules 4732

You can purchase this book and the items listed above at: https://www.mn.gov/publications.com/catalog/21616/laws-rules-extract?Provider_ID=1241868 Under Healthcare: Dentistry.

What is allowed:

- Loose-leaf, spiralbound, or ring-bound copies of the Board Statutes and Rules and Related Regulations will be allowed in the examination room.
- They may be highlighted, underlined, and/or contain notes prior to the examination session.

What is not allowed:

- Candidates may NOT write, highlight, underline, index, or mark the material during the examination session.
- Any additional paper (loose, taped, adhered, stapled, etc.) will NOT be allowed in the examination room.

APPROVED SCHOOLS

Accredited Dental Assisting Programs	Provider Code
Central Lakes College	1001
Century College	1002
Dakota County Technical College	1003
Hennepin Technical College Brooklyn Park	1004
Hennepin Technical College Eden Prairie	1005
Herzing University, Lakeland Academy Division	1006
Hibbing Community College	1007
Minneapolis Community and Technical College	1008
Minnesota State Community & Technical College	1009
Minnesota West Community & Technical College	1010
North Dakota State College of Science	1011
Northwest Technical College	1012
Rochester Community and Technical College	1013
South Central College Mankato	1014
St Cloud Technical and Community College	1015

Accredited Dental Hygiene Programs	Provider Code
Argosy University	1018
Century College	1019
Des Moines Area Community College	1020
Hawkeye Community College	1021
Herzing University	1022
Lake Area Technical School	1036
Lake Superior College	1023
Madison Area Technical College	1024
Metropolitan State University	1037
Milwaukee Area Technical College	1025
Minnesota State Community & Technical College-Moorhead	1026
Minnesota State University, Mankato	1027
Normandale Community College	1028
North Dakota State College of Science	1029
Northcentral Technical College	1030
Northeast Wisconsin Technical College	1031
Rochester Community and Technical College	1032
St Cloud Technical & Community College	1033
University of Minnesota	1034
University of South Dakota	1035





MINNESOTA BOARD OF DENTISTRY EXAMINATION REGISTRATION FORM

Be prepared with the following information before you begin the registration process. Read the Candidate Information Bulletin before filling out this registration form. You must provide all information requested and submit the appropriate fee. Registration forms that are incomplete or not accompanied by the proper fee will be returned unprocessed. Examination fees are not refundable or transferable.

Last Name		Full First Name		Full Middle Name	
Social Security Number			Date of Birth (MO/DATE/YEAR)		
Mailing Address					
Cty		State		Zip Code	
Cell Phone Number (including area code)			Other Phone Number (including area code)		
Email Address				Provider Code (see previous page)	

	Examination Name	Fee
<input type="checkbox"/>	Jurisprudence Examination	\$60.00

EXAMINATION FEES ARE NOT REFUNDABLE OR TRANSFERABLE. THE EXAMINATION FEE IS VALID FOR ONE YEAR FROM THE DATE OF PAYMENT. THE MINNESOTA BOARD OF DENTISTRY DOES NOT RECEIVE ANY OF THIS FEE.

(Check one) First Time Retake

Total Fees included: _____

You may pay by credit card, company check, cashier's check or money order. Make check or money order payable to PSI and note your name on it.

If paying by credit card, check one: VISA MasterCard American Express Discover

Card No: _____ Exp. Date: _____

Card Verification No: _____ *The card verification number may be located on the back of the card (the last three digits on the signature strip) or on the front of the card (the four digits to the right and above the card account number).*

Billing Street Address: _____ Billing Zip Code: _____

Cardholder Name (Print): _____ Signature: _____

Complete and forward this registration form with the applicable examination fee to:

PSI Services LLC * ATTN: Examination Registration MN DENT
3210 E Tropicana * Las Vegas, NV * 89121
Fax (702) 932-2666 * (855) 557-0618 * TTY (800) 735-2929 ** www.psjexams.com



MINNESOTA BOARD OF DENTISTRY EXAM ACCOMMODATIONS REQUEST FORM

All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990.

Applicants with disabilities or those who would otherwise have difficulty taking the examination should request for alternative arrangements by [Clicking Here](#).

Requirements for exam accommodation requests:

You are required to submit documentation from the medical authority or learning institution that rendered a diagnosis. Verification must be uploaded to PSI on the letterhead stationery of the authority or specialist and include the following:

- ☞ Description of the disability and limitations related to testing
- ☞ Recommended accommodation/modification
- ☞ Name, title and telephone number of the medical authority or specialist
- ☞ Original signature of the medical authority or specialist

**MAKE SURE YOU ARE REGISTERED FOR THE EXAMINATION BEFORE
REQUESTING EXAMINATION ACCOMMODATIONS**

NEW MEXICO



INSTRUCTIONS FOR DENTISTS APPLYING FOR LICENSURE BY EXAMINATION - \$600.00 Application Fee

All licensing information provided is public information

On behalf of the New Mexico Dental Health Care Board, we are pleased that you have chosen New Mexico as a place to practice Dentistry.

Please review the rules regarding licensure requirements. If you do not qualify, you will not be granted licensure and you will forfeit your application fee.

If you are a licensed professional applying for licensure by examination, the Board requires a report from B & B Reporting and the National Practitioner Data Bank. These reports must be mailed in with the application. The links for these reports are provided below:

B & B Reporting:

https://bandbreporting.bgsecured.com/c/p/unsolicited_portal?guid=90YnH3OpyP6JD98CdWk9YIpEeb4WNNiR

National Practitioner Data Bank: <https://www.npdb.hrsa.gov/ext/selfquery/SOHome.jsp>

Upon receipt of the attached NM Licensure by Examination application and the required \$600.00 application fee, you will be sent a status letter indicating any missing documentation for the completion of your file. Once all documentation is received your application will be sent to the Board's Application Committee (or designee) for approval. Your license will be issued within three - five working days of the committees' approval.

Applicants with findings by B & B Reporting or National Practitioner Data Bank, (i.e. civil cases, malpractice cases, state discipline, and criminal cases) will be presented to the New Mexico Board of Dental Health Care Application Committee; the committee will make its recommendation regarding the applicant(s) to the New Mexico Board of Dental Health Care at its next regularly scheduled meeting. The New Mexico Board of Dental Health Care meets quarterly throughout the year. *Applicants who go before the New Mexico Board of Dental Health Care should expect a period of approximately three months for a decision (approval/denial).*

Any address or phone number changes must be communicated to the board office in writing by U.S. Mail, fax or e-mail.

If you have any questions about the licensing requirements or process, contact the Board office at (505) 476-4622, by fax (505) 476-4545 or e-mail DentalBoard@state.nm.us

REQUIREMENTS FOR GENERAL PRACTICE LICENSE

- Graduated and received a diploma from an accredited dental school
- Successfully completed the dental national board examination
- Passed a Western Regional Examining Board (WREB), Central Regional Testing Services (CRDTS), Southern Regional Testing Agency (SRTA), or North East Regional Board of Dental Examiners (CDCA/ADEX) clinical examination. Results of the exam are valid in New Mexico for a period not to exceed five years.



- Completion of the NM jurisprudence exam with a score of at least 75%
- Verification of licensure in all states where the applicant holds or has held a license to practice dentistry, or other health care profession. Certification must be sent directly to the office from the other state(s) board, must include a raised seal, and must attest to the status, issue date, expiration date, license number, and other information contained on the form.
- B & B Report
- National Practitioner Data Bank Report

REQUIREMENTS FOR SPECIALTY LICENSE :

The following requirements are in addition to all requirements needed for General Practice Licensure.

- A postgraduate degree or certificate from an accredited dental school or approved residency program in one of the following specialty areas:

- | | |
|---|---------------------|
| Dental Public Health | Oral Pathology |
| Endodontics | Pediatric Dentistry |
| Oral and Maxillofacial Surgery | Periodontology |
| Orthodontics and Dento-Facial Orthopedics | Prosthodontics |

- Passed a WREB, CRDTS, SRTA or CDCA/ADEX specialty examination. Exams are valid in New Mexico for a period not to exceed five years. An applicant in any specialty defined above, where there is no specialty examination may substitute diplomate status for the examination.

DOCUMENTATION REQUIREMENTS FOR ALL APPLICANTS:

- Completed, signed and notarized, original Application (no copies).
- Passport quality photo, taken within the last six months.
- Application fee of \$600 (check or money order) payable to the New Mexico Board of Dental Health Care, the application fee includes the initial licensing period, not to exceed three years. *Application fees are non-refundable.*
- Official transcripts and/or an original letter on letterhead with a raised embossed seal verifying successfully pass all required courses from the dental school or college, to be sent directly to the board office from the accredited program.
- Copy of WREB, CRDTS, SRTA or CDCA/ADEX score card or certificate.
- Copy of national board examination score card or certificate.
- Copy of having taken a course in infection control technique in the past twelve months or must have graduated from dental school within the past twelve months.
- Copy of current Basic Life Support (BLS) or Cardiac Pulmonary Resuscitation (CPR) certification accepted by the American Heart Association or the American Red Cross; cannot be a self-study course.
- Verification of licensure in all states where the applicant holds or has held a license to practice dentistry, or other health care profession. Certification must be sent directly to the office from the other state(s) board, must include a raised seal, and must attest to the status, issue date, expiration date, license number, and other information contained on the form.
- B & B Report.
- National Practitioner Data Bank

Applicants for specialty licensure:

In addition to the documentation required above, an applicant for licensure in a specialty area must provide the following documentation:

- Official transcripts from the residency program and/or postgraduate from an accredited program in one of the specialty areas.
- Copy of WREB, CRDTS, SRTA or CDCA/ADEX specialty examination score card or certificate. If diplomate status, send copy of certificate.





DENTISTRY APPLICATION FOR LICENSURE BY EXAMINATION

I am applying for (check one):

General Dentistry Application, Fee \$600.00

Specialty Practice Application, Fee \$600.00

Please indicate Specialty area: _____

Attach a Passport
Quality Photo Here

Please Write Name
on Back of Photo

****ALL FEES ARE NON-REFUNDABLE ****
****ALL LICENSING INFORMATION IS PUBLIC INFORMATION****

Applications are valid for one year from the date of receipt.

1. PERSONAL INFORMATION					
LAST NAME		FIRST NAME		MIDDLE NAME	SUFFIX
NAME AS YOU WOULD LIKE IT TO APPEAR ON OFFICIAL LICENSE OR CERTIFICATE					
MAILING ADDRESS					
CITY			STATE	ZIP CODE	
PERSONAL PHONE			BUSINESS PHONE		
EMAIL			<input type="checkbox"/> PERSONAL OR <input type="checkbox"/> BUSINESS		
DATE OF BIRTH		PLACE OF BIRTH			
2. BUSINESS INFORMATION:					
PROPOSED BUSINESS NAME (if applicable)					
PROPOSED BUSINESS ADDRESS (if applicable)					
CITY			STATE	ZIP CODE	
PREFERRED MAILING ADDRESS: <input type="checkbox"/> PERSONAL OR <input type="checkbox"/> BUSINESS					
3. LICENSURE INFORMATION: List all states (or countries) in which you are or have been licensed, regardless of status (attach additional pages if necessary):					
STATE/ COUNTRY	OBTAINED BY EXAM/CREDENTIALS/ RECIPROcity	LICENSE NUMBER	FIRST INITIAL ISSUE DATE	LICENSE STATUS	EXPIRATION DATE



F.	Do you have any medical condition that in any way limits impairs or alters your ability to practice dentistry with reasonable skill and safety?	YES	NO
G.	Do you take medications or chemical substances that limits, impairs or alters, in any way, your ability to practice dentistry?	YES	NO
****If answered yes to questions (F) or (G) please answer questions (H) and (I) ****			
H.	Are the limitations or impairments caused by your medical condition reduced or ameliorated because you receive ongoing treatment (with or without medications) or participate in a monitoring program?	YES	NO
I.	Are the limitations or impairments caused by your medical condition reduced or ameliorated because of the field of practice, the setting or the manner in which you have chosen to practice?	YES	NO
J.	Are you currently engaged in the illegal use of controlled and/or dangerous substances?	YES	NO
K.	Are you currently participating in a supervised rehabilitation program or professional assistance program that monitors you in order to assure that you are not engaging in the illegal use of controlled dangerous substances?	YES	NO
L.	Have you ever been licensed in New Mexico?	YES	NO
M.	Have you ever had any disciplinary action taken against any other professional license?	YES	NO

7. Affidavit:

I HEREBY CERTIFY that I am the person described and identified in this application; this application contains no willful misrepresentation; and the information given by me is true and complete to the best of my knowledge and belief.

I further certify I will, upon receipt, read the New Mexico Dental Health Care Act and Rules and fully understand that I bind myself to be governed by them.

STATE OF _____ Signature of Applicant _____ Date _____

COUNTY OF _____

BEFORE ME on this _____ day of _____, 2_____, personally appeared the above-named applicant who, being by my duly sworn upon oath, states that all statements and answers contained in this application are true and correct.

Seal

Notary Public _____

My Commission Expires: _____

All requested information is essential and must be provided. Failure to present a completed application by omitting information sought, having less than a full and complete disclosure, or failure to have the required documentation provided as required in this application, will result in delay or cause return of the application. The board shall neither approve nor deny an application until it is received in proper form, contains the information required by law and as requested by this application. The responsibility for completing the



application is solely that of the applicant. The burden of proof in satisfying the Board that you are entitled to a license as a Dentist is upon you.

*****THE BOARD DOES NOT HAVE THE AUTHORITY TO GRANT A WAIVER OF ANY REQUIREMENT.**

IF THIS APPLICATION IS INCOMPLETE UPON ONE (1) YEAR OF RECEIPT, THE APPLICATION AND SUPPORTING DOCUMENTATION WILL BECOME NULL AND VOID.





**New Mexico Board of Dental Health Care
 Jurisprudence Exam**

Name: _____ **Date:** _____

Special Instructions:

The purpose of this examination is to test the familiarity with the law and rules that govern the practice of dentistry in New Mexico. Your responsibility is to read the entire Dental Health Care Act and the Rules which are Chapter 5, Title 16, of the NM Administrative Code.

The exam may be returned to the Board office with your application or anytime following submission of your application. Exams received prior to the receipt of the application and fees will not be maintained in the Board office.

This is an "open book" exam based on the Dental Health Care Act, the Impaired Dentists and Hygienists Act, and the NM Administrative Code (NMAC), Title 16, Chapter 5, Dentistry (Dentists, Dental Hygienists, ect.)

ALL ANSWERS MUST BE CLEARLY MARKED IN BLUE OR BLACK INK.

Section 1: Matching-Based on the New Mexico Dental Health Care Act, please match the following definitions.

1. ____ General supervision
2. ____ Direct supervision
3. ____ Indirect supervision
 - a. Means a dentist is present in the treatment facility while authorized treatments are being performed by a dental hygienist, dental assistant or dental student.



- b. Means the authorization by a dentist of the procedures to be used by a dental hygienist, dental assistant, expanded function dental auxiliary, community dental health coordinator, or dental student and the execution of the procedures in accordance with the dentist's diagnosis and treatment plan at a time when the dentist is not physically present in the facility.
- c. Means the dentist is physically present throughout the performance of the act; orders, controls, and accepts full responsibility; evaluates and approves the procedure performed before the patient departs the dental setting.

Section 2: Multiple Choice-Please circle the letter for the correct answer.

- 4. A Community Health Care Coordinator, under the general supervision of a dentist, is certified to provide:
 - a. Dental education
 - b. Limited palliative care
 - c. Will typically work in settings other than the traditional dental offices and clinics
 - d. All the above

- 5. The purpose of the New Mexico Board of Dental Health Care includes all but the following, except:
 - a. Issue licenses to qualified dentists, owners of dental practices, and dental hygienists
 - b. Negotiate financial disputes/complaints between a patient and the dentist
 - c. Discipline incompetent dentists or unprofessional dentists
 - d. Certify qualified dental assistants, expanded function dental auxiliaries, and community dental health coordinators

- 6. Certified Expanded Function Dental Auxiliaries scope of practice as allowed under the direct supervision of a dentist includes all but the following, except:
 - a. Place and shape restorative materials



- b. Impress for permanent fixed or removable prosthodontics for single teeth
 - c. Impress for permanent fixed or removable prosthodontics for multiple teeth
 - d. Cement permanent or provisional restorations with temporary cement provided a dentist will monitor the patient within six months.
7. Continuing education requirements for dentists per triennial period include all but the following, except:
- a. Sixty hours total CE credits
 - b. Proof of an Infection Control course
 - c. Maximum of 30 hours CE credits may be online webinars or internet self-study
 - d. 10 hours of CE credits for all levels of sedation permits including courses in medical emergencies, anesthesia, and/or pharmacology
 - e. Proof of Basic Life Support course certification by the American Heart Association (AHA) or American Safety and Health Institute (ASHI)
8. As related to Non-Dentist Owners, all the following are true, except:
- a. Shall be a United States citizen or legal US resident with a valid social security number
 - b. Shall be a resident of New Mexico or a corporation registered in New Mexico
 - c. The owner/agent must pass the New Mexico Jurisprudence exam with 75% or better
 - d. Shall not be responsible for reporting adverse events or actions
9. Prerequisites for a Community Dental Health Coordinator Certification (CDHC) include all the following, except:
- a. Applicant must have a degree in a dental-related field
 - b. High school diploma or equivalent and/or college degree
 - c. Successful completion of a Board-approved CDHC program



- d. Certification by the Board in radiography, coronal polishing, and fit and fissure sealants
10. All the following are required for proper advertising by a dentist on promotional material, except:
- a. Dentist's name/s
 - b. License number
 - c. Only Board-recognized Specialty designation, if applicable
 - d. Office address and telephone number
11. A dentist may be disciplined (to include license revocation, suspension, fines, stipulation, or limitation of license) if found guilty of all the following, except:
- a. Violation of the Controlled Substances Act
 - b. Failure to use appropriate infection control techniques and sterilization procedures
 - c. Failure to report to the Board any adverse action taken by a licensing board, peer review body, or malpractice carrier
 - d. All of the above
12. The following vital sign is NOT required to be recorded in the patient's chart when nitrous oxide analgesia is administered:
- a. Temperature
 - b. Pulse
 - c. Respirations
 - d. Blood pressure

Section 3: True or False-Please mark T or F:

13. The definition of "palliative care" as it relates to the Community Dental Health Care Coordinator (CDHC) scope of care includes nonsurgical, reversible procedures that are meant to alleviate pain and stabilize acute or emergent problems. _____



14. According the Rules, license renewal must be postmarked by July 1st to avoid working illegally under an expired license. _____
15. “Cosmetic Dentistry” is a recognized Board specialty in New Mexico. _____
16. Dental Hygienists in New Mexico may work as collaborative practice hygienists only with a written agreement with a collaborative dentist. _____
17. A dental assistant with a C.D.A. certificate from Dental Assisting National Board (DANB) does not require expanded function dental assistant certification from the Dental Board. _____
18. Universal barrier precautions are mandatory in all dental care settings. _____
19. The minimal requirement for all dentists and auxiliary personnel who monitor the use and administration of nitrous oxide is Advanced Life Support certification. _____
20. A Non-Dentist Owner must post all of the dental employees’ names, licenses, and the Non-Dentist Owner’s name in a prominent location in the dental office. _____
21. Licensees must maintain proof of their continuing education courses for two years following their triennial renewal year. _____
22. Study clubs are an avenue to obtain continuing education credits, but have specific organizational requirements. _____
23. The Department of Health provides the Board of Dental Health Care with recommended practice restrictions following evaluation of providers with transmissible blood-borne diseases. _____
24. A dentist who wishes to retire their license must request retirement status in writing to the Board office prior to the expiration of the current license. _____



25. Tele-dentistry is an allowable form of communication between a supervising dentist and a Community Dental Healthcare Coordinator. _____
26. The Expanded Function Duty Auxiliary may shape and prepare a preparation using an automated method such as a slow speed. _____
27. A Temporary/Public Service dental license can be granted upon request to those who meet the Board's approved qualifications for charitable work, clinical education, and public health service in New Mexico. _____
28. Dental Assistants can take X-rays without a Board-issued Dental Radiography certification. _____
29. In New Mexico, before a dentist can administer Botox or dermal fillers, a dentist must receive a minimum of 16 hours of continuing education, of which, 8 hours shall be on live patients. _____
30. Dental Assistants that place and shape restorative material require an Expanded Function Duty Auxiliary certification. _____
31. A dental assistant may utilize dental lasers with proper supervision. _____
32. Hygienists may perform local anesthesia under general supervision with proper certification. _____
33. Starting in 2014, all dentists applying for triennial renewal are also required to report the following: pain management course completion (3 hours) and amalgam separator information in addition to CE course information. _____
34. Applications for dental licensure are valid for six months from the date of receipt. _____



OHIO

DENTAL EXAMINATION

ON THE DENTAL PRACTICE ACT

STATUTES AND REGULATIONS CHAPTER 4715. OF THE OHIO REVISED AND ADMINISTRATIVE CODES

INSTRUCTIONS

- 1. Fill in your name, (Last Name, First Name) in the squares provided in the top left-hand corner of the answer sheet.*
- 2. Select the most correct answer and fill in the corresponding space on the answer sheet.*

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (1) The Ohio State Dental Board is:
- (a) A branch of the Ohio Dental Association
 - (b) A branch of the Ohio Department of Health.
 - (c) An Ohio governmental regulatory agency.
 - (d) An Agency of the American Dental Association.
 - (e) An agency of the Occupational Safety and Health Administration.
- (2) The purpose of the Ohio State Dental Board is to:
- (a) Examine and license dentists and dental hygienists.
 - (b) Formulate rules and regulations governing dentistry in Ohio.
 - (c) Enforce the laws and rules governing dentistry and dental hygiene in Ohio.
 - (d) Protect the citizens of the State of Ohio by enforcement of the Dental Practice Act.
 - (e) All of the above.
- (3) Each person who is licensed to practice dentistry in Ohio shall register with the Ohio State Dental Board:
- (a) On or before the last day of December in any even-numbered year.
 - (b) Upon receiving a letter from the Treasurer.
 - (c) On or before the first day of January of each even-numbered year regardless of initial issuance of the license.
 - (d) To pay continuing education fees for required coursework.
 - (e) None of the above.
- (4) Licensed dentists must notify the Ohio State Dental Board in writing within ____ days concerning any change in employment office address.
- (a) 7
 - (b) 10
 - (c) 15
 - (d) 30
 - (e) At the time of license renewal.
- (5) In order to renew a dental license the licensee must complete:
- (a) 10 hours of continuing education annually.
 - (b) 20 hours of continuing education biennially.
 - (c) 20 hours of continuing education annually.
 - (d) 40 hours of continuing education biennially.
 - (e) None of the above.

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (6) A dentist-employer can have a maximum of ___ currently certified expanded function dental auxiliary(s) practicing at one time under his/her supervision.
- (a) 1
 - (b) 2
 - (c) 3
 - (d) 4
 - (e) 5
- (7) A dental hygienist licensed to practice in Ohio may perform the following intraoral procedures:
- (a) Removal of calcareous deposits or accretions from the crowns and roots of teeth.
 - (b) Periodontal scaling, root planing, soft tissue curettage.
 - (c) Sulcular placement of prescribed materials.
 - (d) Placement of sealants.
 - (e) All of the above.
- (8) A licensed dentist may not delegate which remediable intra-oral task and/or procedure?
- (a) Preliminary selection and sizing of orthodontic bands and arch wires.
 - (b) Checking for and removal of loosened orthodontic bands and arch wires
 - (c) Cementation of orthodontic bands and/or bonding of orthodontic brackets.
 - (d) Placement and removal of orthodontic separators and ties (steel and elastomeric)
 - (e) Placement and removal of orthodontic arch wires, auxiliary arch wires, and ligation of same to orthodontic bands and/or brackets.
- (9) The following tasks and/or procedures can be delegated by a licensed dentist to either basic qualified personnel or expanded function dental auxiliary:
- (a) Laser retraction of the gingival sulcus prior to direct or indirect impression technique.
 - (b) Final impressions of any tissue-bearing area, whether it be hard or soft tissue, upon which a prosthetic restoration is to be placed.
 - (c) Occlusal registration procedures for any prosthetic restoration, whether it be fixed or removable.
 - (d) Subgingival scaling of teeth.
 - (e) None of the above.

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (10)** In order to practice while the dentist is not physically present, the Ohio licensed dental hygienist must:
- (a)** Successfully complete a 4-hour Board-approved course in identification and prevention of medical emergencies.
 - (b)** Have a current cardiopulmonary resuscitation (CPR) certificate.
 - (c)** Have proof of practice as a dental hygienist for at least one year and fifteen hundred hours.
 - (d)** Comply with written protocols or written standing order that the supervising dentist establishes.
 - (e)** All of the above.
- (11)** A dentist who decides to prescribe or dispense an opioid analgesic, benzodiazepine, or other reported drug, shall take the following steps prior to issuing a prescription/dispensing:
- (a)** Review and document in the patient record the reasons why the prescription is needed.
 - (b)** Check OARRS before prescribing/dispensing.
 - (c)** Review the patient's medical history.
 - (d)** Consider the use of non-narcotic alternatives for pain control.
 - (e)** All of the above.
- (12)** What percentage of continuing education for dental license renewal can be obtained in a directly interactive presentation format?
- (a)** 10%
 - (b)** 20%
 - (c)** 50%
 - (d)** 75%
 - (e)** 100%
- (13)** A valid receipt, voucher, or certificate of completion of a continuing education program or offering must include the following information:
- (a)** Names(s) of the sponsor and instructor(s).
 - (b)** Course title.
 - (c)** Number of credit hours of acceptable continuing education credit.
 - (d)** Date and location of continuing education offering.
 - (e)** All of the above.

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (14) A licensed dentist may be awarded continuing education hours for “volunteer service as a clinician” through an approved program during any given biennium.
- (a) True
 - (b) False
- (15) A dentist-employer may delegate coronal polishing to the following dental auxiliary personnel:
- (a) An unlicensed dental hygienist who is a graduate of an accredited dental hygiene program, has completed training in advanced remediable intraoral dental tasks and/or procedures, and is awaiting Board licensure.
 - (b) An unlicensed dentist who is a graduate of an accredited dental school and is awaiting Board licensure.
 - (c) A currently certified dental assistant, who has completed a 7-hour Board-approved training program in coronal polishing, successfully passed a standardized test, and received a Board-approved certificate to perform coronal polishing.
 - (d) All of the above.
 - (e) None of the above.
- (16) A currently certified dental assistant is not required to provide evidence of the following in order to apply for a dental assistant radiographer certificate?
- (a) Evidence of good moral character (FBI background check).
 - (b) Successful completion of a 7-hour Board-approved course in dental radiography.
 - (c) Immunity to or inoculation against the Hepatitis B virus.
 - (d) a and b.
 - (e) b and c.
- (17) No dentist shall employ or use conscious sedation unless such dentist possesses a permit of authorization based on evidence showing that he/she:
- (a) Has satisfactorily completed training in conscious sedation, which included a minimum of sixty hours of didactic instruction and twenty cases of clinical experience.
 - (b) Has a properly equipped facility with emergency equipment and drugs.
 - (c) Maintains a permanent address within the State of Ohio where he/she conducts business.
 - (d) Maintains successful completion of an Advance Cardiac Life Support (ACLS) course or its age appropriate equivalent, Pediatric Advanced Life Support (PALS).
 - (e) All of the above.

- (18) Dentists who do not hold a Board-approved conscious sedation permit cannot prescribe or administer oral sedation to patients who:
- (a) Are unable to continuously maintain an airway.
 - (b) Are 12 years or younger.
 - (c) Have had a single drug or combination of drugs administered concomitantly orally or sublingually at one time on a given treatment day but require an increased dosage in order to obtain a sufficient level of sedation or anxiolysis.
 - (d) Have not completed a current health history.
 - (e) All of the above.
- (19) An anesthesia permit is required to administer all of the following except:
- (a) Propofol.
 - (b) Parenteral ketamine.
 - (c) Nitrous oxide/oxygen.
 - (d) Ultra-short acting barbiturates.
 - (e) None of the above.
- (20) A supervising dentist may not have more than ____ currently certified dental assistants holding Board-approved coronal polishing certificates practicing at one time under his/her supervision.
- (a) 1
 - (b) 2
 - (c) 3
 - (d) 4
 - (e) 5
- (21) A dental hygienist may provide dental hygiene services to a patient when the supervising dentist is not present if the following requirements are met:
- (a) The dental hygienist has at least one thousand hours of clinical experience.
 - (b) The dental hygienist has completed a Board-approved course in the identification and prevention of medical emergencies.
 - (c) The patient of the dental hygienist has been examined by the supervising dentist not more than two years prior to the appointment.
 - (d) The dental hygienist is certified to administer local anesthesia.

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (22) Which of the following are grounds for disciplinary action?
- (a) Selling, prescribing, giving away, or administering drugs for other than legal and therapeutic purposes.
 - (b) Failure to use universal blood and body fluid precautions.
 - (c) Waiving the payment of all or any part of a health insurance deductible or copayment for a patient.
 - (d) Conviction of a misdemeanor committed in the course of practice or of any felony.
 - (e) All of the above.
- (23) Which of the following dental personnel are required to provide evidence of immunity to or inoculation against the Hepatitis B virus?
- (a) Dentists.
 - (b) Dental hygienists.
 - (c) Dental assistant radiographers.
 - (d) Certified dental assistants with Board-approved coronal polishing certificates.
 - (e) All of the above.
- (24) Heat sterilization devices must be tested for proper function on a ____ basis by means of a biological monitoring system.
- (a) Daily.
 - (b) Weekly.
 - (c) Bi-monthly.
 - (d) Monthly.
 - (e) Quarterly.
- (25) A dental assistant may assist the licensed dentist in all the following except:
- (a) The concurrent performance of supportive procedures.
 - (b) The administration of drugs and medications.
 - (c) The administration inhalation anesthetic agents, including nitrous oxide.
 - (d) The parenteral injections of drugs and local anesthetic agents.
 - (e) All of the above.

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (26) Which of the following are not required infection control barrier techniques?**
- (a) Chin length face shields or masks.**
 - (b) Eyewear with protective side shields.**
 - (c) Gowns.**
 - (d) Disposable gloves.**
 - (e) None of the above.**
- (27) Which of the following items does not need to be heat sterilized between patients?**
- (a) Disposable prophylaxis cups.**
 - (b) Surgical instruments.**
 - (c) Air-water syringe tips.**
 - (d) All hand and orthodontic instruments.**
 - (e) None of the above.**
- (28) The following intra-oral procedures can be delegated to basic qualified personnel (BQP) except:**
- (a) Aspiration and retraction, excluding placement of gingival retraction materials.**
 - (b) Pulp testing.**
 - (c) Suture removal.**
 - (d) Caries susceptibility testing.**
 - (e) Placement of rubber dam clamp.**
- (29) The following intra-oral procedures can be delegated to expanded function dental auxiliary (EFDA) personnel except:**
- (a) Placement of sealants.**
 - (b) Administration of nitrous oxide-oxygen.**
 - (c) Application of topical anesthetics.**
 - (d) Placement and removal of orthodontic arch wires, auxiliary arch wires, and ligation of same to orthodontic bands and/or brackets.**
 - (e) Placement of non-metallic restorative materials, including direct bonded restorative materials.**

DENTAL EXAMINATION ON THE DENTAL PRACTICE ACT

- (30) When prescribing or personally furnishing a reported drug or controlled substances in schedules II, III, IV and V, the dentist shall take into account all of the following except:
- (a) The potential for abuse of the reported drug
 - (b) The possibility that use of the reported drug may lead to dependence
 - (c) The possibility the patient will obtain the reported drug for nontherapeutic use
 - (d) That the dentist does not want to be bothered with phone calls of persistent pain from the patient
 - (e) The potential existence of an illicit market for the reported drug.
- (31) A dentist who has graduated, but has not completed the requirements for licensure in the State of Ohio, may legally practice as a/an ____ under the supervision of a licensed dentist.
- (a) Dental assistant radiographer.
 - (b) Dental hygienist.
 - (c) Expanded function dental auxiliary.
 - (d) Basic qualified personnel (BQP).
 - (e) Certified dental assistant holding a Board-approved coronal polishing certificate.
- (32) A dental assistant may take x-rays for ____ after completing the didactic portion of the 7-hour initial training course for dental assistant radiography before he/she must be licensed by the Board.
- (a) 15 days
 - (b) 30 days
 - (c) 60 days
 - (d) 90 days
 - (e) As long as they want until they get it right.
- (33) Use of hand hygiene is acceptable under the following conditions:
- (a) Before and/or after patient contact.
 - (b) When hands are visibly soiled.
 - (c) After removing gloves that are torn, cut or punctured.
 - (d) Before leaving the dental operatory or laboratory.
 - (e) All of the above.

OVERVIEW

CE Broker works with more than 130+ licensing agencies in 23 US states to serve over 3 million licensed professionals with a modern, paperless method to track and report CE requirements for State Licensure Renewals.

Desired Impact

1. Provide Board Staff with an efficient, digital method to access CE documents and proof of competency in the event of an audit, as well as a paperless platform for application approvals.
2. Work with Nationally Accredited & State Approved Educational Providers to collect completion records, for use in audits by staff members of the **Virginia Board of Dentistry**.
3. Provide all licensed professionals with **free accounts** to digitally report, manage, monitor, and submit records in accordance with State Requirements.
4. Provide Educational Providers with a suite of free tools to manage accredited offerings, and directly report attendance data & course completions for verification of CE activity.

Easing the Burden of Regulation & Reporting

CE Broker was developed to streamline the reporting process for license holders, while providing regulatory boards with an efficient method of verifying CE Compliance. Our platform has been shown to dramatically increase compliance rates, by making competency requirements clear and easy to understand for license holders, while our dedicated support team simultaneously helps spread awareness of renewal requirements, reducing the volume of CE-support related requests to agencies across the country.

Proven Success in Dentistry

CE Broker has been utilized by a growing number of boards of dentistry throughout the country including the states of Florida, Tennessee, South Carolina, Michigan, Louisiana, and Kentucky.

No-Cost Solution

Our platform is independently funded through voluntary services for educational providers and subscription services for licensed professionals. There are **no costs** to the regulatory Board for implementation, support, or customization pertaining to CE Requirements. Additionally, Licensed Professionals and Educational Providers have access to an entire suite of tools for complete CE Management without any mandatory cost or fees. Arguably the most popular feature is our **free mobile app** to snap and report CE, search for courses, view compliance status-manage everything on the go!