FREQUENTLY ASKED QUESTIONS

1. **May I use a foreign trained dentist as my Dental Assistant?**
   Operative Assistants may not be dentists (including graduates of ADA accredited and non-accredited dental schools) or be in their final year of dental school. Operative Assistants may be Dental Assistants or Dental Hygienists, if they do not hold a permit to place and finish restorative materials.

2. **What is the minimum age a patient can be? If my patient is under 18, does the parent or guardian need to stay during the procedure?**
   The minimum patient age for the Periodontal Treatment procedure is 18 years.
   There is no minimum age for Operative procedures. A parent or guardian does not have to remain during the procedure. The parent or guardian will need to sign the *Patient Consent Form and Assumption of Risk* on the back of the *Patient Medical History* form.

3. **When are my Assistant and my patient allowed on the clinic floor to start the exam? When can I put my patient in line for acceptance or grading?**
   Assistants and patients may enter the clinic with you at 7:00 a.m. on Clinic Days 1, 2, and 3. For patient comfort, patients should not be sent to the grading area any earlier than 7:45 a.m. The exam officially begins at 8:00 a.m.
   The patient line will not move until 8:00 a.m. Candidates who are assigned Endodontics/Prosthodontics the first morning of the exam may not submit patients until 10:00 a.m. (See details under “General Information-Schedule and Clinic Hours.”)

4. **Do I have to have my patient in line for grading by 10:30 a.m. on the last day of the exam?**
   You have until 11:00 a.m. to have your patient in line for grading on the last day. The first two days of the exam, your patient must be in line for grading by 4:00 p.m. (See details under “General Information-Schedule and Clinic Hours.”)

5. **Are translators allowed on the clinic floor?**
   Translators will be allowed on the clinic floor or in the grading area only as needed. Translators will be asked to remain in the patient waiting area until, or if, their services are required.

6. **What are Floor Examiners?**
   Floor Examiners assist Candidates on the clinic floor:
   - Answer questions, clarify exam procedures
   - Act as liaisons between Candidates and Grading Examiners
   - Have extra forms for Candidates such as *Patient Medical History/Patient Consent Forms* and *Follow-Up Care Agreements*
   - Initial *Patient Medical History* forms
   - Distribute forms from Examiners that affect Candidates and procedures
   - Check on modifications (see “Operative-Modification Procedure”)

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• Manage pulp exposures
• Check and initial steps in the processes involved on worksheets. (See “Operative-Patient Acceptance” or “General Information-Exam Personnel and Anonymity.”)

7. May I anesthetize my patient before I send him/her to the grading area for approval to start?
   For Periodontal Treatment patients, you should anesthetize the quadrant(s) submitted for acceptance to facilitate Examiner evaluation and for patient comfort. For Operative patient check-in for acceptance, you may anesthetize patients at your discretion. Local anesthetic can be administered after the Floor Examiner has reviewed and initialed the Patient Medical History.

8. May I submit two Operative restorations for acceptance at the same time?
   If the procedures are on the same patient but not on adjacent teeth and accepting both would not cause the loss of occlusal contact, they may be submitted for acceptance at the same time. You may not submit patients with adjacent teeth (consecutive tooth numbers for acceptance. (See details under “Operative-Patient Acceptance.”)

9. If I have two Operative restorations approved to start, do I have to do both preparations that day?
   You may do only one preparation if you choose. For the procedure that has been accepted but not started, bring your worksheet to a Floor Examiner for the proper paperwork. (See details under “Operative-Dismissal for the Day Approval.”)

10. Do I have to work with a rubber dam?
    You do not have to work with a rubber dam, but a rubber dam is required when submitting a patient for the preparation grade or when requesting a modification request for your patient on the Candidate clinic floor. (See details under “Operative-Preparation Grade.”)

11. When do I call a Floor Examiner to check for a modification of outline or internal form?
    When removal of caries, affected dentin, unsound demineralized enamel, or remaining restorative material will extend the outline and/or internal form of the preparation beyond the criteria for a “5”. (See details under “Operative-Modification Procedure.”)

12. How do I write a modification request?
    Write the type, location, extent, and reason (i.e., caries, affected dentin, unsound demineralized enamel, or remaining restorative material) for the “Modification Request(s)” in the spaces provided on the procedure worksheet. The space on the worksheet is limited, therefore, you are encouraged to write the total extent required to remove the lesion on your initial modification request(s) in 0.5 mm increments (i.e., 0.5 mm, 1.0 mm, 1.5 mm). A Floor Examiner will be available to answer any questions you may have.
13. **When do I need original radiographs? And, when do I not?**

Operative procedures require original radiographs of the tooth taken within the prior six (6) months. The radiographs must show the current condition of the tooth. Duplicates are not acceptable. Separate radiographs or images are needed for each procedure. (See details under “Operative-Patient Acceptance.”)

The Periodontal Treatment procedure requires complete mouth periapical radiographs, including bitewings. The radiographs must have been taken within the past three (3) years. Original radiographs are preferred, but duplicates are acceptable if they are of diagnostic quality. (See details under “Periodontal Treatment-Patient Acceptance.”)

14. **If WREB considers all exposures avoidable, how do I deal with an exposure or near exposure?**

The preferred procedure is to leave a small amount of caries or affected dentin (0.5 mm) over the pulp to avoid an exposure. Write in the “Note to Examiners” on the worksheet your intentions. All other caries in the preparation must be removed. If an exposure does occur, write in the “Note to Examiners” on the worksheet your intentions regarding the exposure and how it will be managed, place a rubber dam (if not already in place) and call a Floor Examiner. Upon verification of the exposure, a Floor Examiner will instruct you to place a pulp capping material over the exposure as soon as possible. (See details under “Operative-Cavity Preparation.”)

15. **Can my assistant dismiss my patient while I am in the Endodontic Section?**

Yes, if there is no follow up required when your patient returns from the grading area. Remember, a Floor Examiner’s initials are required on worksheets for patient release from the exam.

16. **How many initials from Examiners do I need on my worksheet?**

It depends on what portion of the restoration you are doing. One initial is required at Acceptance, at least two initials if you have sent a note with a modification procedure and three initials are required if you have sent a patient for grading. (See details and sample worksheet under “Operative.”)

17. **When do I have to go to the simulation lab to do my Endodontic/Prosthodontic Section?**

All Candidates will be assigned a specific time block for the Endodontic Section and a separate time block for the Prosthodontic Section, if enrolled. Your specific schedule will be posted to your Candidate Profile on wreb.org approximately four (4) weeks prior to the exam. You may go to the simulation lab any time during your assigned block for each exam; however, it is recommended you be in the simulation lab in the first 30 minutes to avoid any delay getting your “Setup Check.” Candidates arriving later will be admitted, but will not receive time extensions. You must turn in all required materials at the end of the time block or you will receive a late penalty. There are no exceptions.
18. **My patient was provisionally accepted for my Operative procedure. Can I begin treatment at 8:00 a.m.?**

Yes, provided that ALL of the following have been completed:

1. The patient’s *Patient Medical History* form has been reviewed and initialed by a Floor Examiner.
2. Your provisionally accepted patient has been clinically examined by a Floor Examiner for Acceptance Criteria (starting a preparation without Floor Examiner approval results in failure of the Operative Section).
3. The operative worksheet has been initialed for acceptance by the Floor Examiner.

19. **If I have a patient that was provisionally accepted but am not using, can my friend use this same patient?**

Yes, but your friend must submit patient for acceptance. Provisional Acceptance does not transfer between Candidates. (See details under “Operative-After Submission.”)

20. **When do I take the Comprehensive Treatment Planning (CTP) computerized Section?**

The CTP computer-based section can be taken at a Prometric Testing Center. Once you are enrolled in an exam, information will be emailed to you. This will include the time frame to take the exam, Prometric’s contact information to schedule your appointment, and your eligibility number.

21. **Can I change my assigned time for the Endodontic/Prosthodontic Sections?**

No. Once schedules are posted, they cannot be changed. Schedules are arranged in advance and in the best interest of all Candidates, taking into consideration space availability, supplies, and exam materials. Schedules are made to give Candidates the optimum open block time and to maintain patient flow in the grading area.

22. **What identification do I need to provide at the exam?**

Candidates MUST present acceptable and valid identification in order to be admitted to the WREB Dental Exam. On Orientation Day, you shall appear in person and provide two (2) valid, non-expired forms of identification. (See WREB Exam Security and Identification Verification under “General Information.”) You will not receive your white *Candidate Packet* without proper identification.

23. **Do I need to complete two Operative preparations?**

If you are successful, (3.00 or higher), on the first procedure, the section is passed, with no need to complete another procedure. If the first procedure scores below a 3.00, you may proceed with a second procedure, which will be averaged with the first procedure. For states requiring two (2) Operative procedures, Candidates will have the option to complete a second procedure, even if the first procedure scored above a 3.00. If two procedures are completed, the two procedure scores will be averaged. The average of the two procedure scores must be 3.00 or higher to pass the section. If a second procedure is completed and the average scores below 3.00, the Operative Section is failed. In this instance, the Candidate must pay to retake the full Operative Section at a different site. No onsite retakes are available for the Operative Section.
24. I have passed all required sections of the WREB Exam but I may need to take the Prosthodontics Section for licensure. Can I take it at a future exam site?

Yes. If you have completed core sections of the WREB Exam (CTP, Operative, and Endodontics) and then want to take the Prosthodontic Section, you can do this anytime in the same calendar year simply by applying for the section online.

If you are returning the following year or beyond, then you are required to send your request to dentalinfo@wreb.org advising which state board is requiring you to take the Prosthodontic Section for licensure. Once your request is received and approved by WREB, we will assist in enrolling you for the Section.

25. I am taking the WREB Exam; however, I am not a student at the school where I am testing. Am I allowed to participate in Provisional Acceptance?

You will need to review the “Site Information” available at wreb.org. If you are allowed to participate, you will need to communicate with the site contact or coordinating person at the school to determine the school’s requirements for submission of images.

26. If I finish my Endo Section early, can I begin work on Operative or Periodontal procedures?

Yes. Operative and Periodontal Treatment procedures may be performed any time during Clinic Days 1-3 that you are not working in your assigned Endodontic or Prosthodontic Sections.