

# School Information for

## ***DENTAL***

# Candidates

W.R.E.B. EXAMINATION

May 1 – May 4, 2020



OREGON  
HEALTH & SCIENCE  
UNIVERSITY

Oregon Health & Science University, School of Dentistry  
2730 SW Moody Ave, Portland, Oregon 97201

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# Oregon Health & Science University School of Dentistry

## 2020 W.R.E.B. EXAMINATION

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### Candidate Information

#### Hotels

Marriott Resident Inn	2115 SW River Parkway	503-552-9500
Marriott	1401 SW Naito Parkway	503-226-7600
Double Tree Lloyd Center	1000 NE Multnomah	503-281-6111
Motel 6	3104 SE Powell	503-238-0600
Hotel Deluxe	729 SW 15 <sup>th</sup> Ave	503-223-6311
Red Lion Hotel	1021 NE Grande Ave	503-235-2100
Hotel Lucia	400 SW Broadway	503-225-1717
Hotel Fifty	50 SW Morrison	503-221-0711
The Inn at Marquam Hill	3412 SW 13 <sup>th</sup> Ave	503-223-6617
Travelodge	2401 SW 4 <sup>th</sup> Ave	1-800-578-7878

### Directions to 2730 SW Moody Ave

#### **From the Portland International Airport:**

Travel East on NE Airport Way, merge on to 1-205 south towards Salem. Merge onto I-84 west, exit 21B to Portland. Merge onto I-5 South via the exit on the left toward Salem/Beaverton. Merge onto I-405 N via the exit on the left toward City Center. Take Exit 1B onto SW 4<sup>th</sup> Ave. Proceed to SW Harrison and turn Right following streetcar rails. SW Harrison will become SW River Parkway. Continue following streetcar rails and turn right onto SW Moody Ave. Oregon Health & Science University School of Dentistry will be on your left approximately .8 miles.

#### **From Portland City Center**

Travel east towards the river to SW Naito Parkway. Turn right on to SW Naito Parkway. Turn left onto SW Harbor Dr. Turn Left onto SW River Parkway. Continue on SW River Parkway following streetcar rails and turn right onto SW Moody Ave. Oregon Health & Science University School of Dentistry will be on your left approximately .8 miles.

**From Southeast Portland:**

Travel north on SE McLoughlin Blvd. or west on Powell Blvd. Cross the Willamette River via the Ross Island Bridge and take the City Center exit. Follow Corbett Ave. (staying in the left lane) as it turns into Kelly Ave. Turn right onto SW Water Ave and take 1<sup>st</sup> right onto SW Arthur St. Turn left onto SW Corbett Ave. Turn right onto SW Sheridan St. Turn right onto SW Moody Ave. Oregon Health & Science University School of Dentistry will be on your right approximately .8 miles

## **Parking and Transportation**

Please know that parking on the Oregon Health & Science University campus is limited. Each candidate and each assistant who do not already have an OHSU parking permit will need to purchase a parking permit from the pay station in the Schnitzer Lot located one (1) block north of the entrance to the school. You will need to purchase a new parking permit each morning for parking during screening and orientation days as well as the Monday of the Exam. The price of the parking permit at this time is \$10.00 for a full day pass. Patient parking is available for your patients, standard parking fees will apply. Parking validation will not be made for patients or candidates here for WREB related activities. Parking is monitored and fines will be assessed for parking without a permit. **There is no charge for parking on Saturday or Sunday in the Schnitzer Lot.** No unauthorized parking in the handicap spaces, WREB Examiner areas, or in the state service vehicles areas. Do not leave your car parked overnight.

Trimet bus system is also available for public transportation. You can access the Trimet bus routes and schedule by going online to [www.trimet.org](http://www.trimet.org).

Portland Street car is available from downtown Portland. You can access the Street Car route and schedule by going on line to [www.portlandstreetcar.org](http://www.portlandstreetcar.org).

**Taxi Cab Companies:**

Radio Cab: 503-227-1212

Broadway Cab: 503-227-1234

## **Food and Lunch Facilities**

Vending machines, Starbucks and Elephant's Deli are located on the first floor of the **Collaborative Life Science Building**. Within walking distance of the school Pizzacato and Cha Cha Cha's are located 1 block to the south of the school.

## **Screening Patients**

Candidates may use the School of Dentistry to screen patients from 9:00 a.m. to 4:00 p.m., Monday, April 27th through Thursday, April 30th. **The Oregon Health & Science University School of Dentistry cannot provide patients for candidates.** Recruitment of patients is entirely up to the candidate. Some candidates looking for patients in the area choose to visit community clinics, contact local dentists or post information at nearby Universities. It must be clear that WREB candidates are not acting on the part of Oregon Health & Science University and that the arrangements made are private between the candidate and the patient. You may be approached by a patient “broker”. Be aware these people are not affiliated with WREB or OHSU, and often misrepresent themselves. We prefer them not to be on Oregon Health & Science University premises. Patient procurement brokers will be asked to vacate the premises if found present during the WREB exam dates and hours.

**\*Please check in at the Patient Reception Desk before going into the clinic. Request Alexandria Dewey.**

## **Radiology Supplies and Information**

Digital imaging will be used for the screening of patients. Images will be imported into MiPACS under the candidate ID # and labeled by the procedure (i.e. # 12 DO, periodontal scaling, etc.). Radiology Staff at OHSU will assist candidates in the imaging and importing process. Please let the Radiology Staff know ahead of time if you will need their assistance. Prior to taking any radiographs an “Authorization for dental x-rays for exam” must be signed by a licensed Oregon dentist. A copy of the form is attached.

If you are taking digital images at another “accredited dental school”, you may either print out the images to WREB specifications at that facility or bring in the images on an encrypted USB or disc. If the candidate is to bring in the digital images, they should be in jpg format and as individual images. Specific instructions on how to import, as well as help from Radiology Staff, will be available if requested.

**Endodontic radiographs** will be taken with digital imaging in the Endodontic Lab. Instructions on how to capture in MiPACS and use the radiographic exposure unit cubicles will be posted in the lab.

**Provisional Acceptance Images** can be submitted to WREB for current OHSU student candidates only.

If you have any further radiology questions, contact the Radiology Department at 503-494-8930.

**This facility is digital only.**

## **Handpiece and Adapter Rental**

The Main Clinics and Endodontic Lab are set up for both 6-Pin turbine handpieces and electric handpieces. Turbine handpieces that are 5-Pin will need to have an adapter. This adapter is necessary for the operation with some power optic systems. There will be 6-Pin turbine handpiece kits available for rental if you absolutely must rent. **Availability is limited and on a first come, first served basis.** You may contact Alexandria Dewey at (503) 494-8857 or email [deweya@ohsu.edu](mailto:deweya@ohsu.edu) to reserve handpiece kits (be sure to put "WREB" in the subject box).

**Payment for the rentals must be CASH. All deposits must be CASHIERS CHECK or MONEY ORDERS.** Inventory will be taken before and after the rental time with the candidate. Deposits are refundable and need to be individual per kit for refund purposes. Deposits will be refunded once all equipment is returned in original rented condition.

**Important Note: Handpieces MUST be reserved prior to the exam.**

<b><u>Rental Kits</u></b>	<b><u>FEES</u></b>	<b><u>Deposit</u></b>
Handpiece Adapter	\$ 25.00	\$250.00
Handpieces (highspeed and coupler)	\$ 75.00	\$765.00
(slowspeed coupler, motor and latch attachment)	\$ 75.00	\$720.00

If you wish to purchase a 5-Pin to 6-Pin Adapter, contact A-dec at (503) 538-9471.

Dental units have water hookup for ultrasonic scalers. **Candidates must supply their own ultrasonic scaler / cavitron.**

Air/ water syringe tips are disposable and will be provided. **No steel air/water syringe tips will be allowed.** It is highly recommended that candidates set up and try equipment prior to the exam.

OHSU does not have a supply / school store for materials, equipment or supplies.

## Clinic Supplies

**The ONLY supplies for the clinical procedures provided by the school are:**  
Brands furnished will be those used by the school.

Disinfectant	Paper towels	Soap
Face mask	Gloves	Patient bibs
Facial tissue	Standard saliva ejectors	Tray covers
Headrest covers	Oral evacuator tips	Disposable paper gowns
Air / water syringe tips	Drinking Cups	Mouthwash
Disposable instrument trays	Trash bags	Matches
Topical anesthetic	Short and long needles	Local anesthetic
Cotton rolls	Cotton pellets	Cotton swabs
Prophy paste	Floss	2 X 2 cotton squares
Unidose composite	Rubber dam	Rubber dam napkins
Amalgam capsules	Bonding agent	Polishing materials for restorations
Etchant	Primer	Transport Gel (PreKlenz/OptiPro)
	Plastic Barriers	Mylar strips
Wedjets	Caries indicator (green)	Articulating paper

ALL other supplies including anesthetic syringes, impression materials, retraction cord, cements, instruments, curing lights and cavitrons must be **provided by the candidate**. To use the unidose composite material you will need to bring your own dispensing Gun.

## Endodontic and Prosth Clinic Equipment and Supplies

Candidates will be using a Model P-6/5 Frasco Mannequin head. The upper and lower carrier trays of the Acadental ModuPRO E120 MQR PC (**Magnetic TYPE**) endo kit snap into the mannequin head and shrouds will be provided. The laboratory has natural gas lines for Bunsen burners. **The school does not provide the burners or other heat sources.**

Candidates will be mounting the ModuPRO™ on a mannequin for the Endodontic exam. Acadental ModuPRO™ Endo Kits can be purchased in the OHSU Dental School Logistics Center. These kits must be pre-ordered as early as possible. If you have any questions about the Acadental ModuPRO™ Endo Kits please contact Keith Lavadour, OHSU Dental School Materials Management, (503) 494-8847 or email [lavadour@ohsu.edu](mailto:lavadour@ohsu.edu) (be sure to put "WREB" in the subject line).

The **ONLY** supplies for the Endodontic lab provide by the school include...

Face masks	Disposable paper gowns	Gloves
Paper towels	Brown paper for bench tops	2 X 2 cotton squares
Rubber dams	RC Prep	Digital radiographic supplies
Cotton pellets	Gutta percha master cones .02 and .04 and accessory points	4 sizes of paper points
Endodontic sealer	Isopropyl alcohol	HVEs
Sodium hypochlorite	Disposable irrigation syringe for sodium hypochlorite	PVS material

**Endo Files are not provided!**

All other supplies and instruments must be provided by the candidate.

### **Emergency Equipment**

Emergency equipment locations are indicated on the enclosed floor plan. This information will also be given during orientation. The employees located in the front lobby of each floor are there to aide you in case of a medical emergency.

### **OHSU Infection Control Standard**

#### **Personnel Protective Equipment**

1. Appropriate protective clothing must be worn to prevent skin exposure and soiling of street clothes when contact with body fluids (blood/saliva) is likely. Disposable barrier gowns are available in the clinics and endo laboratory. Gowns are not to be worn in non-clinic areas (i.e. elevators, lunch room, bathrooms).
2. Powderless disposable latex free (Nitrile) gloves are located throughout the clinics. Utility gloves should be worn during cleaning of contaminated instruments.
3. Masks are located at each operatory in the clinics. The mask must be changed as soon as possible if visibly soiled or wet and must be changed between patients.
4. Candidates are to provide their own OSHA acceptable protective eyewear, as well as protective eyewear for their patients.
5. Antiseptic soap is available at sinks in all clinics. Waterless, alcohol based hand cleaner is located throughout the clinics.



## Operatory Set-Up / Break Down

1. Check for and remove any hardened material (i.e. impression material, cement) on air/water syringe, suctions and handpiece hoses.
2. Clean and disinfect the dental unit and attachments (i.e. air/water syringes, high/low suctions and hoses / cradles) with Sani-cloth wipes.
  - A) Wipe all surfaces (except upholstery) with Sani-cloth.
  - B) If visible blood is present on a surface:**
    1. Use Sani-cloth wipe.
    2. Wipe surface to remove blood.
    3. Use new Sani-cloth and wipe surface again.
  - C) Surfaces should remain wet for 3 minutes.
  - D) Wipe upholstery with mild soap and water.
  - E) Wipe off any remaining wetness on these surfaces after 3 minutes.
3. Place plastic barriers over light handles, light switch, and head rest.
4. Attach disposable saliva ejector, high-speed evacuation tip and air/water syringe tip and then cover with plastic barriers.
5. Flush all air & water lines for 2 minutes prior to use on the first patient of the day (30 second flush prior to subsequent patients of the day).
6. ICX tablet (supply in operatory) must be added to the unit's water bottle at each refill.

## Hazardous Waste, Sharps and Amalgam Disposal

1. Blood/saliva soaked non-sharp waste is considered hazardous waste and must be disposed of in the biohazard bags located in each operatory then removed to the large biohazard waste container in Dispensary Return.
2. All needles, anesthetic cartridges and other sharps/potential sharps are to be placed in the red plastic sharps containers which are located in each operatory. Red sharps containers are also located in the Dispensary Return.
3. Plastic containers are located in the Dispensary Return for disposal of scrap amalgam. Empty amalgam capsules are also collected in a different container in the Dispensary Return; **do not put them in the garbage.**

## Cleaning and Sterilization

All non-OHSU candidates **must come prepared** with enough instruments and handpieces to supply themselves for the entire exam. We do not have instruments other than handpieces for rental or to “borrow”. OHSU highly encourages bringing extra instruments in case of patients being declined, instruments being dropped or breakage. OHSU will not assume responsibility for lost or broken instruments. Sterilization services are unavailable.

The instrument cleaning process is one of the most common sources of instrument – stick injuries: therefore, utility or non latex exam gloves are to be worn during the instrument cleaning procedure. To reduce the risk of splash or splatter contamination, a gown, mask and glasses should also be worn when cleaning and bagging instruments.

1. Rental Handpieces should be placed in a headrest cover and returned to Alexandria Dewey when done to receive deposit back. They will be lubricated following the manufacturer’s protocol, bagged and sterilized. (Do not use OptiPro Pre-Cleaner on hand-pieces)
2. Spray OptiPro Gel Pre-Cleaner (located at sinks in clinics) on instruments to prevent debris/blood from drying on the instruments.

All OHSU candidates must follow sterilization rules and recommendations as always.

## Tours

A tour of the facility will be held at the candidate orientation only. We are unable to provide tours prior to the day of the candidate orientation.

## School Contact

If after reading this information you have any further questions or concerns, please contact **Alexandria Dewey 503-494-8857** email at [deweya@ohsu.edu](mailto:deweya@ohsu.edu).

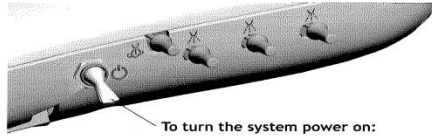
## QUICK START



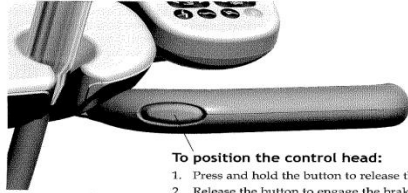
**Before using the system:**

1. Drop one A-dec ICX® tablet into the empty bottle (do not touch tablet).
2. Fill with tap water.

*(For detailed instructions on water usage, see the Self-Contained Water System Instructions For Use, p/n 86.0609.00.)*

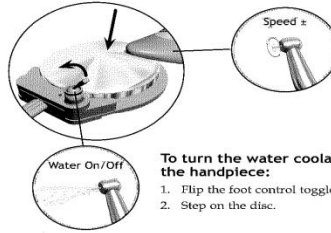


**To turn the system power on:**  
Flip the toggle up.



**To position the control head:**

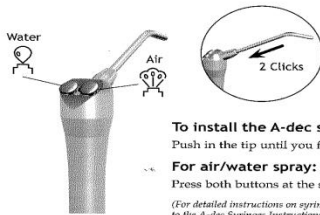
1. Press and hold the button to release the brake.
2. Release the button to engage the brake.



**To turn the water coolant on and operate the handpiece:**

1. Flip the foot control toggle toward the blue dot.
2. Step on the dial.

1

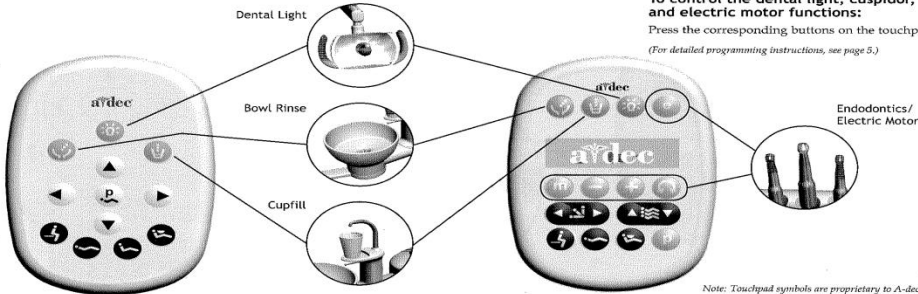


**To install the A-dec syringe tip:**  
Push in the tip until you feel two clicks.

**For air/water spray:**  
Press both buttons at the same time.

*(For detailed instructions on syringe usage and maintenance, refer to the A-dec Syringes Instructions For Use, p/n 85.0680.00.)*

**To control the dental light, cuspidor, and electric motor functions:**  
Press the corresponding buttons on the touchpad.  
*(For detailed programming instructions, see page 5.)*



*Note: Touchpad symbols are proprietary to A-dec Inc.*

86.0092.00 Rev D

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# ADJUSTMENTS



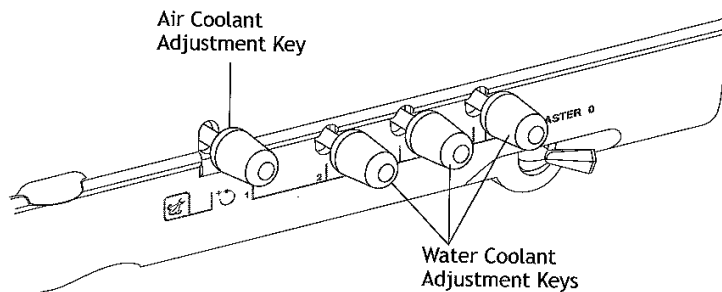
Your A-dec 500 system includes a number of built-in features that allow you to easily make adjustments. The following adjustment areas are covered in this section:

- Handpiece controls
- Handpiece and control head positioning
- Tray holder and flexarm tension

## Handpiece Controls

A-dec 500 delivery systems supply and regulate air and water to operate dental handpieces, syringes, and ancillary devices. You can adjust the delivery system water coolant flow, air flow, and drive air pressure.

Figure 18. Handpiece Adjustment Keys



### Water Coolant Flow

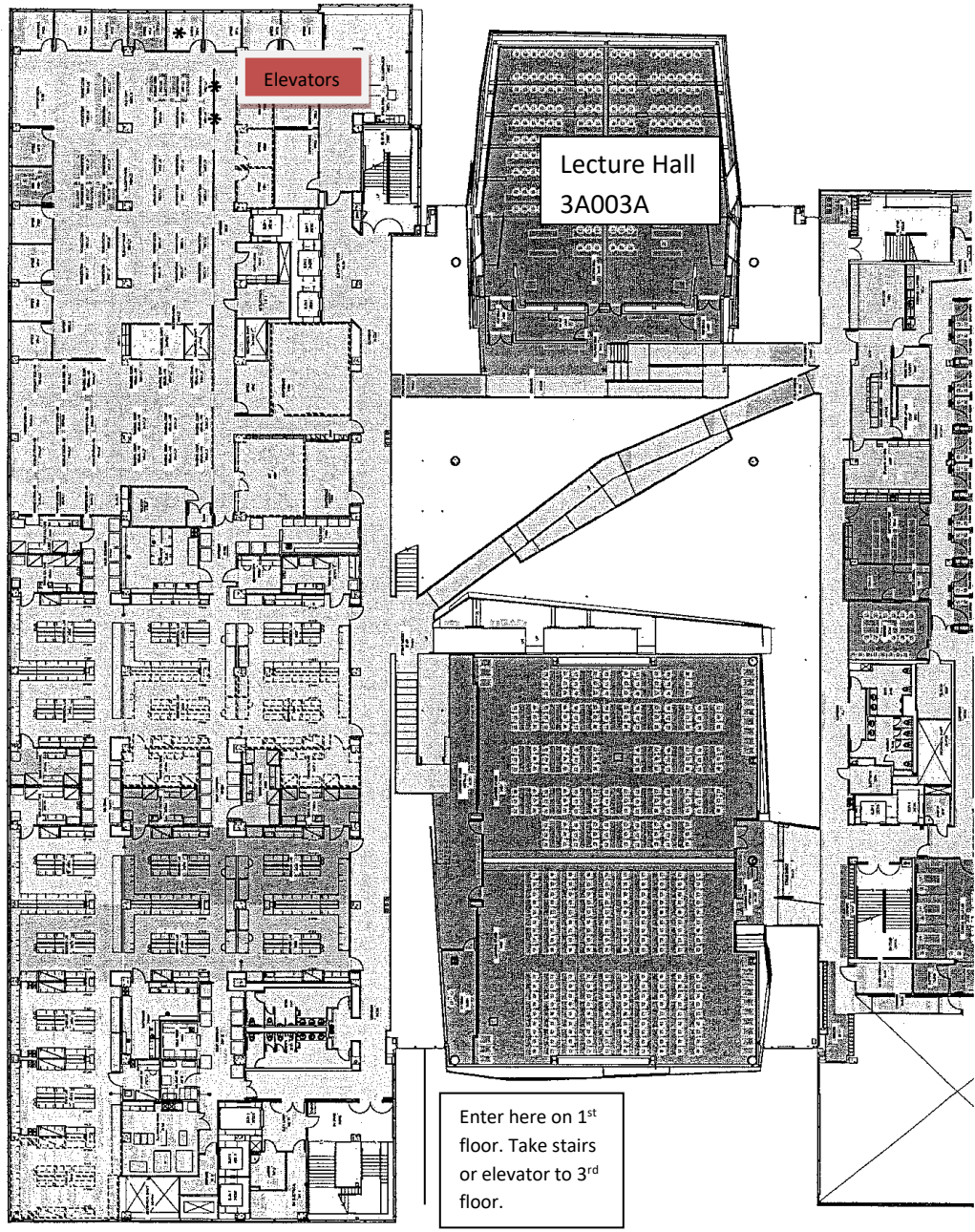
The system provides water coolant flow control for each handpiece. Use the adjustment key to complete the adjustments (see Figure 18):

1. Turn the drive air, air coolant, and water coolant all the way down (clockwise). For instructions on accessing drive air pressure controls, "Drive Air Pressure" on page 20.



**NOTE** Air and water coolant adjustment keys are not intended to completely shut off flow.

2. Lift a handpiece from the holder.
3. Turn the water coolant on using the footswitch wet/dry toggle or touchpad.
4. Press the foot control to activate the handpiece.
5. Use the adjustment keys on the side of the control head to adjust the water coolant flow (normally about 1 - 2 drops per second). Turn the key clockwise to decrease flow and counterclockwise to increase flow.



# **AUTHORIZATION OF DENTAL XRAY FOR EXAMINATION**

**Based on my examination of \_\_\_\_\_**

**(patient's name)**

**on \_\_\_\_\_, I believe that exposure of the following**

**(date)**

**radiographs is justified and to his/her best interest healthwise**

**at this time. I therefore authorize the following views to be made: \_\_\_\_\_**

\_\_\_\_\_

\_\_\_\_\_  
**(signature of dentist)**

\_\_\_\_\_  
**Candidate Name, Candidate Number, Phone Number**

\_\_\_\_\_