<table>
<thead>
<tr>
<th>TIME</th>
<th>Agenda Item</th>
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<tbody>
<tr>
<td>9:00 AM</td>
<td>Call to Order - James D. Watkins, DDS, Chair</td>
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<td>Evacuation Announcement - Ms. Jamie C. Sacksteder</td>
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<td>• November 22, 2019</td>
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<td>Compensatory Scoring - Ms. Jamie C. Sacksteder</td>
<td>Page 8</td>
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<td>• Draft language for regulations: compensatory scoring and passing all sections of exam</td>
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<td>Clinical Definitions - Ms. Jamie C. Sacksteder</td>
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<td>• Draft language for regulation: The term clinical</td>
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<td>Lawsuits regarding Exam Requirements - Ms. Jamie C. Sacksteder</td>
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<td>Exam Cycles - Ms. Jamie C. Sacksteder</td>
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<td>Next Meeting</td>
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ADJOURN
PERIMETER CENTER CONFERENCE CENTER EMERGENCY
EVACUATION OF BOARD AND TRAINING ROOMS

(Script to be read at the beginning of each meeting)

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound.

When the alarms sound, leave the room immediately. Follow any instructions given by security staff.

**Board Room 1**
Exit the room using one of the doors at the back of the room. (Point) Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

**Board Room 2**
Exit the room using one of the doors at the back of the room. (Point) Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

You may also exit the room using the side door (Point), turn **RIGHT** out of the door and make an immediate **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

**Board Rooms 3 and 4**
Exit the room using one of the doors at the back of the room. (Point) Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

**Training Rooms 1 and 2**
Exit the room using one of the doors at the back of the room. (Point) Upon exiting the room, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.
Jamie,

As you know I will be returning from my vacation St Maarten on Friday Jan 31st and will not be able to attend the Exam Committee Meeting. I was not sure is it is permissible to “reply all” to include the other Board members so I sent this e-mail to only you.

I wanted to comment on the definition of the term “clinical”. After reviewing the attached document and e-mail comments from the Board staff, I would lobby that the simplest definition with the least wording might be a best approach. The New Hampshire definition is very current (2020) which suggests the New Hampshire Board has made a change in the definition from some prior definition. The definition looks very simple and would therefore permit a rather broad “term definition” that might apply to many different situations. I took the list of “situations” listed as potential areas that would need to be changed if the Virginia Regulations if the definition of “clinical” is changed. The New Hampshire definition would seem to work for each of those instances.

I suggest that the definition of “clinical” be written to mean: “having to do with the direct observation and treatment of patients.

This definition is simple and broad enough to apply to many “regulation” situations. The definition is the same as New Hampshire has adopted in 2020, which is the most current “date” in the research. The definition also conforms to the Mosby Dental Dictionary dated 1998.

If possible please convey my comments to the Board for discussion.

Best,

Perry

Perry E. Jones, DDS
TIME & PLACE: The meeting of the Examination Committee ("Committee") was called to order at 9:02 a.m., on November 22, 2019, at the Department of Health Professions, 9960 Mayland Drive, Suite 201, Board Room 4, Henrico, Virginia 23233.

PRESIDING: James D. Watkins, D.D.S., Chair

COMMITTEE MEMBERS PRESENT: Patricia B. Bonwell, RDH, PhD
Perry E. Jones, D.D.S.

COMMITTEE MEMBERS ABSENT: Nathaniel C. Bryant, D.D.S.
Jamiah Dawson, D.D.S.

BOARD MEMBERS PRESENT: Augustus A. Petticolas, Jr., D.D.S., Board President

STAFF PRESENT: Sandra K. Reen, Executive Director
Jamie C. Sacksteder, Deputy Executive Director
Kathryn Brooks, Executive Assistant

COUNSEL PRESENT: James E. Rutkowski, Assistant Attorney General

GUESTS PRESENT: Richard D. Archer D.D.S., MS/VCU School of Dentistry
Robert B. Hall, Jr., D.D.S./SRTA
Conrad McVea, III, D.D.S./CITA and ADEX

ESTABLISHMENT OF A QUORUM: With three members of the Committee present, a quorum was established.

Ms. Reen read the emergency evacuation procedures.

PUBLIC COMMENT: There were no public comments at this meeting.

APPROVAL OF MINUTES: Dr. Watkins asked if there were corrections to the draft minutes. Hearing none, Dr. Bonwell moved to accept the August 10, 2018 minutes as presented. The motion was seconded and passed.
**REVIEW OF EXAM COMPONENTS:**

Ms. Sacksteder reviewed the current components of each of the 5 testing agencies’ clinical exams accepted by the Board.

**LICENSING REQUIREMENTS:**

Ms. Sacksteder provided Chart 16 from the AADB 2019 Composite which reports on the examinations each state requires or accepts for initial licensure for reference.

**DISCUSSION OF CLINICAL EXAMINATIONS**

Dr. Watkins stated the Committee was charged with discussing acceptance of non-patient based clinical exams. He asked the guests to share their insights on this topic beginning with Dr. Archer.

**Dr. Archer** said the ADEX exam is administered at VCU. Using a slide presentation, he explained the school’s Curriculum Integrated Format, which allows exams to be taken at times that are appropriate to the curriculum; assures testing with patients of record at the School; and assures that follow up care is available. He also described a simulated Class 3 artificial tooth, he reported that the ADA has developed the DLOSCE portfolio exam; ADEA is developing a similar exam; and ADEX is working on a restorative simulated patient exam. Dr. Archer responded to questions about testing done by VCU and how those results translate to the third party exams by stating he believes third party evaluations are important to protect the public. He added that he expects having a reliable, fully simulated exam would take about five more years. His advice was to stay with the current process until a fully simulated exam is available.

**Dr. McVea** gave his examining background, and then complimented VCU students for consistently scoring well above average. He expressed concern about differences in scoring across the testing agencies and discussed his concern with compensatory scoring. He expects the ADEX exam will be computer based in the next seven years. He said faculty are in a difficult situation regarding poor
performing students and independent testing is needed to protect the public. He indicated that ADEX is the closest to being a national exam. He agreed with Dr. Archer that the current process needs to be followed until a computer-based exam is available. Dr. McVea said that moving to manikin-based exams would bring forth more life-like teeth. He responded to a question about not requiring an exam, saying New York’s PGY1 requirement has had poor results due to the lack of clinic based residencies. In response to another question, Dr. McVea explained why it could be dangerous for one professional advocacy group to control every aspect of dentistry.

Dr. Hall noted that he is a former member of the Board and has been active in SRTA since 2008. He provided copies of SRTA’s 2020 Dental and Dental Hygiene Candidate Manuals and utilized a slide presentation. He then addressed the non-patient based and patient based sections of the hybrid Dental exam and the pass rates. He said a computer based para-oral exam to screen for cancer should be available soon. He provided and described the simulated teeth used by SRTA. He then described SRTA’s work with West Virginia University on a patient-less mock board. In response to questions, Dr. Hall replied that teeth are securely locked and addressed automatic failures. He added that mock board exams are essential to verifying that required hand skills have been acquired.

Dr. Watkins said the Committee’s charge is to clarify the exams that will be accepted by this Board. Dr. Petticolas asked each guest for their advice. In response, Dr. McVea said the Board should become a member of the agency administering the exam to voice their opinions and see what is coming down the pipeline. Ms. Reen noted that the Board is a member of ADEX and SRTA. Then Dr. Hall said the Board is welcome to tell SRTA what it wants in the exams, and SRTA will deliver. Dr. McVea stated that ADEX is operating at a national level, so no state-by state changes
occur. In response to a question about ADEX voting practices, Dr. McVea said voting begins in a committee and then the full committee votes. In response to another question, all three guests said that calibration exercises insure consistency in exam administration.

Hearing no more questions, Dr. Watkins thanked the guests for their participation.

**DISCUSSION:**

Dr. Watkins called for discussion of what exams should be accepted by the Board.

Dr. Jones moved to remove the patient clause from the exam requirement. The motion was seconded. Topics raised in discussion of the motion included:

- concern about WREB’s use of compensatory scoring;
- having a transition period for acceptance of patient-less exams;
- needing to address equivalency in accepted exams and requiring passage of all parts;
- the proposed regulations and the Board’s Guidance document addressing examinations were withdrawn during the September board meeting;
- defining the term “clinical” to include live patient and manikin exams;
- need information on how patient management is addressed in a patient-less exam;
- having staff develop proposed language that is progressive and inclusive of patient-less exams;
- changing the current statutory language “completed a clinical examination acceptable to the Board”
- the current regulatory language “clinical competency examination that is accepted by the Board”
- researching language used by other states to accept non-patient exams; and
the word “clinical” is not defined in statute or regulation.

Dr. Jones modified his motion to state, “recommend to the Board accepting patient-less exams as an option in Virginia.” Dr. Petticolas agreed to the modification. The motion passed as amended. Staff were tasked with providing guidance on the topics discussed and on implementing this policy change at the next Committee meeting.

Dr. Watkins asked staff to bring the pertinent statutes and regulations on this matter to the Board Meeting.

**NEXT MEETING:**

Ms. Reen said staff would poll Committee members to set the next meeting date.

**ADJOURNMENT:**

With all business concluded, the meeting was adjourned at 12:36 p.m.

__________________________________  __________________________
James D. Watkins, D.D.S., Chair        Sandra K. Reen, Executive Director

__________________________________  __________________________
Date                                  Date
Compensatory Scoring

A compensatory scoring system combines scores on two or more testing tools in such a way that high performance on one tool will balance lesser performance on the other tool and vice-versa. The scores are averaged, or combined, using a weighted average (IOS Solutions, 2020).

Dental Exams that utilize Compensatory Scoring

- Central Regional Dental Testing- CRDTS
- Western Regional Examining Board- WREB

CRDTS- Compensatory Scoring

The examination scoring system was developed in consultation with three different measurement specialists; the scoring system is criterion-based and was developed using an analytical model. The examination is conjunctive in that its content is divided into separate Parts containing related skill sets and competence must be demonstrated in each one of the Parts. A compensatory scoring system is used within each Part to compute the final score for each Part, as explained below.

Only State Boards of Dentistry are legally authorized to determine standards of competence for licensure in their respective jurisdictions. However, in developing the examination, CRDTS has recommended a score of 75 to be a demonstration of sufficient competence; and participating State Boards of Dentistry have agreed to accept that standard. In order to achieve “CRDTS status” and be eligible for licensure in a participating state, candidates must achieve a score of 75 or more in each Part of the examination. (Central Regional Dental Testing, 2020)

WREB- Compensatory Scoring

Operative, Endodontics, Prosthodontics, and Comprehensive Treatment Planning (CTP): These sections are scored based on a Rating Scale of 1 to 5 where a final score of three (3.00) or higher is required to pass. The value of three (3.00) is defined to reflect minimally competent performance for all scoring
criteria, and can be interpreted as corresponding to 75% in states where the passing level is legislated as 75%. The Operative, Endodontics, Prosthodontics, and CTP sections are rated independently by three Grading Examiners. Candidates receive the median (or middle) rating of the three ratings assigned by the Grading Examiners for each category. Median Examiner ratings are multiplied by assigned category weights. Weighted ratings (less any deductions) are added to obtain the score for the Endodontic Section. For Operative, Prosthodontics, and CTP, weighted ratings (less any deductions) are added to obtain scores for each procedure or patient case, and then averaged to obtain the overall section score. Criteria definitions for rating scales, category weights, possible deductions, and other scoring details are available on pgs. 48-49, 73-74, and 94-95. Using the median rating precludes excessive influence by an Examiner whose opinion, in rare cases, may vary greatly from the consensus of the other two. For instance, if the three Grading Examiners assigned a 5, a 4 and a 1, the rating would be 4. Any procedure that is not brought to final completion will receive no points. (Western Regional Examining Board, 2020)

**Proposed Language for regulation regarding compensatory scoring:**

- Has passed a clinical examination acceptable to the board by at least 80 percent without compensatory scoring, which included passage of each of these components:

  (A) Endodontics, including access opening of a posterior tooth and access, canal instrumentation, and obturation of an anterior tooth;

  (B) Fixed prosthodontics, including an anterior crown preparation and two posterior crown preparations involving a fixed partial denture factor;

  (C) Periodontics, including scaling and root planing

  (D) Restorative, including a class II amalgam or composite preparation and restoration and a class III composite preparation and restoration

- Need to think about when the regulation will take effect and take into consideration those who may have already taken another exam.
States that specifically address Compensatory Scoring

North Carolina:

21 NCAC 16B .0303 BOARD APPROVED EXAMINATIONS

(a) All applicants for dental licensure shall achieve a passing score of at least 80 percent on the Board's sterilization and jurisprudence examinations. Applicants may take reexamination in accordance with Rule .0317 of this Section.

(b) All applicants for dental licensure shall achieve passing scores on the examination administered by the Joint Commission on National Dental Examinations and clinical examinations administered by Board approved testing agencies. The Board shall determine which testing agencies are approved based on the requirements set forth in Paragraphs (c) and (d) of this Rule.

(c) To qualify as an approved testing agency, the test-development agencies shall allow a representative of the Board to serve on the Board of Directors and the Examination Review Committee of the agency.

(d) To qualify as an approved testing agency, the clinical examination administered by a testing agency shall:

(1) include procedures performed on human subjects as part of the assessment of restorative clinical competencies;

(2) include evaluations in clinical periodontics and at least three of the following subject matter areas:

   (A) endodontics, clinical abilities testing;
   (B) amalgam preparation and restoration;
   (C) anterior composite preparation and restoration;
   (D) posterior ceramic or composite preparation and restoration;
   (E) prosthetics, written or clinical abilities testing;
   (F) oral diagnosis, written or clinical abilities testing; or
   (G) oral surgery, written or clinical abilities testing; and
(3) provide the following:

(A) anonymity between applicants and examination graders;

(B) standardization and calibration of graders;

(C) a mechanism for post exam analysis;

(D) conjunctive scoring, which is scoring that requires applicants to earn a passing grade on all sections or areas tested and that does not allow weighted, averaged, or overall scoring to compensate for failures in individual subject areas;

(E) a minimum passing score set by the testing agency for each subject area tested;

(F) an annual review of the examination;

(G) a task analysis performed at least once every seven years, that surveys dentists nationwide to determine the content of the examination;

(H) a system of quality assurance to ensure uniform, consistent administration of the examination at each testing site; and

(I) does not permit a dental instructor to grade candidates at any institution at which the instructor is employed.

West Virginia:

(4) Has passed a national board examination as given by the Joint Commission on National Dental Examinations and a clinical examination administered by the Commission on Dental Competency Assessments, the Central Regional Dental Testing Service, the Council of Interstate Testing Agencies, the Southern Regional Testing Agency, or the Western Regional Examining Board, or the successor to any of those entities, which demonstrates competency, and passed each individual component with no compensatory scoring in:

(A) Endodontics, including access opening of a posterior tooth and access, canal instrumentation, and obturation of an anterior tooth;
(B) Fixed prosthodontics, including an anterior crown preparation and two posterior crown preparations involving a fixed partial denture factor;

(C) Periodontics, including scaling and root planing in a patient-based clinical setting;

(D) Restorative, including a class II amalgam or composite preparation and restoration and a class III composite preparation and restoration in a patient-based clinical setting; and

(E) The board may consider clinical examinations taken prior to July 1, 2019, or individual state clinical examinations as equivalent which demonstrates competency.

References


# Patient vs Non-Patient Requirements for Exams by State

<table>
<thead>
<tr>
<th>State</th>
<th>Allows Patient-Less Exam</th>
<th>Requires a Live-Patient Portion of Exam</th>
<th>Regulations Do Not Specify</th>
<th>Notes</th>
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<td>X</td>
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<td>Because the regulations accept all regional exams, it is not specific</td>
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<td>Alaska</td>
<td>X</td>
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<td>Only Accepts WREB- however, their regulations specifically require live patient on certain sections of exam.</td>
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<td>Only Accepts the WREB currently but will expand to the ADEX in</td>
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<td>Colorado</td>
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<td>See Notes and handout. Because the regulations accept all regional exams, it is not specific</td>
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<td>Required to pass Delaware's own exam</td>
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<td>DC</td>
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<td>Does not accept CRDTS, WREB, or SRTA unless by endorsement. The regulations are silent on requirement of patient requirement regarding examinations.</td>
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<td>Georgia</td>
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<td>Only accepts CRDTS- see notes. The regulations are silent on requirement of patient requirement regarding examinations.</td>
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<td>Indiana</td>
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<td>Does not accept CITA. The regulations are silent on requirement of patient requirement regarding examinations.</td>
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<td>Iowa</td>
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<td>Requires portfolio examination</td>
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<tr>
<td>West Virginia</td>
<td>X</td>
<td>X</td>
<td>See Notes. Also does not allow compensatory scoring.</td>
<td></td>
</tr>
<tr>
<td>Wisconsin</td>
<td>X</td>
<td>X</td>
<td>The regulations are silent on requirement of patient requirement regarding examinations.</td>
<td></td>
</tr>
<tr>
<td>Wyoming</td>
<td>X</td>
<td>X</td>
<td>The regulations are silent on requirement of patient requirement regarding examinations.</td>
<td>See Notes</td>
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</tbody>
</table>
**Alaska**


12 AAC 28.940. DENTAL LICENSURE BY EXAMINATION. (a) The board will issue a license by examination to practice dentistry to an applicant who meets the requirements of AS 08.36.110 and this section.

(b) An applicant for a license under this section shall submit

1. a complete, notarized application on a form provided by the department;

2. the applicable fees established in 12 AAC 02.190;

3. an affidavit by the applicant stating the applicant is not an impaired practitioner;

4. as required under 12 AAC 28.908(b), a statement from the applicant certifying the applicant will adhere to the ethical standards specified in 12 AAC 28.905(b);

5. an authorization from the applicant for release of the applicant’s records to the department;

6. an affidavit from the applicant that lists the license number and name of the jurisdiction for all dental licenses that the applicant holds or has ever held in any jurisdiction;

7. a copy of a current certification in cardiopulmonary resuscitation (CPR) techniques that meets the requirements of 12 AAC 28.920;

8. a copy of the applicant’s certificate

(A) of examination from the Western Regional Examining Board (WREB) showing that the applicant has passed the clinical examination conducted by WREB before February 1, 2019 and within the five years immediately preceding the date of application;

(B) of examination showing that the applicant has passed the clinical examination conducted by WREB on or after February 1, 2019 or an equivalent examination; an applicant must have passed an examination under this subparagraph within the five years immediately preceding the date of application; and the examination must include the following subject areas, components, or characteristics;

(i) standardization and calibration of the examiners and anonymity between candidates and grading examiners;
(ii) patient based periodontics testing;

(iii) constructive response testing that includes treatment planning;

(iv) endodontics testing, on a mannequin or live patient, to include access and obturation of an anterior tooth and access of a multi-canalled posterior tooth;

(v) prosthodontics testing, on a mannequin or live patient, to include a crown prep or a bridge prep;

(vi) patient based operative examination that includes one class II posterior alloy or composite procedure, and one additional operative procedure, either anterior class III or posterior class II; or

(C) showing successful completion of a two-year or more postgraduate training program approved by the Commission on Dental Accreditation of the American Dental Association, and evidence of having five years of continuous clinical practice with an average of 20 hours per week, immediately preceding the date of application; for purposes of the clinical practice requirements of this subparagraph, clinical practice may include dental school; and

(9) a copy of the applicant’s certificate of examination from the American Dental Association Joint Commission on National Dental Examinations, verifying successful passage of the National Board of Dental Examinations Part 1 and Part II; and

(10) if the applicant holds a valid federal Drug Enforcement Administration registration number, verification that the applicant has completed no less than two hours of education in pain management and opioid use and addiction within the two years prior to the date of application.

(c) In addition to the requirements of (a) and (b) of this section, an applicant for licensure by examination must pass the written Alaska jurisprudence examination authorized under AS 08.36.110 and conducted by the board with a passing score of at least 70 percent.
Arkansas


17-82-303. EXAMINATIONS.

(a) The Arkansas State Board of Dental Examiners has exclusive jurisdiction to determine who shall be permitted to practice dentistry and dental hygiene in the State of Arkansas.

(b) To this end the Board, at its regular annual meeting and at special meetings, if it deems it necessary or expedient, shall conduct examinations, both written and clinical, of all qualified applicants who desire to practice dentistry or dental hygiene in the State of Arkansas.

(c) The State Board of Dental Examiners is authorized and directed to conduct at least two (2) examinations, both written and clinical, annually of qualified applicants who desire to practice dentistry in the State of Arkansas. Special meetings for those purposes may be held by the Board if it deems it necessary or expedient. The two (2) examinations to be held annually shall be scheduled in such a manner as to be conducted following the end of the fall and spring semesters of dental schools in order to accommodate, insofar as is practicable, the greater number of qualified applicants who wish to take examinations to practice dentistry in Arkansas shortly after completion of their regular dental schooling.

(d) The board may accept the results of the National Board of Dental Examiners examination if it so desires and may cooperate with dental schools in other states for the administration of the clinical examination or may cooperate with other states in the administration of a regional clinical examination.

(e)(1) The board shall determine what grade or percentage the applicant must make to entitle him or her to be licensed.

(2) The grade or percentage shall be the same at any one (1) examination for all applicants.

(f) The Board may consider the conduct of the applicant during the examination as a factor in determining the grade or percentage to be given him or her.
California


a) Each candidate shall complete at least the minimum number of clinical experiences in each of the competencies prior to submission of their portfolio to the Board. All clinical experiences shall be performed on patients under the supervision of school faculty and shall be included in the portfolio submitted to the Board. Clinical experience shall be performed at the dental school clinic, an extramural dental facility or a mobile dental clinic approved by the Board. The portfolio shall contain documentation that the candidate has completed the minimum number of clinical experiences as follows:

(1) Oral diagnosis and treatment planning (ODTP) clinical experiences shall include a minimum of twenty (20) patient cases. Clinical experiences for ODTP include: comprehensive oral evaluations, limited (problem-focused) oral evaluations, and periodic oral evaluation.

(2) Direct restorative clinical experiences shall include a minimum of sixty (60) restorations. The restorations completed in the clinical experiences may include any restoration on a permanent or primary tooth using standard restorative materials including: amalgams, composites, crown build-ups, direct pulp caps, and temporizations.

(3) Indirect restorative clinical experiences shall include a minimum of fourteen (14) restorations. The restorations completed in the clinical experiences may be a combination of the following procedures: inlays, onlays, crowns, abutments, pontics, veneers, cast posts, overdenture copings, or dental implant restorations.

(4) Removable prosthodontic clinical experiences shall include a minimum of five (5) prostheses. One of the five prostheses may be used as a portfolio competency examination provided that it is completed in an independent manner with no faculty intervention. A prosthesis shall include any of the following: full denture, partial denture (cast framework), partial denture (acrylic base with distal extension replacing a minimum number of three posterior teeth), immediate treatment denture, or overdenture retained by a natural tooth or dental implants.

(5) Endodontic clinical experiences on patients shall include five (5) canals or any combination of canals in three separate teeth.

(6) Periodontal clinical experiences shall include a minimum of twenty-five (25) cases. A periodontal experience shall include the following: An adult prophylaxis, treatment of periodontal disease such as scaling and root planing, any periodontal surgical procedure, and assisting on a periodontal surgical procedure when performed by a faculty or an advanced education candidate in periodontics. The combined clinical periodontal experience shall include a minimum of five (5) quadrants of scaling and root planning procedures.

(b) Completion of all required clinical experiences shall be certified by the director of the school's clinical education program on the “Portfolio Examination Certification of Clinical Experience Completion” Form 33A-23P (New 08/13), which is hereby incorporated by reference, and shall be included in the candidate's portfolio.
B. Original Licensure for Dentists

1. Each applicant shall submit a completed Board approved application along with the required fee in order to be considered for licensure approval and must also verify that he/she:

a. Graduated with a DDS or DMD degree from an accredited dental school or college, which at the time of the applicant’s graduation was accredited by the Commission on Dental Accreditation as evidenced by an official transcript of credits with the date of graduation and degree obtained.

b. Successfully passed the examination administered by the Joint Commission on National Dental Examinations.

c. Successfully passed an examination or other methodology, as determined by the Board, designed to test the applicant’s clinical skills and knowledge, which may include residency and/or portfolio models.

3. Demonstrates current clinical competency and professional ability through at least one of the following:

a. Graduated within the twelve months immediately preceding the date the application is received with a DDS or DMD degree from an accredited dental school or college, which at the time of the applicant’s graduation was accredited by the Commission on Dental Accreditation.

b. Engaged in the active clinical practice of dentistry for at least one year of the five years immediately preceding the date the application is received. Experience from postgraduate training, residency programs, internships, or research during this time will be evaluated on a case-by-case basis.

c. Engaged in teaching dentistry in an accredited program for at least one year of the five years immediately preceding the date the application is received.

d. Engaged in service as a dentist in the military for at least one year of the five years immediately preceding the date the application is received.

e. Passed a Board approved clinical examination within one year of the date the application is received.

f. Successfully completed a Board approved evaluation by a Commission on Dental Accreditation accredited institution or another Board approved entity within one year of the date the application is received, which demonstrates the applicant’s proficiency as equivalent to the current school graduate. Before undertaking such evaluation, an applicant must submit a proposed evaluation for pre-approval by the Board. The Board may reject an evaluation whose proposal it has not pre-approved or for other good cause.

g. If a dentist with a revoked license, a license suspended for two or more years, or any other disciplined license preventing him/her from actively practicing for two or more years in Colorado, another state/jurisdiction, or country is applying for a license, then the Board may require him/her to comply with more than one of the above competency requirements.
h. In addition to the requirements above, the Board may, in its discretion, apply one or more of the following towards demonstration of current clinical competency, except as to applicants described in section (B)(3)(g) of this Rule.

(1) Practice under a probationary or otherwise restricted license for a specified period of time;

(2) Successful completion of courses approved by the Board; or

(3) Any other professional standard or measure of continued competency as determined by the Board
Delaware

https://dpr.delaware.gov/boards/dental/exams/

- All applicants, regardless of years of practice, are required to pass the Delaware Practical Board Examination in dentistry or dental hygiene and the Delaware Jurisprudence Examination except for dental hygienists applying by reciprocity.

G. General Guidelines for Clinical Examination

1. Patient Selection The Board does not furnish patients for the clinical examination, nor does it accept excuses from candidates who have not procured acceptable patients. If your patients do not qualify, you will not be tested. You are required to provide patients who shall be at least 18 years old. If a patient is presented who does not meet the criteria as published, the patient will be rejected by the examiners. If two patients are rejected for any one exercise, a “no show” will be recorded. “No shows” are not recorded as a failure, but will cause your exam fee to be forfeited.

2. Patient Acceptability A dentist, dental technician, or dental student may not be used as a patient. A person with a medical history of an infectious or communicable disease, or a serious systemic condition, will not be allowed to sit as a patient during the examination, unless he/she presents a physician’s statement certifying that the proposed treatment will not pose an undue risk to the patient. The patient’s blood pressure will be taken at the time of the exam. A reading of 159/94 or less will be accepted for testing. A reading of 160/95 to 179/109 will require the patient to have a letter from his/her physician approving treatment. A reading of 180/110 or higher will disqualify the patient from the exam. Warning: Be advised that the dental clinic is not latex-free. Please do not use patient(s) with severe latex allergies.

3. Substitute Patients You must present patients who are acceptable to the examiners. A second patient must be available in the event the first patient is unacceptable. If using the second patient, you will be required to complete the examination in the remaining scheduled time. You must provide completed paperwork and a complete full-mouth radiograph series for each patient presented.

District of Columbia (DC)


4204 LICENSURE BY EXAMINATION 4204.1 To qualify for a license by examination, an applicant shall:
(a) Meet the education requirements set forth under § 4202 of this chapter; and
(b) Receive a passing score on the following:
(1) Part I and Part II of the examination of the Joint Commission on National Dental Examinations;
(2) The Northeast Regional Board (NERB) (Now CDCA) or the American Board of Dental Examiners (ADEX) examination; and
(3) The District of Columbia Dental Law Examination.

4209.4 In addition to the requirements set forth in this section, the Board may, in its discretion, require an applicant for licensure by endorsement to take and successfully complete a competency examination, or any portion thereof deemed necessary by the Board....
i. The applicant must submit documentation that he or she has successfully completed the National Board of Dental Examiners dental examination.

(5)(a) The practical examination required under subsection (4) shall be the American Dental Licensing Examination developed by the American Board of Dental Examiners, Inc., or its successor entity, if any, provided the board finds that the successor entity’s clinical examination complies with the provisions of this section, and shall include, at a minimum:

1. A comprehensive diagnostic skills examination covering the full scope of dentistry and an examination on applied clinical diagnosis and treatment planning in dentistry for dental candidates;

2. **Two restorations on a live patient or patients.** The board by rule shall determine the class of such restorations;

3. **A demonstration of periodontal skills on a live patient;**

4. A demonstration of prosthetics and restorative skills in complete and partial dentures and crowns and bridges and the utilization of practical methods of evaluation, specifically including the evaluation by the candidate of completed laboratory products such as, but not limited to, crowns and inlays filled to prepared model teeth;

5. A demonstration of restorative skills on a mannequin which requires the candidate to complete procedures performed in preparation for a cast restoration;

6. A demonstration of endodontic skills; and

7. A diagnostic skills examination demonstrating ability to diagnose conditions within the human oral cavity and its adjacent tissues and structures from photographs, slides, radiographs, or models pursuant to rules of the board. If an applicant fails to pass the diagnostic skills examination in three attempts, the applicant shall not be eligible for reexamination unless she or he completes additional educational requirements established by the board.

(b) The department shall consult with the board in planning the times, places, physical facilities, training of personnel, and other arrangements concerning the administration of the examination. The board or a duly designated committee thereof shall approve the final plans for the administration of the examination;
(7) In determining whether an applicant has met the requirements for licensure, the board will only consider:

(a) The examination given by the Georgia Board of Dentistry prior to February 22, 1993.

(b) Results from the Southern Regional Testing Agency (SRTA) that were attained between February 22, 1993 and December 31, 2005; to include SRTA retake examination results until December 31, 2006.

(c) Results from the American Board of Dental Examiners (ADEX) examination as uniformly administered by the Central Regional Dental Testing Service (CRDTS) and the Northeast Regional Board of Dental Examiners (NERB) that were attained between January 1, 2006 and June 30, 2009.

(d) Results from the Central Regional Dental Testing Service (CRDTS) examination or any other testing agency designated and approved by the Board attained subsequent to June 30, 2009. Results from the retake examinations administered by the Northeast Regional Board of Dental Examiners (NERB) or the Central Regional Dental Testing Service (CRDTS) are accepted through June 30, 2010. Such retakes must be from initial examinations taken prior to June 30, 2009 and must include at least one successful score from Parts II, III, IV or V. Examination scores from slot preparations of restorative dentistry shall neither be accepted nor recognized by the Board.

§448-9.4 American Board of Dental Examiners (ADEX) examination; regional examinations. An applicant shall take and pass the ADEX examination, and neither the state examination nor any regional examination shall be accepted.

Prior to 2018 the Idaho Board of Dentistry accepted the following examinations: Western Regional Examining Board (WREB), Central Regional Dental Testing (CRDTS), and Commission on Dental Competency Assessments (CDCA). Council of Interstate Testing Agencies (CITA) exams are accepted if taken in 2014-2017. Please note the optional periodontal section of the CDCA and CITA examination is required.

Exams taken in 2018 are accepted in Idaho if the following clinical components were completed: patient-based operative which included successful completion of a class II and a class III restoration, patient-based periodontics, endodontics, prosthodontics, and a written competency examination.

Clinical examinations taken after 01/01/2019 must include the above referenced sections, but only one operative procedure is required.
Illinois


terID=24&ChapterName=PROFESSIONS+AND+OCCUPATIONS&ActName=Illinois+Dental+Practice+Act%2E

(e) Present satisfactory evidence that the applicant

has passed both parts of the National Board Dental Examination administered by the
Joint Commission on National Dental Examinations and has successfully completed an
examination conducted by one of the following regional testing services: the Central
Regional Dental Testing Service, Inc. (CRDTS), the Southern Regional Testing Agency,
Inc. (SRTA), the Western Regional Examining Board (WREB), the North East Regional
Board (NERB), or the Council of Interstate Testing Agencies (CITA). For purposes of this
Section, successful completion shall mean that the applicant has achieved a minimum
passing score as determined by the applicable regional testing service. The Secretary
may suspend a regional testing service under this subsection (e) if, after proper notice
and hearing, it is established that (i) the integrity of the examination has been
breached so as to make future test results unreliable or (ii) the test is fundamentally
deficient in testing clinical competency.

Section 1220.120 Dental Examinations

a) The Division shall accept the following examinations for licensure if administered and
passed in their entirety (which includes passage of the restorative, periodontal,
prosthodontic and endodontic portions of the examination):

1) NERB Examination, with a passing score established by the testing entity;
2) CRDTS Examination, with a passing score established by the testing entity;
3) SRTA Examination, with a passing score established by the testing entity;
4) WREB Examination, with a passing score established by the testing entity; or
5) CITA Examination, with a passing score established by the testing agency.

b) Retake requirements shall be that of the testing entity.

c) The applicant shall have the examination scores submitted to the Division directly from
the reporting entity.

d) The Division will accept only examinations that have been completed in the 5 years
prior to submission of the application, if never licensed in another jurisdiction.

(Source: Amended at 40 Ill. Reg. 12553, effective September 2, 2016)
Indiana

http://iga.in.gov/legislative/laws/2019/ic/titles/025#25-14-1-1.5

IC 25-14-1-3 Examination; fees

Sec. 3. (a) A person desiring to begin the practice of dentistry in Indiana shall procure from the board a license to practice dentistry in Indiana. Except as provided in section 4.5 of this chapter, to procure the license, the applicant must submit to the board proof of graduation from a dental college recognized by the board. The board may recognize dental schools accredited by the Commission on Dental Accreditation of the American Dental Association, if the board is satisfied that the recognition is consistent with the board's requirements. Every applicant must pass an examination administered by an entity approved by the board and may not take the examination more than three (3) times.

(b) A fee paid under this article may not be refunded.

CLINICAL EXAMINATION REQUIREMENT To be eligible for licensure by examination, an applicant must pass all parts of one (1) of the following examinations within the five (5) year period immediately before the date of the Board’s receipt of the Applicant’s application.

- NERB (no CDCA)
- CRDTS
- SRTA
- WREB

Iowa

https://www.legis.iowa.gov/law/administrativeRules/chapters?agency=650&pubDate=01-01-2020

650—12.3(147,153) Portfolio examination procedure for dentistry.

12.3(1) Completion of a portfolio examination. The 2014 California portfolio examination is accepted for licensure by examination for University of Iowa graduates. To meet the requirements for dental licensure and portfolio examination, applicants shall complete the portfolio examination as administered at the University of Iowa College of Dentistry (College of Dentistry).

12.3(2) Compliance with testing requirements and procedures.

a. The board shall oversee all aspects of the portfolio examination process but shall not interfere with the College of Dentistry’s authority to establish and deliver an accredited curriculum. The board shall determine an end-of-year deadline, in consultation with the College of Dentistry, to determine when the portfolio examinations shall be completed and submitted to the board for review by the board’s examiners.

b. The portfolio examination shall be conducted while the applicant is actively enrolled as a student at the College of Dentistry. This examination shall utilize uniform standards of clinical experiences and competencies as outlined in the 2014 California portfolio examination. The applicant shall pass a final assessment of the submitted portfolio at the end of the applicant’s dental school education at the College of Dentistry.
c. Before any portfolio examination may be submitted to the board, the applicant shall remit to the board the required portfolio examination fee as specified in 650—Chapter 15 and a letter of good standing signed by the dean of the College of Dentistry stating that the applicant has graduated or will graduate with no pending ethical issues.

12.3(3) Scoring requirements.

a. Final clinical competencies performed by the applicant must be evaluated by two examiners who have participated in standardization, calibration and training. The examiners shall be approved by the board and may include faculty, board members or board member designees. Board members or board member designees shall have priority as examiners at all times. The College of Dentistry shall submit to the board the names of the portfolio examiners for consideration by January 1 of each calendar year.

b. The College of Dentistry shall provide a minimum of a seven-day notice for all final competencies. In the event that a seven-day notice cannot be provided, the College of Dentistry must notify the board immediately. In the event that no board members or designees are available to participate in an evaluation, the College of Dentistry may use two board-approved portfolio examiners.

c. Successful completion of each competency shall result in a score that meets minimum competence-level performance. Scoring criteria for each competency is outlined in the 2014/2015 California Examiner Training Manual.

d. The board shall monitor and audit the standardization and calibration of examiners at least biennially to ensure standardization and an acceptable level of calibration in the grading of the examination. The College of Dentistry’s competency examinations with regard to the portfolio examination shall be audited annually by the board.

12.3(4) Compliance with clinical operation requirements.

a. The board shall require and verify the successful completion of a minimum number of clinical experiences for the portfolio examination.

b. The board shall require and verify the successful completion of a set number of competency examinations performed on a patient of record. The clinical experiences include, but are not limited to, the following:

1. Comprehensive oral diagnosis and treatment planning;
2. Periodontics;
3. Direct restorations;
4. Indirect restorations;
5. Removable prosthodontics; and

[ARC 3488C, IAB 12/6/17, effective 1/10/18]
Kansas

https://www.dental.ks.gov/

WREB Components Required by the Kansas Dental Board:

1. Comprehensive Treatment Planning (CTP).
2. Operative: Two (2) posterior restorations following WREB criteria.
3. Endodontics.
4. Periodontics.

Components NOT Required:

Prosthodontics: This optional section is not required for Kansas Licensure.

Kentucky


To be eligible to apply for licensure by examination, you must meet the following requirements with no exceptions:

• Graduated of a CODA accredited dental school, college, or department of a university
• Successfully completed Part I and Part II of the National Board Dental Examination
• Successfully passed within the five (5) years preceding the filing of your application one of the following regional clinical examinations: CITA, CRDTS, CDCA/NERB, SRTA, or WREB*

Due to the fact that there is currently no nationalized clinical exam, the Board interprets 201 KAR 8:532, Section 2(b) as carrying no effect. Until further notice and at such time a nationalized clinical exam is available, the Board will continue to accept the five regional clinical examinations from individuals desiring licensure by examination after July 15, 2013.

Additionally, you must prove that you meet the requirements of Sections 1 and 2 of 201 KAR 8:530E by submitting the documentation described in the following instruction checklist. This includes a Criminal Background Check.

Louisiana


C. An applicant who has successfully completed any national, regional, or independent third-party clinical dental licensing examination approved by the board that shall include procedures performed on human subjects as part of the assessment of restorative clinical competencies and who otherwise satisfies all requirements for a dental license, including satisfactory completion of an examination in jurisprudence and a background check, may be granted a license by examination by applying for licensure in Louisiana within three years following the successful completion of such clinical licensing examination.
II. SPECIFIC REQUIREMENTS FOR DENTAL LICENSURE

1. Standard Licensure

To be licensed, candidates for dental licensure in this category shall meet the following requirements:

A. Have received a D.M.D. or D.D.S. degree from an undergraduate dental school accredited by the A.D.A. Commission on Dental Accreditation (CODA) and have provided a statement under seal from the Office of the Dean of the school affirming that the applicant has met all applicable degree requirements;

B. Have successfully completed, with a passing grade, Parts I and II of the National Dental Board Examination or the successor to that examination;

C. Have successfully completed, with a passing grade, all parts of: (1) the Northeast Regional Board Dental examination ("NERB") or the successor to that examination; or (2) any other U.S. state or regional dental board examination, so long as all modules are passed; or (3) a national dental clinical examination approved by the Board;

D. Provide the Board with documentary proof of current certification in CPR;

E. Have successfully completed with a passing grade of 90 percent, the jurisprudence examination given by the Board; and

E. An applicant who otherwise qualifies for an initial dental license shall pass the written and clinical ADLEX examination with a score of 75 or greater in each required section.

F. An applicant who otherwise qualifies for an initial dental hygiene license shall pass the written and clinical ADHLEX examination with a score of 75 or greater in each required section.

G. An applicant for an initial dental or dental hygiene license shall pass the national boards examinations, also known as the National Boards, administered by the Council of National Boards of the American Dental Association.

H. An applicant who fails the ADLEX or ADHLEX examinations four times may not be licensed.

The ADEX has the authority to determine:

A. Examination sites;

B. Frequency of examinations;

C. Examination content; and

D. Grading method, provided that the grading method is not arbitrary and capricious.
### Massachusetts

[https://www.mass.gov/doc/regional-and-state-clinical-exam-requirements-0/download](https://www.mass.gov/doc/regional-and-state-clinical-exam-requirements-0/download)

Document (hyperlink provided above) - States the following statements:

Although some regional and state examinations offer the option of not taking a Patient-Based Periodontal Examination, successful completion of this section of a regional or state exam is required for dental licensure in Massachusetts.

Please note that for applicants submitting WREB Scores, the Board requires a passing score (a score of at least 3 our of a possible score of 5) on ALL sections of the WREB exam including the optional periodontics and prosthodontics sections and two restorative procedures in the operative section, e.g one Class II and one Class III restoration OR two Class II restorations.

**Massachusetts issued a letter regarding the WREB and additional requirements.**

### Michigan


Dentist: Pursuant to R338.11203 of the Administrative Rules the Clinical examination of the following regional testing agencies have been recognized as being substantially equivalent to the ADEX clinical examination of the Commission on Dental Competency Assessments (CDCA), formerly NERB:  
- Central Regional Testing Agency (CRDTS)  
- Southern Regional Testing Agency (SRTA) - Administers the ADEX Clinical Exam  
- Western Regional Testing Agency (WREB)  
- Commission on Interstate Testing Agency (CITA) – Administers both ADEX Written & Clinical portions In addition to an accepted clinical examination, you must obtain passing scores on the CDCA/ADEX DSE written examination. The Michigan Board of Dentistry requires passing scores on the Periodontal section of the ADEX Clinical examination.
**Minnesota**

https://www.revisor.mn.gov/rules/3100/

Pass within 5 years prior to application the following clinical exams:

- Central Regional Dental Testing Service (CRDTS)
- Southern Regional Testing Agency (SRTA)
- Western Regional Examing Board (WREB) – MN. requires both Anterior & Posterior operative restorations for this exam
- Commission on Dental Competency Assessments (CDCA)
- Council on Interstate Testing Agency (CITA)
- National Dental Examing Board of Canada –if applicant is graduate of an Accredited Canadian Dental School-OR- U of M dental graduate on or after 5/2010

( Minnesota requires applicant to pass ALL components of the above mentioned exams)

Undergo a criminal background check

**Mississippi**


(7) Examination shall be as elsewhere provided in this chapter and the board may by its rules and regulations prescribe reasonable professional standards for oral, written, clinical and other examinations given to applicants, and, if deemed necessary by the board, **include a requirement that licensure examinations of applicants be conducted utilizing live human subjects.** Each applicant shall appear before the board and be examined to determine his or her learning and skill in dentistry or dental hygiene. If found by the members of the board conducting the examination to possess sufficient learning and skill therein and to be of good moral character, the board shall, as early as practicable, grant to the person a license to practice dentistry or dental hygiene, as the case may be, which shall be signed by each member of the board who attended the examination and approved the issuance of a license

**Missouri**


2. Have passed a competency examination within the previous five (5) years and have passed the National Board Examination, and submit an application form for licensure to the board. Applicants will be scheduled to take the jurisprudence examination at the board office, at the office of one (1) of the members of the board, or at such times deemed necessary by the board; and
Montana


24.138.502 INITIAL LICENSURE OF DENTISTS BY EXAMINATION

(1) A completed application must include the following:

(a) an original score card from the Joint Commission on National Dental Examinations showing the applicant's passage of the written examination administered by the Joint Commission on National Dental Examinations;

(b) certification of successful passage of a board approved regional clinical practical examination. Examinations shall be valid for the purpose of initial licensure for a period of five years from the date of successful passage of the examination;

(c) affidavits from three persons not related to the candidate, of the candidate's good moral character;

(d) verification of graduation from a dental school accredited by the American Dental Association Commission on Dental Accreditation, or its successor. Verification must consist of an original dental school transcript and a diploma. The board may accept a letter from the dean of the school of dentistry, program director, or the dean's equivalent attesting to the program of study, and that graduation status was attained to process the application; however, a license will not be issued until the transcript is received in the board office;

(e) license verifications from all jurisdictions where the licensee has held or holds a license;

(f) a copy of a self-query of the National Practitioner Data Bank and the Healthcare Integrity Data Bank;

(g) a copy of the applicant's current CPR, ACLS, or PALS card;

(h) the jurisprudence examination fee; and

(i) the application fee.

(2) The applicant shall not be physically or mentally impaired by use of addictive drugs, alcohol, or any other drug or substance, or by mental or physical illness which in the determination of the board renders the individual unfit or incapable of practicing dentistry.

(3) Applicants shall successfully pass the jurisprudence examination with a final grade of at least 75 percent, prior to issuance of a license.

(4) Application material remains valid for six months from the time it is received in the office. If the jurisprudence examination has not been successfully passed within six months, the application will be considered incomplete and a new application and fees must be submitted.
The Nebraska Board of Dentistry has determined that the following examinations will be accepted* for Dental license applications completed between September 1, 2019 through August 31, 2020 (A passing score for each examination is determined by the respective testing agency):

- 2019-2020 Central Regional Dental Testing Service (CRDTS) Dental Examination (Passing score is 75)
- 2019-2020 Commission on Dental Competency Assessments (CDCA) Dental Examination with either the CDCA Patient based Periodontal Examination or the CRDTS Patient based Periodontal Examination (Passing score is 75)
- 2019-2020 Council of Interstate Testing Agencies (CITA) Dental Examination (Passing score is 75)
- 2019-2020 Western Regional Examining Board (WREB) Dental Examination with CRDTS Prosthodontic Manikin Examination or the WREB Prosthodontic Manikin Examination or the CDCA Prosthodontic Manikin Examination (Passing Score is 75)
- 2019-2020 Southern Regional Testing Agency (SRTA) Dental Examination with CRDTS Periodontal Examination (Passing Score is 75)
- 2019-2020 American Dental Examination (ADEX) with a patient based periodontal examination (Passing Score is 75) Note: The Department will retain a list of acceptable licensing examinations for 5 years as an administrative reference for applicants who do not apply for licensure during the same year the examination is completed.

*Acceptable examinations will be updated by September 1st of each calendar year. If you took the CDCA exam you will need to contact them and request that your scores be sent directly to this office. If you took a state exam, request that include in their certification of your license the requirements that you had to meet in order to receive a license in that state. You need to request that the scores for CRDTS be placed on the MASTER SCORE Sheet that is sent to our Department. Scores from the regional exams will be accepted for a period of five years from the date the exam was passed.
**Nevada**

https://www.leg.state.nv.us/NRS/NRS-631.html#NRS631Sec240

**NAC 631.090 Examination for license to practice dentistry. (NRS 631.190, 631.240)** Except as otherwise provided in NRS 622.090, in fulfillment of the statutory requirements of paragraph (b) of subsection 1 of NRS 631.240, an applicant taking the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the Western Regional Examining Board must:

1. Pass the Dental Simulated Clinical Examination or a comparable examination administered by the Western Regional Examining Board, as applicable;
2. Demonstrate proficiency in endodontics as the organization administering the clinical examination requires;
3. Demonstrate proficiency in fixed prosthodontics as the organization administering the clinical examination requires;
4. Demonstrate proficiency in restorative dentistry as the organization administering the clinical examination requires;
5. Demonstrate proficiency in periodontics as the organization administering the clinical examination requires; and
6. Perform such other procedures as the Board requires.

**New Hampshire**

http://www.gencourt.state.nh.us/rules/state_agencies/den100-500.html

**As of 2018, the Board will no longer accept the WREB exam**

**New Jersey**


3) Results from the successful completion of the North East Regional Board examination. If an applicant fails any portion of the North East Regional Board examination three consecutive times, the Board may require the applicant to sit for and pass a remedial course in the subject area at a dental school, college or department of a university approved by the Commission on Dental Accreditation. The Board shall recognize successful completion of the North East Regional Board examination for up to five years;
New Mexico

http://www.srca.nm.gov/parts/title16/16.005.0006.html

New York

http://www.op.nysed.gov/prof/dent/part61.htm

North Carolina


21 NCAC 16B .0303 BOARD APPROVED EXAMINATIONS

(a) All applicants for dental licensure shall achieve a passing score of at least 80 percent on the Board's sterilization and jurisprudence examinations. Applicants may take reexamination in accordance with Rule .0317 of this Section. (b) All applicants for dental licensure shall achieve passing scores on the examination administered by the Joint Commission on National Dental Examinations and clinical examinations administered by Board approved testing agencies. The Board shall determine which testing agencies are approved based on the requirements set forth in Paragraphs (c) and (d) of this Rule. (c) To qualify as an approved testing agency, the test-development agencies shall allow a representative of the Board to serve on the Board of Directors and the Examination Review Committee of the agency. (d) To qualify as an approved testing agency, the clinical examination administered by a testing agency shall:

1. include procedures performed on human subjects as part of the assessment of restorative clinical competencies;
2. include evaluations in clinical periodontics and at least three of the following subject matter areas: (A) endodontics, clinical abilities testing; (B) amalgam preparation and restoration; (C) anterior composite preparation and restoration; (D) posterior ceramic or composite preparation and restoration; (E) prosthetics, written or clinical abilities testing; (F) oral diagnosis, written or clinical abilities testing; or (G) oral surgery, written or clinical abilities testing; and
3. provide the following: (A) anonymity between applicants and examination graders; (B) standardization and calibration of graders; (C) a mechanism for post exam analysis; (D) conjunctive scoring, which is scoring that requires applicants to earn a passing grade on all sections or areas tested and that does not allow weighted, averaged, or overall scoring to compensate for failures in individual subject areas; (E) a minimum passing score set by the testing agency for each subject area tested; (F) an annual review of the examination; (G) a task analysis performed at least once every seven years, that surveys dentists nationwide to determine the content of the examination; (H) a system of quality assurance to ensure uniform, consistent administration of the examination at each testing site; and (I) does not permit a dental instructor to grade candidates at any institution at which the instructor is employed.
North Dakota


20-02-01-03.1. Additional requirements for licensure by examination. The board may grant a license to practice dentistry to an applicant who has met the requirements of North Dakota Century Code section 43-28-10.1 and all the following requirements: 1. The applicant has passed the examination administered by the joint commission on national dental examinations or the national dental examining board of Canada within five years of application. 2. The applicant has passed, within five years of application, a clinical competency examination approved by the board. **Required components shall include a patient-based periodontal component, a patient-based restorative component, and an endodontic component.** 3. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application. 4. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.

Ohio

http://codes.ohio.gov/orc/4715.10

**Dentist applicant must be a graduate of an accredited dental college, and meet one of the following requirements to apply:**

I. Have taken an examination administered by any of the following regional testing agencies and received a passing score on the examination as determined by the administering agency: the central regional dental testing service, inc., northeast regional board of dental examiners, inc., the commission on dental competency assessments, the southern regional dental testing agency, inc., the council of interstate testing agencies, inc., or the western regional examining board; **OR**

II. Have taken an examination administered by the state dental board and received a passing score as established by the board – no longer offered; **OR**

III. Possess a license in good standing from another state and have actively engaged in the legal and reputable practice of dentistry in another state or in the armed forces of the United States, the United States public health service, or the United States department of veterans' affairs for five years immediately preceding application; **OR**

IV. Have completed a dental residency program accredited or approved by the commission on dental accreditation and administered by an accredited dental college or hospital.
Oklahoma


195:10-1-3. Contents of examination The examination for a license to practice dentistry in Oklahoma will consist of: (1) Theoretical examination. (A) A theoretical examination which will be written and will usually consist of questions on the subjects of: (i) Operative Dentistry, (ii) Pharmacology, Prosthodontics, (iii) Oral Surgery/Anesthesia, (iv) Orthodontics/Pedodontics, (v) Oral Path/Radiology, (vi) Endodontics/Periodontics, (vii) Anatomic Sciences, (viii) Biochem/Physiology, (ix) Microbiology/Pathology, and (x) Dental Anatomy

(3) Clinical examination. (A) Clinical examinations may be conducted by a national or regional testing agency recognized by the Board or at times and places determined appropriate by the Board and depending upon numbers of applications received. (B) A passing score must be obtained in the recognized clinical examination(s) to be eligible for licensure.

195:10-11-10. The examination An applicant for licensure in a Specialty shall satisfactorily pass such examination as the Board may require. The examination will be both theoretical and practical. (1) Theoretical examination. The theoretical examination shall be in writing and will include all the subjects that are pertinent to the Specialty in which the applicant desires to be licensed. Written examinations may be supplemented by oral examinations. The Board shall accept any and all test results from the respective American Board(s) regarding written examinations for all specialties. Written specialty examinations recognized by a regional testing agency may also be accepted as approved by the Board. (2) Practical examination. The practical examination will be designed to test the applicant’s knowledge and skill of all phases of diagnosis and treatment in the specialty in which the applicant desires to be licensed. This may consist of case reports, clinical procedures on patients, and laboratory work. The following practical examinations will be required in the respective specialties:

This is the application method for Dentists & Dental Hygienists that have taken a Regional Exam within the last 5 years.

The following exam components are required for a Dentist:

- Prosthodontics
- Periodontics
- Endodontics
- Anterior Class III and Posterior Class II restorative on a live patient
- Diagnosis and Treatment Planning Section

Oregon

Pennsylvania


https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Dentistry/Pages/Examination-Information.aspx

§ 33.103. Examinations.

(a) Dentists. Candidates for licensure shall pass the National Board Dental Examination (written examination) and the dental clinical examination administered by one of the following:

1) The North East Regional Board of Dental Examiners, Inc. (NERB).


3) The Western Regional Examining Board (WREB).

4) The Central Regional Dental Testing Service, Inc. (CRDTS).


Rhode Island


c) have successfully passed the Northeast Regional Board of Dental Examiners, Inc., Examination within five (5) years from the date of application for licensure in this state; or 6) have successfully passed an examination within five (5) years of the date of application for licensure offered by one of the following dental examination organizations: the Central Regional Dental Testing Service, the Southern Regional Testing Agency, Inc., or the Western Regional Examining Board, Inc., with an earned score of seventy-five percent (75%) in each discipline, clinical skill, procedure or knowledge area that is tested on the NERB Examination using the internal weighting and scoring methods the NERB uses to score the NERB Examination in Dentistry; or have successfully passed an examination, approved by the Board, other than a regional board that is similar to the examination for which the applicant is seeking waiver, with an earned score of seventy-five percent (75%) in each discipline, clinical skill, procedure or knowledge area that is tested on the NERB Examination using the internal weighting and scoring methods the NERB uses to score the NERB Examination in Dentistry; and ii) have successfully passed a comprehensive examination in applied clinical diagnosis and treatment planning (NERB Dental Simulated Clinical Exercise (DSCE) written) with an earned score of seventy-five percent (75%);
South Carolina

https://www.scstatehouse.gov/coderegs/Chapter%2039.pdf

C. The Board shall require each applicant to successfully complete an examination before such applicant is licensed. The examination may be given either orally, or in writing, or by requiring a practical demonstration of the applicant’s skill, or by any combination of such methods as the Board may in its discretion require. Each applicant shall furnish their own patient on the exam. The selection of this patient as well as the final treatment for this patient shall be considered in the final grade.

South Dakota


20:43:03:02. Clinical competency examination -- License to practice as a dentist. The board may approve a patient-based clinical competency examination pursuant to subdivision 20:43:03:01(4) that demonstrates evidence of psychometric soundness, including documentation of validity, reliability, fidelity and fairness, allows direct observation by a board designee, and includes, at a minimum, the following components:

1. A patient-based periodontal component;
2. A patient-based restorative component;
3. A manikin-based prosthodontic component;
4. A manikin-based endodontic component;
5. A remediation policy to address candidate deficiencies.

Tennessee

https://www.tn.gov/content/dam/tn/health/healthprofboards/dentistry/Effective%208-12-19.pdf

Rule 0460-02-.05 Examinations is amended by deleting paragraph (1) and by deleting subparagraph (1)(a) in its entirety, and substituting instead the following language, so that as amended the new paragraph and subparagraph shall read: (1) The Board adopts as its licensure examination and requires, with the previously noted exceptions, successful completion of all of the following examination components as a prerequisite for licensure: (a) An examination must include a prosthetic component, a periodontal component, an endodontic component, and a live human patient anterior and posterior restorative component.

This JUST Changed
Texas


(4) Has taken and passed the appropriate general dentistry clinical examination administered by a regional examining board designated by the Board. Many regional examining boards require prior written approval by the participating member state in order for graduates of non-accredited schools to be tested. Prior to submitting an application for regional examination, graduates of non-accredited schools must obtain such permission from the Board.

(c) Designated regional examining boards.

(1) The following regional examining boards have been designated as acceptable by the Board as of the effective dates shown:

(A) Western Regional Examining Board, January 1, 1994;
(B) Central Regional Dental Testing Service, January 1, 2002;
(C) Northeast Regional Board, January 1, 2005;
(D) Southern Regional Testing Agency, January 1, 2005; and

(2) Examination results will be accepted for five years from the date of the examination.

Utah


In accordance with Subsections 58-69-302(1)(f) and (g), the examination requirements for licensure as a dentist include the periodontics section and are established as the following:

(1) the WREB examination with a passing score as established by the WREB;
(2) the NERB examination with a passing score as established by the NERB;
(3) the SRTA examination with a passing score as established by the SRTA; or
(4) the CRDTS examination with a passing score as established by the CRDTS.
**Vermont**


d) Has passed every part of one of the following examinations:

1. the American Dental Licensing Exam (ADLEX) administered by the Northeast Regional Board (NERB);
2. the Central Regional Dental Testing Service Examination (CRDTS);
3. the Council of Interstate Testing Agencies (CITA);
4. the Southern Regional Testing Agency Examination (SRTA);
5. the Western Regional Examining Board Examination (WREB);
6. another regional or national clinical examination approved by the Board before the examination is taken, or;
7. has passed the board certifying examinations of the American Dental Association's recognized specialty boards.

(e) Should changes occur after adoption of these rules, the Office should be able to provide up-dated contact information.

(f) If other regional board or national testing organizations are formed, the Board, at its discretion, may accept passage of their examinations as fulfilling the requirements of this rule.

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**Washington**

https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Dentist

**Notice – Dentist Clinical Examination**

- The Dental Quality Assurance Commission has determined that the optional prosthodontics examination the Western Regional Examining Board (WREB) offers is a required section of the clinical examination for Washington State dentist licensure. Additionally, Washington State doesn't have specific criteria associated to the operative/restorative section. Applicants may follow WREB’s examination process.

- The Dental Quality Assurance Commission has learned the periodontal portion of the North East Regional Examining Board of Dental Examiners (NERB) and the Southern Regional Testing Agency (SRTA) dentist examinations are now optional. The commission has determined that all portions of the clinical examinations are necessary to be considered for licensure in the state of Washington.

- The SRTA examination no longer provides a comprehensive treatment planning or diagnostic skills component. SRTA examination does not currently meet the requirements of WAC 246-817-120 (1)(b)(v) and is unacceptable for dentist licensure by examination.

- The Dental Quality Assurance Commission has determined that the California State Dental Board portfolio examination isn’t an acceptable clinical examination for Washington State dentist licensure.
West Virginia

http://www.wvdentalboard.org/

(4) Has passed a national board examination as given by the Joint Commission on National Dental Examinations and a clinical examination administered by the Commission on Dental Competency Assessments, the Central Regional Dental Testing Service, the Council of Interstate Testing Agencies, the Southern Regional Testing Agency, or the Western Regional Examining Board, or the successor to any of those entities, which demonstrates competency, and passed each individual component with no compensatory scoring in: (A) Endodontics, including access opening of a posterior tooth and access, canal instrumentation, and obturation of an anterior tooth; (B) Fixed prosthodontics, including an anterior crown preparation and two posterior crown preparations involving a fixed partial denture factor; (C) Periodontics, including scaling and root planing in a patient-based clinical setting; (D) Restorative, including a class II amalgam or composite preparation and restoration and a class III composite preparation and restoration in a patient-based clinical setting; and (E) The board may consider clinical examinations taken prior to July 1, 2019, or individual state clinical examinations as equivalent which demonstrates competency.

Wisconsin

Effective January 1, 2009

The Board accepts the following examinations for dentists: CRDTS, WREB, CDCA, SRTA, ADEX, and CITA. Parts I and III of ADEX are not required for WREB examinees for examinations taken on or after January 1, 2009.

Prior to January 1, 2009 the Board Accepted the Following Regional Examinations:

- The Commission on Dental Competency Assessments (CDCA)
  - Effective September 28, 2005: The Board started to accept the (NERB/CDCA) examination for Wisconsin licensure in Dentistry
  - Acceptance is retroactive for 5 years from September 28, 2005
- Western Regional Examining Board (WREB)
  - Effective January 1, 2001: The Board started to accept the WREB examination
  - Prior to December 1, 2005: WREB applicants were not required to pass ADEX Parts I and III
  - Effective December 1, 2005 through December 31, 2008: Applicants completing the WREB exam must also successfully complete the ADEX exam Part I in diagnostic and treatment planning and Part III of the mannequin examination in fixed prosthodontics
  - Effective July 11, 2012: Applicants completing the WREB exam between December 1, 2005 through December 31, 2008 are no longer required to complete the ADEX exam Part I in diagnostic and treatment planning and Part III of the mannequin examination in fixed prosthodontics
- Central Regional Dental Testing Score (CRDTS)
  - The CRDTS exam is approved for licensure regardless of the year the exam was completed
Wyoming


iii) Successfully pass a regional clinical examination that indicates competency in:

(A) Endodontics, including access opening of a posterior tooth and access, canal instrumentation and obturation of an anterior tooth;

(B) Fixed Prosthodontics including one of the following:

(I) A full crown procedure;

(II) An indirect cast class II inlay;

(III) An indirect cast class II onlay; or

(IV) Cast 3/4 crown.

(C) Periodontics, including scaling and root planing on a patient in a clinical setting; and

(D) Restorative Dentistry, including a class II amalgam or composite preparation and restoration and a class III composite preparation and restoration on a patient in a clinical setting.

(I) Slot preps shall not be accepted.

(II) If an indirect inlay, onlay, or 3/4 crown procedure is done on a patient, the applicant shall be required to perform one (1) additional restorative procedure as listed above.
A Statewide Call to Action: Increasing Adoption of Alternative Pathways Toward Licensure

Similar to the climate change issue, after years, if not decades, of discussion but little change, we are at a point where we are seeing real progress on the elimination of the single encounter, procedure-based examination on patients as part of the licensure process. Twenty percent of U.S. states (and all of Canada) now accept alternative pathways to licensure—and more are actively discussing making a change.

**Copied with permission; American Dental Education Association (ADEA) Snapshot of Dental Education 2019-2020**
Clinical Definition

- **Defining the term clinical will affect the following terms within the regulations:**
  - Clinical Examination
  - Clinical Experience
  - Clinical Component
  - Clinical Competency Examination
  - Clinical Training
  - Clinical Practice
  - Clinical Examination
  - Clinical Courses
  - Clinical Services
  - Clinical Emergencies
  - Clinical Observation
  - Clinical Anesthesia
  - Clinical Medical Subjects
  - Clinical Fellowship

- **Proposed Language:**
  - “Clinical” means evaluation, diagnosis, and prevention, through live patient or manikin based methods relating to the care and treatment of patients.
  - “Clinical” means the evaluation, diagnosis, treatment and preventative methods used to care for patients or to demonstrate readiness to care for patients.

- **Research**
  - **New Hampshire Board of Dental Examiners**
    - “Clinical” means having to do with the direct observation and treatment of patients. (New Hampshire Board of Dental Examiners, 2020)
  - **Minnesota Board of Dentistry**
    - “Clinical Subject” means those subjects directly related to the provision of dental care and treatment to patients. (Minnesota Board of Dentistry, 2020)
  - **Mosby’s Dental Dictionary**
    - “Clinical”, pertaining to a clinic or pertaining to direct patient care, or materials used in the direct care of patients. (Zwemer, 1998)
  - **Dental Board of California**
    - “Clinical Experiences” means procedures, performed with or without faculty intervention, that the candidate must complete to satisfaction of his or her clinical faculty prior to submission of his or her portfolio
examination application. Clinical experiences have been determined as a minimum number in order to provide a candidate with sufficient understanding, knowledge, and skill level to reliably demonstrate competency. (Dental Board of California, 2019)

- **Arizona State Board of Dental Examiners**
  - “Clinical Evaluation” means a dental examination of a patient named in a complaint regarding the patient’s dental condition as it exists at the time the examination is performed. (Arizona State Board of Dental Examiners, 2020)

**References**


