# **Mission Statement**

The mission of WREB is to develop and administer competency assessments for State agencies that license dental professionals.

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BE SURE TO VISIT US ONLINE at wreb.org for a complete preparation and understanding of the WREB examination process. This information supplements this Candidate Guide and is made available to assist preparation for a successful exam!

#### **INFORMATION FOR DENTAL CANDIDATES**

- Appeals Policy and Forms
- Application Process
- Cancellations and Refunds Policy
- Candidate Guide Practice Test
- Checkmate One Instructional Video
- Clinical Candidate Guide
- Clinical Exam Candidate Preparation Tutorials
- CTP Exam Candidate Guide
- CTP Exam Candidate Tutorial
- Dental Candidate Orientation Webinar
- Dental Exam Schedule
- Exam Forms
- Frequently Asked Questions and Advice
- Policies and Procedures
- Request Score Reports/Exam Information
- "Site Information"
- Special Accommodations Policy and Form

#### GENERAL INFORMATION

- WREB's Mission Statement
- History of WREB
- Frequently Asked Questions and Advice

#### **CURRENT PUBLICATIONS**

- Current Newsletters
- Published Articles and Position Papers

#### LINKS AND OTHER INFORMATION

- Member State Boards
- States Accepting WREB
- Prometric Test Centers for CTP Exam

### CONTACT US

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#### **GENERAL INFORMATION**

#### Welcome to the WREB Dental Exam

This *Candidate Guide* provides information needed for taking the dental exam. Candidates should study this *Guide* carefully and may refer to this *Guide* during the exam. Additional information about the exam process and preparing for the exam is available at the WREB website: wreb.org.

The WREB Exam is developed, administered, and reviewed in accordance with applicable guidelines from the American Dental Association, the American Association of Dental Boards, the American Psychological Association, the National Council on Measurement in Education, and the American Educational Research Association. The exam is developed to provide a reliable clinical assessment for state boards' use in making valid licensing decisions.

Since WREB member states cover a large geographical region and candidates come from an even larger area, efforts have been made to make the exam unbiased with respect to regional practice and educational differences. WREB seeks educational diversity in the makeup of the exam review committees, including practitioners and educators who evaluate test content and develop the scoring criteria.

WREB Examiners are experienced practitioners from diverse backgrounds and locations. They are calibrated and tested prior to each exam. After calibration training, Examiners are individually evaluated to assure they are able to grade according to the established criteria.

All official WREB documents contain the WREB logo. Schools or other individuals may prepare forms and schedules to assist candidates. However, these documents are not authorized by WREB and may contain inaccurate information. WREB does not sponsor nor endorse examination preparation courses.

Candidates bear all risk for any misunderstanding resulting from the use of or reliance on unofficial information or material.

#### **Candidate Tutorials**

WREB will no longer be hosting onsite Candidate Orientations. Candidate Tutorials are available at wreb.org. Candidates are encouraged to watch the tutorial for each section they are challenging including the General Information Tutorial.

#### **Exam Content: Required Sections**

For this exam, candidates are required to complete the following:

**Comprehensive Treatment Planning (CTP)** – A three (3) hour computer-based Authentic Simulation Clinical Exam using case materials provided by WREB. The exam is administered through Prometric Testing Centers. The exam consists of three (3) patient cases of varying complexity, one of which is a pediatric patient. For each case, candidates assess patient history, photographs, radiographs, and clinical information; create and submit a treatment plan; and then answer questions related to each case.

**Operative** – The Operative section is required and is performed either on a patient or in simulation on a manikin, depending on availability at each exam site and on the state board requirements that need to be satisfied. Candidates are responsible for understanding and satisfying the licensing requirements of the states where they intend to become licensed.

<u>Operative Patient:</u> One or two (2) restorative procedures performed for a patient.

A direct Class II restoration must be completed. The restoration can be a Class II Composite or Amalgam (MO, DO, or MOD).

A second procedure, if required, may be one of the following:

- Direct Class II Composite or Amalgam restoration (MO, DO, or MOD)
- Direct Class III Composite restoration (ML, DL, MF, DF)

<u>Operative Simulation</u>: A three and a half (3½) hour exam during which two (2) operative (restorative) procedures are performed on simulated teeth. For purposes of simulation, the procedures are divided into two tasks: Preparation and Restoration.

Preparation:

- A Class II Composite or Amalgam (conventional MO for Tooth 14)
- A Class III Composite (DL for Tooth 9)

Restoration:

- A **Class II Composite or Amalgam** (conventional MO for Tooth 14) The restorative material must be the same as is specified for the Class II preparation.
- A Class III Composite (DL for Tooth 9)

**Endodontics** – A three (3) hour exam consisting of two (2) procedures on simulated teeth:

- 1. Anterior Tooth Procedure: Treat one maxillary central incisor including access, instrumentation, and obturation.
- 2. Posterior Tooth Procedure: Access one mandibular first molar. Access on the posterior tooth must allow Grading Examiners to identify all canal orifices.

# Exam Content: Elective Sections

Candidates may also elect to complete the following, depending on requirements of the states to which they are applying for licensure:

**Periodontal Treatment** – A patient is submitted for acceptance, then root-planing and scaling are completed, and the patient is submitted for grading.

**Periodontal Simulation** – The patient-based Periodontal Treatment section will not be available at all exam sites. Some sites will only provide simulation for the Periodontics section. Some states accept the Comprehensive Treatment Planning (CTP) Exam in lieu of Periodontal Treatment or Simulation. Candidates are responsible for understanding and satisfying the licensing requirements of the states where they intend to become licensed.

**Prosthodontics** – A three and a half (3½) hour exam consisting of two (2) procedures on simulated teeth:

- 1. Preparation of an anterior tooth for a full-coverage crown.
- 2. Preparation of two abutments to support a posterior three-unit fixed partial denture prosthesis.

In addition to the evaluation of clinical abilities, diagnostic and professional judgment are also factors considered in the evaluation. Candidates are expected to know when a tooth requires a restoration, as well as the extent of restoration required.

Additional details for Operative, Simulation Operative, Endodontics, Periodontal Treatment, and Prosthodontics are provided later in this *Guide*. Additional details for Comprehensive Treatment Planning (CTP) are available in the *CTP Exam Candidate Guide*.

# Passing Requirements

Completion of the exam requires passing the three (3) core sections (CTP, Operative [or Operative Simulation], and Endodontics) within a twelve (12) month period. The Operative Simulation section is a core exam substitute for the Operative Patient section. The twelve (12) month window begins with the first attempt at the clinical (or clinical simulation) exam. The clinical exam (Operative and Endodontics sections) must be attempted within the same exam year as the CTP section.

The CTP section is typically taken in the fall prior to the clinical exam. For example, if a 2021 CTP section is taken in the fall of 2020 after registering for the 2021 exam, the first attempt at the clinical exam must be in 2021. If any of the three core sections is failed, the WREB Exam is failed until the failed section(s) is/are passed. If every core section is not passed within twelve (12) months of the first clinical attempt, all three core sections must be taken again.

Failure of one (1) clinical section allows the opportunity to retake just the failed section within the twelve (12) month window. Exceptions to this policy will apply when the twelve (12) month period spans different testing years and significant changes to the exam occur.

If candidates complete and pass the core exam requirements with the Operative Simulation section, they can challenge the standard patient-based Operative section in the future and append the results to their Individual Score Report (if needed for licensure).

A candidate can challenge the standard patient-based Operative section, score 3.0 or better on their first Class II and pass the section with one patient-based procedure. The candidate, later at a different exam, could challenge the Operative Simulation section also if, for example, a simulated Class III as well as a patient-based Class II procedure were needed for licensing. However, a candidate would not be able to take only the Class III in the Operative Simulation section; they would need to challenge and pass the entire Operative Simulation section to add a simulated Class III procedure to their Individual Score Report.

Final results for all sections attempted, core and elective, whether passing or failing, are reported to state boards. This includes initial, retake, and onsite retake attempts.

State boards requirements vary on section, procedure, and scoring. Candidates are responsible for knowing the licensing requirements of the state where they plan to practice.

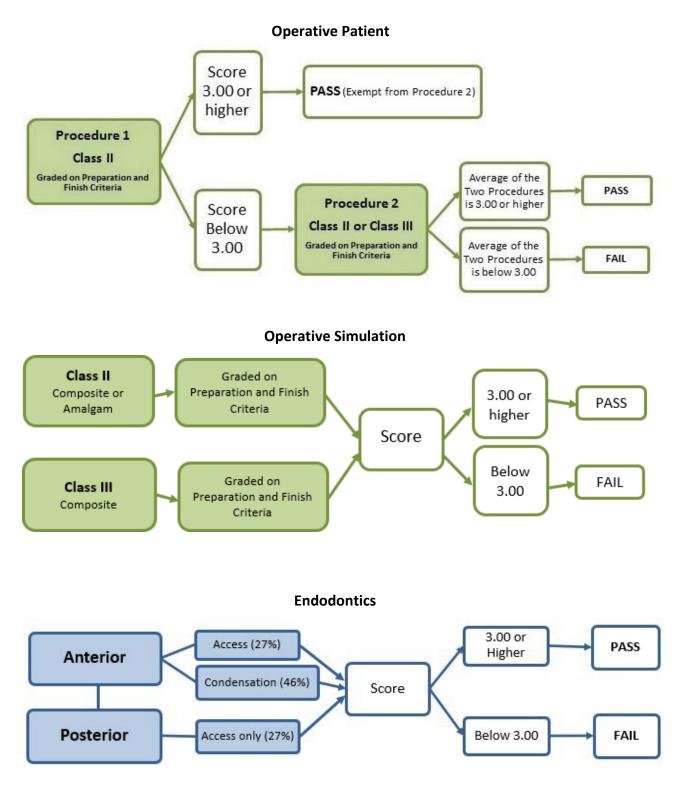
#### Remediation

Candidates who fail any section of the exam, core or elective, three (3) times, are required to obtain formal remediation in the areas of failure prior to a fourth attempt. Upon failing a section a fourth time, additional remediation is required. WREB will specify the required hours of remediation. Individual states may have more stringent requirements for remediation. Candidates who have failed any section of the exam two or more times should contact the state in which they are seeking licensure to confirm the state's requirements.

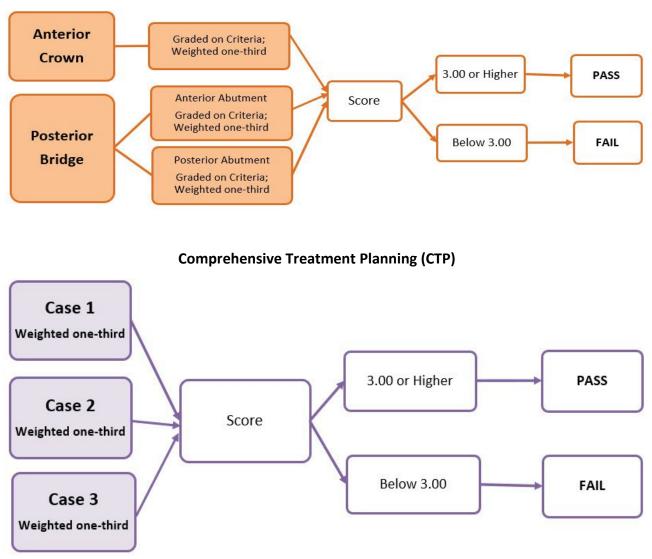
### Scoring Information

Scoring for simulation sections of the Dental Exam parallels that of sections of the standard Exam. Like CTP, Operative Patient, Endodontics, and Prosthodontics sections, the Operative Simulation and Periodontics Simulation sections are scored on a criterion-referenced rating scale of 1 to 5 where a final score of three (3.00) or higher is required to pass. The Class II and Class III must both be completed to pass the Operative Simulation section. Additional detail regarding scoring is found in the General Section of the standard *2021 Dental Exam Candidate Guide*.

**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. The median ratings are multiplied by assigned category weights. For Endodontics, the weighted median ratings are summed to obtain the Endodontic section score, after any deductions or penalties are applied. For Operative, Prosthodontics, and CTP, the weighted median ratings are summed to obtain scores for each procedure (Operative and Prosthodontics) or patient case (CTP). After any deductions or penalties are applied, procedure scores or patient-case scores are then averaged to obtain the overall section score. Criteria definitions for rating scales, category weights, possible deductions, and other scoring details are available on pages 50-51, 71-72, and 93-94. 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 Examiners. 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.

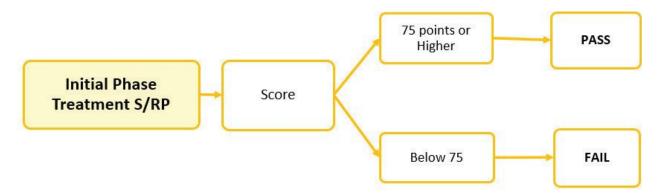


#### Prosthodontics



**Periodontal Treatment:** Scoring is expressed as a percentage with 75% or higher considered the passing level. Performance on the Periodontal Treatment section is rated independently by three Grading Examiners. The Periodontal Treatment scoring scale, percentages, possible deductions, and other scoring details can be found on pages 81-82.

#### **Periodontal Treatment or Periodontics Simulation**



#### **Provisional Results**

Provisional results will be posted to candidate profiles on wreb.org after each exam day. Candidates will NOT be notified when provisional results are posted and will need to check their online profile at the end of each clinic day. These results are provisional until scores are reviewed and final results are posted. A change in outcome from provisional results to final results will not be considered a basis for appeal. WREB will make every effort to post provisional results for all candidates, but there may be circumstances in which a candidate's results will not be posted until WREB reviews and posts final official scores.

As a result of COVID-19 mandates and site-specific requirements to reduce disease transmission, All-Simulation Dental Exam locations may not offer onsite grading. Provisional results and onsite retake opportunity may not be available at All-Simulation Dental Exams in 2021.

#### **Final Results**

It is WREB policy to notify candidates of final exam results as soon as possible. Final results will be posted online approximately two to four weeks after the exam and can be accessed with the candidate's username and password. It is important that candidates save their login information to access results. Candidates will receive an email notice when their final results are available.

Postoperative Endodontic radiographs validated as 'Undiagnostic' or 'Missing' by the Grading Examiners may delay the release of individual candidate exam results.

Exam results are confidential and will not be given over the telephone or by email. They will only be posted to the candidate profile on the secure WREB website.

Notification of passing the WREB Exam does not constitute licensure in any of the participating states. It is illegal to render patient treatment until all state licensing requirements are met and the license certificate or letter is received from the state. Links to member states are on the WREB website.

# Appeals

Candidates who do not pass the WREB Exam may appeal their exam results. For information regarding the Appeals Policy, candidates can contact the WREB office or visit the WREB website.

# Testing Candidates with Disabilities

The WREB Exam is designed to provide an equal opportunity for all candidates to demonstrate their knowledge and ability. The exam is administered to ensure that it accurately reflects an individual's aptitude, achievement level, and clinical skills, rather than reflecting an individual's impaired sensory, manual, or speaking skills, except where those skills are the factors the exam purports to measure.

WREB makes every reasonable effort to offer the exam in a manner which is accessible to persons with disabilities. If special accommodations are required, WREB attempts to make the necessary provisions, unless providing such would fundamentally alter the measurement of skills and knowledge the exam is testing, would result in an undue burden, or would provide an unfair advantage to the candidate with a disability.

The appropriate professional (physician, psychologist, etc.) must complete sections 5, 6, and 7 of the *Special Accommodations Request Form* obtained from the WREB website specifying what special accommodation is requested and attesting to the need for the accommodation. This must be received in the WREB office no later than 45 days prior to the exam.

WREB reserves the right to authorize the use of any accommodation to maintain the integrity and security of the exam.

# Dismissal for Improper Performance or Unethical Conduct

Dismissal from the exam, failure of the exam, or reduction in an exam score may result from improper performance (as defined below) relative to procedural skills and clinical judgment, and/or unethical conduct (as defined below).

If a candidate engages in improper performance or unethical conduct, the candidate must obtain permission from the WREB Board of Directors before retaking the exam at a later date.

Examples of improper performance include, but are not limited to:

- Case selection that presents conditions which jeopardize successful patient treatment
- Disregard for patient welfare and/or comfort
- Failure to recognize or respond to systemic conditions which potentially jeopardize the health of the patient, assistant, or Examiners
- Unprofessional, unkempt, or unclean appearance
- Rude, abusive, or uncooperative behavior
- Disregard for aseptic technique
- Performance that causes excessive tissue trauma
- Performance that is grossly inadequate in the validated judgment of the Examiners
- Failure to adhere to published WREB Guidelines

Examples of unethical conduct include, but are not limited to:

- Using unauthorized equipment at any time during the exam
- Using unauthorized assistants
- Using unauthorized patients
- Altering patient records or radiographs submitted in any format
- Treating patients outside clinic hours or receiving assistance from another practitioner
- Altering Endodontics and/or Prosthodontics teeth
- Dishonesty
- Altering candidate worksheet or treatment notes
- Communicating written or electronic (computer) test item information to other candidates or individuals
- Altering, omitting, or attempting to disguise treatment performed on a patient
- Any other behavior which compromises the standards of professional behavior

If a candidate engages in improper performance or unethical conduct, in addition to dismissal from the exam, failure of the exam, or reduction in an exam score, WREB reserves the right to take any other reasonable action WREB deems appropriate, including, but not limited to reporting the candidate to:

- i. State licensing boards
- ii. The candidate's dental school
- iii. Other dental or dental hygiene testing organizations
- iv. Other professional organizations

# Irregularities and Appeals

The purpose of the WREB Dental Exam is to provide dental licensing boards with information regarding a candidate's competence in performing certain sampled skills that comprise part of the domain of skills needed to safely practice dentistry at an entry level. Accordingly, all candidates are expected to pass the WREB Exam on their own merit without assistance.

An irregularity is a situation that raises a question regarding whether exam results are valid and accurately reflect the skills and abilities of a candidate.

For example, such questions could arise when:

- Unauthorized assistance occurs
- There is evidence of the presence of an exam administration irregularity
- There is disruption of exam administration, including by natural disasters and other emergencies
- There is any other information indicating that exam results might not be valid

When an irregularity occurs, results for the candidate involved are withheld or voided. The candidate is notified in writing and is provided with information regarding WREB's Appeals Policy. Results remain withheld or voided pending WREB investigation of the irregularity or resolution of the corresponding appeal. If WREB determines that withholding or voiding results is not warranted, then results will be released. If an appeal is denied or no appeal is filed, then exam results for the involved candidate(s) could remain withheld or voided and other remedies imposed.

WREB will void previously released exam results when there is a reasonable and good faith basis to do so and will notify the parties to whom the results have been released.

WREB attempts to conduct the investigation of any irregularity in a professional, fair, objective, and, insofar as possible, confidential manner. WREB considers irregularities, other than natural disasters or emergencies beyond the control of the candidate, to be a serious breach of the examination process that may have consequences beyond the withholding or voiding of results as, for example, may occur if information surfaces during investigation or is brought to the attention of school authorities or regulatory agencies by other sources.

# WREB Exam Security and Identification Verification

Candidates MUST present acceptable and valid identification (ID), as described below, in order to be admitted to the WREB Dental Exam. NOTE: Questions about the following identification requirements should be directed to the WREB Dental Department BEFORE the exam.

Candidates must provide a personal photo during the exam registration process. This becomes a component of their individual candidate profile at WREB and will be included on all score reports to schools and state licensing boards. The candidate profile photo is used to create an individual WREB Candidate ID Badge for the exam. This profile photo and the identification verification document will be used to verify candidate identity at the exam by WREB personnel. Identification must be verified prior to admittance to any WREB clinical exam.

Candidates must appear in person at the exam site and provide two (2) valid, non-expired forms of identification, one of which must be primary and one may be secondary.

Primary ID must have the candidate's photo and signature. Acceptable forms of primary ID are:

- Government-issued driver's license
- Passport
- Military ID
- Alien registration card
- Government-issued ID
- Employee ID
- School ID (must have either an expiration date and be current, or have a current date of school year)

Secondary ID must have the candidate's name and signature. Acceptable forms of secondary ID are:

- Social Security card
- Bank credit card
- Bank ATM card
- Library card

Both primary and secondary ID must be current and must indicate the same name as was submitted to the WREB office. This is critical for access to the exam.

Display of the Candidate ID Badge is required for admission to any WREB exam section or session.

Candidates may be asked and should be prepared to present their primary ID and WREB Candidate ID Badge to a School Coordinator, Site Coordinator, Auxiliary Coordinator, or Floor Examiner at any time during the exam.

Admittance to the exam does not imply that the identification presented is valid. If it is determined that a candidate ID is fraudulent or otherwise invalid, WREB will report this to the appropriate governing agencies or board. Any candidate or other individual who has misreported information or altered documentation in order to fraudulently attempt an exam, will be subject to dismissal from the exam.

# Malpractice Insurance

Professional Protector Plan, in cooperation with WREB, will extend WREB professional liability coverage with the limit amounts of \$1,000,000/\$3,000,000 for the patient-based portion of the calendar year 2021 dental exam at no charge to candidates. WREB will forward the names and addresses of all candidates to Professional Protector Plan.

### Exam Personnel and Anonymity

The WREB Exam is conducted in a manner that is intended to provide total anonymity to remove possible bias from the scoring of candidate work. All exam materials are numbered with a Candidate ID Number. This ID number is randomly assigned prior to the exam and a sheet of badges with the ID number is provided at the exam. The Candidate ID badge must always be worn during the exam.

WREB has two (2) categories of Examiners: Grading Examiners and Floor Examiners. When there is grading onsite, Grading Examiners are separated from candidates. There is no direct contact between Grading Examiners and candidates. The candidate's name must not appear on any materials including clothing, worksheets, and radiographs. A patient's first name only should be used on materials that are seen by Grading Examiners. Patients and completed materials are sent to a separate area for grading procedures. This allows the Grading Examiners to grade the procedures without knowledge of the candidates. Candidates are expected to assist in keeping the exam anonymous by observing all signs and instructions.

Anonymity is preserved between the Grading Examiners and candidates, not among Examiners themselves. Examiners assign grades independently of each other; however, there are occasions when fairness requires consultation among Examiners. Examiners are encouraged to consult whenever necessary. Examiner consultation generally benefits candidates and should not be a reason for concern.

There are two (2) to four (4) Floor Examiners at each exam. Floor Examiners do not serve in a grading capacity so there is no anonymity between Floor Examiners and candidates. Floor Examiners serve as liaisons between candidates and Grading Examiners to solve any problems that may arise during the exam. They are on the clinic floor or in the simulation session to assist with questions or problems relating to the administration of the exam and to approve certain phases of clinical procedures. Floor Examiners can assist candidates by answering questions, clarifying exam procedures, and acting as a liaison between candidates and the Grading Examiners.

In addition, Floor Examiners can help by:

- Supplying extra forms, such as *Patient Medical History/Patient Consent Forms*, *Follow- Up Care Agreements*, or *Worksheets*
- Checking and signing Patient Medical History/Patient Consent Forms
- Checking and initialing steps on worksheets
- Distributing communication forms from Grading Examiners
- Checking in patients who have been provisionally accepted
- Checking modification requests (see Operative Modification Procedure, page 43)
- Managing pulp exposures
- Providing setup checks
- Monitoring proper candidate dress and identification
- Monitoring candidate use of Standard Precautions and simulation protocol

- Monitoring social-distancing and site-specific precautions to prevent disease transmission
- Assisting with the solution of problems that arise

Any Floor Examiner can assist candidates. Floor Examiners are not assigned to specific areas. Candidates should ask the first available Floor Examiner for assistance.

Candidates should always bring their procedure worksheet with them when asking a Floor Examiner for assistance.

### **General Guidelines**

- A. Only candidates, patients, and assistants are allowed on the clinic floor. Candidate and assistants' identification badges must be visible on the chest or collar on the outer most layer (i.e., disposable gown) at all times the exam. Candidates will not be allowed in the simulation lab for a scheduled exam section without their Candidate ID Badge.
- B. Only candidates are allowed in the simulation lab or session. Candidate ID badges must be visible on the chest or collar on the outer most layer (i.e., disposable gown) during the simulation. Assistants are not allowed for any simulation section. Candidates will not be allowed in the simulation lab for their scheduled exam sections without their Candidate ID Badge.
- C. This exam uses the American System of tooth identification. Permanent teeth are recorded clockwise from the upper right quadrant to the lower right quadrant.

			Rig	ght							Le	eft			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

- D. Worksheets must be completed in <u>ink</u> not pencil. If candidates make an error prior to patient acceptance, they should obtain a new worksheet (cross-outs are not accepted at acceptance). If candidates submit a worksheet that is not neat, clear, and in ink, the patient will be returned to the candidate with a new worksheet to complete, resulting in lost time.
- E. All electronic devices should be turned off or set to a mode that will not disturb other candidates in the main clinic. Electronic devices, including cell phones and smart watches, are prohibited in the Endodontics and Prosthodontics Exams and the grading area. Patients with electronic devices will not be graded, but returned to the candidate to leave the device, resulting in lost time.
- F. Neither WREB nor any agency participating in the exam process accepts responsibility for treatment rendered to patients during the exam. A *Patient Consent Form and Assumption of Risk* must be signed by patients.
- G. No surgical procedures may be done.
- H. Procedures presented for grading during the exam may be photographed or digitally scanned by WREB personnel. These photographs are for use in training and calibrating Examiners. They have no relation to the grading process and cannot be released to patients or candidates.

 The school provides information regarding the facility, supplies, hotels, and other topics which can assist in preparing for the exam. This information is provided directly by the school; WREB is not responsible for its accuracy. Links to specific "Site Information" are available at wreb.org, under Dental Candidates.

### Infection Control Guidelines

Candidates are expected to maintain acceptable professional standards during the exam. Failure to do so may result in dismissal from the exam.

For the simulation sections, Personal Protective Equipment (PPE) requirements may be adjusted, based on CDC recommendations, local availability, state mandates, and site-specific requirements. For patient-based examinations, more stringent requirements may be imposed including, but not limited to, the use of N95 masks and face shields or their equivalent. Candidates should be cognizant of social-distancing protocol and implementation of other features to minimize disease transmission throughout the exam.

Appropriate aseptic technique is an important component of the professional standard of dental care. Candidates are expected to maintain acceptable standards during the exam. Failure to do so may result in dismissal from the exam. The following are the minimally accepted standards:

- Appropriate attire is required while in the clinic. A lab coat, lab jacket, or disposable gown are all acceptable if they are long sleeved. Scrubs may be worn under a lab coat, lab jacket, or disposable gown. Color and style are not restricted. <u>The Candidate ID Badge must be</u> <u>worn in a visible location on the outside of clinic attire.</u> Clinic attire should not be worn outside the clinic if it has been contaminated.
- Clinic attire must be changed whenever visibly soiled.
- Antiseptic soap is provided for hand washing.
- Exam gloves must be worn during all patient contact. When performing functions other than direct patient treatment, glove must be removed, or over-gloves used. Gloves must be changed between patients and whenever the integrity of the glove is compromised. Schools provide gloves but cannot accommodate individual preferences. If candidates require a specific brand or size, they must provide their own.
- Masks covering the nose and mouth must be worn during all procedures that generate aerosols. Schools provide masks but cannot accommodate individual preferences. If a candidate has specific mask requirements, they must provide their own. Masks must be changed whenever visibly soiled.
- Protective eyewear is required for candidates and their assistant and must be worn during all procedures. Candidates must provide their own eyewear. Use of a face shield is acceptable in lieu of eyewear.
- Protective eyewear is required for patients (prescription glasses or safety glasses) during all patient procedures, evaluation, and grading. Candidates are responsible for ensuring that their patient is equipped with protective eyewear.

- Schools provide specific written instructions that must be carefully followed regarding:
  - Asepsis of the surfaces and equipment in the operatory to assure adequate disinfection of all surfaces and equipment before and after each use.
  - Proper disposal of biohazardous waste.
  - Sterilization procedures for instruments. All instruments, including handpieces, are to be sterilized between patients.
- "Sharps" containers are located throughout the clinic. All sharps must be disposed of properly.
- Food and beverages are prohibited in the clinic.
- Food and beverages (except bottled water) are prohibited in the simulation sessions.

#### Dental Assistants

Assistants are <u>not</u> allowed for any simulation section of the exam.

Dental chair-side assistants may be used during clinical procedures. Dental assistants may work with Floor Examiners on the candidate's behalf. Patients may be sent to the grading area by assistants if all paperwork is complete and instruments are present.

Only one dental assistant and only the one dental chair assigned to the candidate can be used at any time.

Operative dental assistants may not be dentists (including graduates of ADA accredited and non-accredited/foreign dental schools) or be in their final year of dental school. For purposes of the exam, WREB considers the final year of dental school as beginning September 1.

Operative dental assistants may be dental assistants or dental hygienists if they do not hold a permit to place and finish restorative materials.

Periodontal Treatment dental assistants may not be dentists (including graduates of ADA accredited and non-accredited/foreign dental schools), dental hygienists (including graduates of ADA accredited and non-accredited/foreign dental schools), or dental hygiene students. Assistants may be dental assistants or dental students if they are not in their final year of dental school. For purposes of the exam, WREB considers the final year of dental school as beginning September 1.

Use of unauthorized assistants is grounds for immediate dismissal from the exam.

A *Dental Assistant Verification* form (sample form, page 29) is provided in the *Candidate Packet* at the exam. This form must be completed and signed by the candidate and assistant(s). If an assistant was not used for the Operative and/or Periodontal Treatment procedure(s), mark the appropriate box indicating "No Assistant was used." This form must be completed and submitted to WREB at the end of the exam, even if an assistant is not used. If this form is not returned, final results will be withheld by the WREB office.

Assistants are required to follow the same guidelines as candidates. Candidates are responsible for their assistant(s)' adherence to all guidelines.

# **Equipment and Materials**

Equipment information specific to each school can be found in the "Site Information" at wreb.org, under Dental Candidates. Although schools supply some expendable materials, candidates are responsible for ensuring that they have all materials necessary to perform the required procedures, including high-speed and low-speed handpieces, and periodontal scaling devices. Schools may have equipment available for rent if candidates choose not to bring their own. Information on rental equipment is included in the "Site Information." **Instruments must be acceptable even if rented.** 

- A. Required special instruments for the Operative procedure(s) are (illustrations, page 28):
  - New/unscratched #4 or #5 metal front surface mouth mirror
  - New/sharp pigtail explorer comparable to the Starlight #2, Suter #2, Brasseler 2/6 or Hu-Friedy 2R/2L
  - New/sharp shepherd's hook explorer comparable to the Thompson #5, or Hu-Friedy EXD #5
  - Miller-type Articulating Paper Forceps (not cotton pliers)
- B. Required special instruments for the Periodontal Treatment procedure are (illustrations, page 28):
  - New/unscratched #4 or #5 metal front surface mouth mirror
  - New/sharp ODU 11/12 explorer (may be American Eagle, Hartzell, Nordent, or Hu-Friedy)
  - New/sharp periodontal probe, color coded with legible 3-6-9-12 mm markings (may be American Eagle, Hu-Friedy, or Marquis)
  - It is recommended that candidates bring back-up instruments
- C. A blood pressure measuring device is required.

	PPENDIX A – Expendable Materials L	
To be supp	olied in sufficient quantities for all c	andidates
#15 Blade	Evacuator Tips	Polishing Materials for Restoration
2 x 2 Cotton Squares	Face Masks	Prophy Paste
Amalgam Capsules & Amalgamator	Facial Tissue	PVC Material
Articulating Paper	Floss	Retraction Cord
Autoclave Tape	Flowable Composite	Rubber Dams
Bond	Gloves	Rubber Dam Napkins
Cement	Headrest Covers	Saliva Ejectors, Standard
Composite Restorative Materials	Hemostatic Agents	Sectional Matrix System
Cotton Pellets	Impression Materials (for cast gold)	Soap
Cotton Rolls	Instrument Trays (disposable or metal)	Topical Anesthetic
Cotton Swabs	Local Anesthetic	Trash Bags
Curing Lights	Matrix Tweezer, Forceps, & Clamp	Tofflemire Band & Matrix Bands
Deck Paper	Mouthwash	Tray Covers
Disinfectant	Needles, Short and Long	Wedges
Drinking Cups	Paper Towels	X-ray Developer and Fixer
Etch	Patient Bibs	X-ray Film

D. The schools have agreed to provide the following expendable materials:

\*Not all sites will provide PVS material for the Prosthodontics section. Candidates may need to supply their own PVS material. Refer to the expendable materials list in the "Site Information."

Materials provided are brands used by the school. If candidates wish to use a specific brand, they must bring their own. Candidates should provide any materials not specifically listed in the "Site Information."

- E. Radiograph developer and fixer are supplied in the simulation lab at schools with conventional radiographic facilities. Automatic and/or hand developers are provided by the school. A list of other materials provided in the simulation lab can be found in the "Site Information." Candidates must supply any items needed to perform the Endodontics and Prosthodontics procedures which are not specifically listed in the "Site Information."
- F. If using a sonic or ultrasonic device for Periodontal Treatment, candidates must provide their own and it must be adaptable to the hookups at the school. Information regarding hookups can be found in the "Site Information."
- G. Candidates will be furnished with a dental chair, an Operatory unit, and an operator's stool. Personnel are available throughout the exam to resolve malfunctions of operatories and equipment provided by the school. If candidates have an equipment malfunction in the clinic, they should notify maintenance personnel and a Floor Examiner immediately. The Floor Examiner may determine that the candidate is eligible for time compensation (on that day only) if the equipment malfunction cannot be resolved within 15 minutes. Time is not compensated for delays of less than 15 minutes. Time is determined from the point at which a Floor Examiner is notified. Many equipment malfunctions are due to improper use. Candidates should become familiar with the equipment prior to the exam and follow all directions carefully. WREB cannot be responsible and will not compensate for time lost due to the malfunction of a candidate's personal equipment or rental equipment.

# Scoring Criteria and Patient Welfare

Because WREB serves as a testing agency, not a teaching agency, performance that fails to meet examination standards does not always require immediate corrective action and may not present an immediate health concern for the patient.

Patients participating in WREB exams may be released from the exam with restorations or treatments that received a failing score without Examiners requiring immediate correction of the condition. A failing score is an indication of not meeting exam criteria even though the restoration might still be serviceable. Only the most severe conditions, which could constitute an immediate threat to patient's health, are identified by the Examiners with a *Postoperative Care (PO)* form. A *Postoperative Care* form is completed for the following situations:

- Soft tissue laceration or mutilation or major iatrogenic tissue trauma
- Pulp exposure
- Fractured direct restorations
- Margins of restorations so defective that the tooth would be endangered if not treated prior to the next regular recall exam
- Contacts (interproximal) so defective that the tooth or periodontium would be endangered if not treated prior to the next regular recall exam

An *Instructions to Candidate (IC)* form may be completed by the Grading Examiners to request removal of caries, affected dentin, unsound demineralized enamel, or any remaining restorative material. This form may also be used to request additional radiographs, adjustment of occlusion, or for any other communication that an Examiner deems appropriate.

Although the conditions that initiate a *Postoperative Care* or *Instructions to Candidate* form also may result in a low score in one or more of the scored categories, scoring is an independent event and is based only on the established criteria. Receiving either form is not an indication of procedure or exam failure. Absence of these forms does not assure satisfactory completion of any procedures. For example, it is possible that a score of "2" is appropriate in a category because of elements in the criteria, but there is no immediate threat to the patient's health and no need for immediate exam site correction. No forms would be issued, even though the procedure score would be failing.

A *Follow-Up Care Agreement* form (sample form, page 29) must be completed for each patient. If a patient is used for more than one procedure by the same candidate, only one form needs to be completed with all procedures indicated on the form for that patient. If a patient is shared by one or more candidates, each candidate must complete a *Follow-Up Care Agreement* for that patient. Prior to arriving at the exam, have a dentist accessible to the patient (licensed in the state in which the patient resides) acknowledge the responsibility of providing any necessary postoperative care by signing on either the "A" or "B" section of the form. Give the yellow copy of the form to the patient after they sign the form. The white copy is turned in at the end of the exam in the *Candidate Packet*. If candidates are unable to have a licensed dentist sign the

*Follow-Up Care Agreement* in advance (patient is obtained during the exam), the form may be completed after the exam and emailed to the WREB office. Final exam scores will not be released to the candidate or any State Boards until the form is received.

# **Patient Selection**

The following criteria apply to all patients for the clinical exam:

- There is no minimum age for Operative procedure(s).
- The minimum patient age for the Periodontal Treatment procedure is 18 years.
- Patients cannot have completed more than two (2) years of dental school. (This includes ADA accredited and non-accredited/foreign dental schools.)

Patient selection is an important factor in the clinical exam. Candidates must provide a patient or patients for the Operative and the Periodontal Treatment procedures.

Patient selection is the candidate's responsibility. WREB staff, the Boards of Dentistry of participating states, and dental schools are not able to supply patients. Candidates are graded on their ability to accurately determine and effectively interpret patient qualification criteria. This is an integral part of the exam. Therefore, other professionals **should not** "prequalify" candidate's patient for the exam.

WREB **strongly** discourages the use of patient procurement services. Patient procurement services are not allowed in the school during the exam. Use of such services is absolutely not necessary for success on the exam. Patient acceptance criteria are designed to standardize the exam, not as an obstacle to patient procurement. Reading the criteria and understanding the broad range of patients acceptable for the Operative procedure(s) and the Periodontal Treatment procedure will enable candidates to evaluate their patients' qualifications. Patients accepted by WREB often are patients who candidates routinely treat in a school dental clinic or their dental office. WREB encourages candidates to procure patients for the exam whom they routinely treat in dental school or their dental office.

One patient may be used for all patient procedures if the criteria are met. Candidates may share a patient if the criteria are met. Patients with a need for antibiotic prophylaxis **may not be shared** with other candidates at the exam. Candidates bear all risks and benefits associated with using the same patient for more than one procedure or sharing a patient with another candidate.

If a candidate shares a patient with another candidate, each candidate must submit the procedures separately for acceptance, preparation grading, and finish grading.

Candidates using more than one patient may work on one patient at their assigned operatory while another patient is in the grading area. If a patient is accepted by the Grading Examiners, no appellate procedure may be based on the difficulty of the procedure submitted.

Incomplete procedures cannot be evaluated. The cooperation and attitude of the patient should be considered. A patient should not be selected who is apprehensive, hypersensitive, or is unable to remain until the exam is completed. Failure of the procedure will ensue if the patient is unable to be examined by three Grading Examiners.

# Patient Medical History (sample form, page 30)

- WREB accepts patients with a blood pressure reading of 159/99 or below. A patient with blood pressure readings between 160/100 and 180/110 is accepted only with written consent of the patient's physician. WREB does not allow treatment of any patient with a blood pressure reading greater than 180/110. Preoperative blood pressure and pulse must be taken on each patient prior to acceptance and recorded on the *Patient Medical History* form.
- Obtain written clearance and/or antibiotic prophylaxis from a physician or dentist in the case of any significant medical problem. The medical clearance must indicate the specific medical concern. WREB adheres to the current American Heart Association Guidelines regarding required premedication. Patients with a need for antibiotic prophylaxis may not be shared with other candidates at the exam.
- Any patient who has received intravenous bisphosphonates for bone cancer or severe osteoporosis is not acceptable for the exam.
- Any patient with diabetes controlled by insulin injection(s) or an insulin infusion device is not acceptable for the exam.
- Any patient who has had a heart attack, stroke, or cardiac surgery within the past six (6) months is not acceptable for the exam.
- Any patient who has clinical symptoms of active tuberculosis (clinical symptoms would include productive cough or chest pain) is not acceptable for the exam.
- Any patient with a known latex allergy is not acceptable for the exam.
- For any patient who has been diagnosed as HIV positive, the *Patient Medical History* must reflect that the patient has had significant laboratory tests and is under the care of a physician and is taking the medication prescribed for them.
- Any patient who is known to be pregnant is not acceptable, except with the written consent of patient's health care provider.
- Any patient with problems which might be aggravated by the length or nature of the exam may be rejected at the discretion of the Examiners.

A legal consent, *Patient Consent Form and Assumption of Risk* (sample form, page 30), is provided on the back of the *Patient Medical History* form and must be signed by the patient. If a patient is under the age of legal consent for the state in which the exam is given, the *Patient Consent Form* must be signed by the parent or legal guardian of the underage patient. Candidates using the same patient for more than one procedure, may submit one *Patient Medical History/Patient Consent Form* for that patient with all procedures marked on the form. Candidates who share a patient must submit a separate *Patient Medical History/Patient Consent Form* for the procedure(s) they personally are performing for the patient. The patient must sign the *Patient Consent Form* for each candidate who performs procedures for them.

The patient is essential for success on the exam. Treat all patients with care and compassion. Patients should receive nourishment during the exam. Special care must be taken when sharing patients or using one patient for multiple procedures to ensure that the patient receives adequate breaks and nourishment. Patients who are unable to be graded due to hypoglycemia or severe dehydration will result in a failing grade for their treatment.

Patients should be given directions to the school, parking information, directions to the clinic, and should be aware of the time commitment involved due to the nature of the exam.

Patients should be prepared for temperature extremes in the clinic. Headphones, newspapers, books, and magazines are permissible outside of the grading area. Electronic devices, including cell phones and smart watches, are prohibited in the grading area. Patients with electronic devices will not be graded, but returned to the candidate to leave the device, resulting in lost time.

Patient comfort should be considered, and proper local anesthetic utilized as needed.

No form of inhalation, parenteral or enteral sedation can be used during the exam. Patients must be ambulatory.

#### Radiographs

Preoperative radiographs are required for the Operative and Periodontal Treatment procedures. Specific radiograph requirements for each procedure are outlined in each section of this Guide.

WREB accepts the use of conventional film and digital radiographic images as long as they are of diagnostic quality. Schools differ in their radiographic facilities. Candidates should refer to the "Site Information" (located at wreb.org, under Dental Candidates) for the site where they plan to take the exam to determine what type of facilities are available. Some exam sites will have only conventional facilities available, some will have only digital, and others have both. It is expected that candidates will be prepared for what is available at the exam site they have selected.

Candidates should also read the "Site Information" carefully to determine if a digital site is equipped for secure transmission of images between different exam sites, or from their school to the exam site. It may be necessary to submit printed digital images. Depending on the facilities available, different portions of the following information will apply.

# A. Digital Radiographs

All digital radiographs must be diagnostic. Examiners view all images, printed or on monitors, as though they are mounted "button out." Format submitted images accordingly.

#### • Digital Images on Monitors

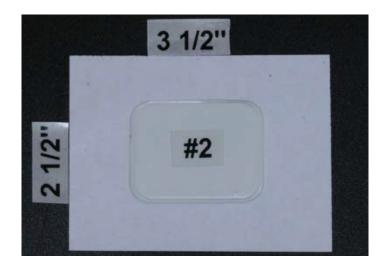
Only the radiographs being submitted for acceptance should be saved in the folder accessed by Examiners. All images submitted for a procedure must fit on one screen without overlap. The individual images should be no larger than three times the size of a conventional #2 film radiograph.

The use of image analysis tools, such as zoom and magnifier, will not be a part of an Examiner's evaluation of digital images.

#### • <u>Printed Digital Images</u>

Printed digital images must include a label in legible print that includes Candidate ID Number, patient's first name, procedure, tooth number, and surface.

Printed digital images must be printed on *high quality photographic paper*. One printed image is required for each submission. All printed images for each procedure must fit on one  $8\frac{1}{2}$ " x 11" page without overlap and individual images should be no larger than three times the size of a conventional #2 film radiograph ( $3\frac{1}{2}$  x  $2\frac{1}{2}$  inches). See sample below.



#### B. Conventional Radiographs

- WREB accepts the use of conventional #2 film radiographs at all exam sites, as long as they are of diagnostic quality.
- Conventional films may be interpreted by Examiners using loupes with 2.5 X magnification or greater and backlighting (i.e., view box).

Perform all enhancement or edge sharpening prior to submitting images for patient acceptance. Candidates may use these feature(s) in digital or scanned conventional #2 film format to provide the best radiographic images for Examiner assessment.

# Authentication/Security

All digital radiographs must be of diagnostic quality. Image capture stations are specified by the site. After capture transfer to the server, select images for uploading and enhance them as desired. The host site will provide specific radiographic personnel during candidate screening and testing times. No individual, other than the candidate, will be allowed to assist in image selection or editing for submission. A final archive will be provided to WREB by the host site for all digitally stored candidate radiographs at completion of the exam.

Candidates may submit digital radiographs from another dental school or dental office other than the exam site using equipment and information systems that conform to the DICOM Standard. Electronic transmission of digital radiographic images will be considered secure and authentic if they are received by designated exam personnel and never leave the DICOM secure format. If digital radiographs do not conform to the DICOM Standard format, then digital radiographs taken at the exam site or printed digital images or conventional films will be required.

# Alteration of Radiographs

When they apply for the exam online, candidates electronically sign an affidavit that the radiographs submitted are original, unaltered films. (Periodontal films may be duplicates.)

An altered radiograph is defined as a change to the proprietary tag of the format file. Intentionally performing any alteration, including but not limited to, cropping, compressing, or "doctoring the image" as in a Photoshop<sup>®</sup>-type program is prohibited. Enhancement or edge sharpening is acceptable.

Should analysis by WREB detect radiographic alteration of submitted digital images or conventional films, failure of the exam for unethical conduct will occur. If there is a question, the candidate will be required to retake the radiographs with an observer present at the exam site.

# **Exam Preparation Materials**

With this Candidate Guide, candidates received the following items:

- Two (2) *Follow-Up Care Agreement* forms to be signed in advance by a dental care provider and the patients
- Two (2) Patient Medical History/Patient Consent Forms

Refer to pages 29 and 30 for details on these forms.

It is highly recommended that candidates review the candidate preparation tutorials available on wreb.org.

At the exam site, candidates will receive a white *Candidate Packet* containing:

- Candidate ID badges
- Assistant ID badges
- Worksheets for the Direct Posterior Composite procedure
- Worksheet for the Periodontal Treatment procedure (if enrolled)
- Dental Assistant Verification form
- Patient bib labels
- Patient Information and Questionnaires

Candidates must present valid identification as described on pages 10-11 in order to receive their packet.

Other worksheets are available upon request: Direct Amalgam and Direct Anterior Composite. Please see a WREB staff member or Floor Examiner.

Candidates keep their *Candidate Packet* envelope to submit required exam materials to WREB personnel when the exam is completed. For required items, see page 99. *Candidate Packets* will be collected throughout the exam at the patient check-in desk outside the grading area.

#### **Clinical Examination Overview**

#### The exam officially starts when:

- 1. Candidates submit their first Operative procedure for acceptance (to the grading area or a Floor Examiner, if provisionally accepted).
- 2. Candidates submit their first Periodontal Treatment procedure for acceptance.
- 3. Candidates are handed their bag of materials in any simulation session.

Withdrawal for any reason after this point constitutes failure of the exam or applicable section.

#### Schedule Overview

The exam consists of two and a half (2½) to four and a half (4½) days depending on the exam site. Below is a general overview of the exam schedule. A candidate's Candidate ID Number and Exam Schedule with the exact times and locations for their exam site will be posted to their candidate profile on wreb.org approximately four (4) weeks prior to the exam. The Candidate ID Number will begin with a letter that determines their specific group on the schedule. *After Candidate ID Numbers and Exam Schedules are posted, they cannot be changed; there are no exceptions*.

The Operative Patient and Periodontal Treatment procedures may be performed any time during open clinic when the candidate is not in a scheduled simulation section. All simulation section times are specifically assigned.

Note that schedules vary for different sites. Candidates will need to refer to the "Site Information" and their individual schedule for specific dates and times.

# Sample Candidate Clinic Schedule (Operative Patient and Periodontal Treatment Procedures)

<u>Days 1, 2, 3:</u>

- 7:00 a.m. Clinic opens. Candidates may set up their operatory and prepare their patient for the day's procedure(s).
- 7:30 a.m. Floor Examiners arrive to review *Patient Medical History/Patient Consent Forms* and evaluate provisionally accepted patients.
- 7:45 a.m Patients may be submitted for check-in.
- 8:00 a.m. Grading Examiners begin evaluating patients.
- 4:00 p.m. Patients must be in line to be graded.
- 5:00 p.m. All candidates and patients must be out of the clinic.

# Last Day:

- 7:00 a.m. Clinic opens. Candidates may set up their operatory and prepare their patient for the day's procedure(s).
- 7:30 a.m. Floor Examiners arrive to review *Patient Medical History/Patient Consent Forms* and evaluate provisionally accepted patients.
- 7:45 a.m. Patients may be submitted for check-in.
- 8:00 a.m. Grading Examiners begin evaluating patients.
- 8:30 a.m. Candidates working on the Last Day are required to arrive on the clinic floor by this time.
- 11:00 a.m. The exam ends. Patients must be in line to be graded.
- 12:00 p.m. All candidates and patients must be out of the clinic.

Do NOT administer local anesthetic to any patient until the patient's *Patient Medical History/Patient Consent Form* is reviewed and initialed by a Floor Examiner. For patient comfort, patients should not be sent to the grading area until the time scheduled for patient submission (7:45 a.m.).

Patients with procedures to be graded must be checked in by 4:00 p.m. on the first two days of the exam, and by 11:00 a.m. on the final day of the exam. After this time, 0.2 points are deducted from each procedure to be graded for each five minutes the patient is late. If a patient is 16 or more minutes late, the procedure will not be graded, and no points will be earned.

WREB official time is based on the local time for each exam site. Cell phone time will be used to determine late penalties for Operative and Periodontal Treatment procedures. For the simulation sections, a separate, official clock will be designated in the simulation.

All clinical procedures must be submitted to the grading area by 4:00 p.m. on Days 1, 2 and 3, and by 11:00 a.m. on the Last Day. After the patient returns from the grading area, candidates only are permitted to:

- Place a temporary
- Dismiss the patient
- Clean operatory unit
- Leave the clinic

All candidates and patients must be out of the clinic by 5:00 p.m. on Days 1, 2, 3, and 12:00 p.m. on the Last Day.

Under certain circumstances, acceptance and completion of restorative procedures may be done on different days. However, to avoid a penalty, the Periodontal Treatment procedure must be completed on the day it is accepted. Refer to the specific procedure sections of this *Guide* for more information.

It is not unusual to finish the exam by the end of the second clinical day. There is sufficient time to complete all procedures and to accommodate unexpected situations. The final half-day is provided for candidates encountering unexpected circumstances that require extra time to complete procedures, or for onsite retakes. Candidates having a patient-based section to complete or retake must arrive by 8:30 a.m. on the Last Day.

The location of candidate operatories may be consolidated and a different operatory assigned to any remaining candidates on the Last Day.

# Simulation Section Schedule (for Endodontics, Prosthodontics, Operative Simulation, or Periodontics Simulation)

Candidates are assigned to a specific group and time for their simulation section(s).

Candidates are divided into groups for the simulation sections. These groups are designated by a Candidate ID Number which will be assigned and posted to their candidate profile on wreb.org approximately four (4) weeks prior to their exam. The Exam Schedule will specify the exact dates and times of each candidate's simulation sections.

# **Onsite Retakes**

Candidates with a failing result in Operative Simulation, Endodontics, Prosthodontics, Periodontal Treatment, or Periodontics Simulation may have an opportunity to retake the failed section at the same exam. This will depend on each candidate's scheduled sections and individual time constraints. Candidates that have certain validated critical errors or are dismissed from the exam are not eligible for onsite retake. No onsite retakes are available for the Operative Patient section. See scoring under each section for details.

Onsite retakes for Operative Simulation, Endodontics, Prosthodontics, and Periodontics Simulation are scheduled on the last day only. Candidates are allowed in the simulation lab at 6:45 a.m. for setup. The Operative Simulation, Endodontics, Prosthodontics, and Periodontics Simulation sections begin at 7:15 a.m. The Periodontics Simulation will end at 9:15 a.m. The Endodontics section will end at 10:15 a.m. and the Operative Simulation and Prosthodontics sections will end at 10:45 a.m. Candidates attempting an onsite retake for any simulation section must arrive in the simulation lab no later than 7:45 a.m. on the last morning.

Onsite retakes for Periodontal Treatment may be attempted during open clinic (after provisional results are posted) or on the Last Day. These retakes are not pre-scheduled and can be completed any time during open clinic following receipt of provisional results. (The first set of provisional results is posted at the end of the first clinic day.)

# Late Penalties

Late penalties for all sections except Periodontics (Periodontal Treatment or Periodontics Simulation) are the same:

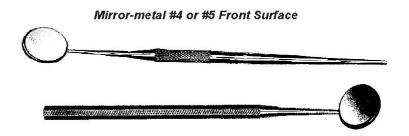
- 1 to 5 minutes late: 0.2 deduction
- 6 to 10 minutes late: 0.4 deduction
- 11 to 15 minutes late: 0.6 deduction
- 16 or more minutes late: Loss of all points for the section.

Late penalties for Periodontal Treatment or Periodontics Simulation (deducted from total possible) are:

- 1 to 5 minutes late: 4% deducted
- 6 to 10 minutes late: 8% deducted
- 11 to 15 minutes late: 12% deducted
- 16 or more minutes late: Procedure will not be graded. No points earned.

It is possible that the exam may be terminated prior to the end of the scheduled exam due to a situation beyond the control of WREB, such as loss of power or act of nature. If this should occur, incomplete procedures cannot be carried over to a future exam. WREB cannot be held liable in these circumstances.

#### **ILLUSTRATION OF INSTRUMENTS**



"Pigtail" Operative Explorer - comparable to the Starlight #2 or Suter #2, Brasseler 2/6 or Hu-Friedy #2R/2L

"Shepherd's Hook" Operative Explorer - comparable to the Thompson #5, Hu-Friedy EXD #5



Perio Explorer - ODU 11/12

ware assessed to don't

Perio Probe - color coded in 3-6-9-12 mm increments

NUME CONTRACTOR

Miller-Type Articulating Paper Forcep



WREB DENTAL ASSISTANT VERIFICATION FORM	©WREB
TO RE COMPLETED BY CANDIDATE	FOLLOW-UP CARE AGREEVIEN
Candidate Name: Candidate ID#:	
Exam Site: Exam Dates:	PATIENT'S FULL NAME: CANDIDATE ID#:
No Operative Assistant used.	DATE OF EXAMINATION: EXAM SITE:
CANDIDATE: I verify that I have confirmed the accuracy of the information contained on this form.	The WREB Dental Exam is the process for determining if a Candidate has the clinical skills to obtain a license to practice dentistry. Therefore, no guarantee can be made that the treatment performed during this exam will be adequate. If you need additional follow-up related care to the treatment received during the exam, you must visit a licensed dentist of your choice or you may use the referral below. Your Candidate will provide you with a signed copy of this "Follow-Up Care Agreement" form.
TO BE COMPLETED BE DENTA ASSISTANT(S) Western Regional Evamining Roard an Arizona non-modif connoration ("WRER9") is a national dentral and dentral	<ol> <li>PROVIDER'S ACCEPTANCE OF RESPONSIBILITY - Provider must be accessible to patient and licensed in the state in which the patient resides (<u>Option A or Option B must be completed</u>).</li> </ol>
hygiene testing agency required to test Candidates' clinical skills for the states that accept the results of the WREB exams.	A. This is to acknowledge that I agree to provide any follow-up care required related to treatment rendered during the WREB Dental Exam. It is understood that this Agreement expires sixty (60) days
The relationship between WREB, the school where the exam is administered, and the dental Candidate is strictly a contract service and not an employer/employee relationship. You are working as an assistant employed by the	
dental condidate taking the exam. As your employer, the Canifa terminations exponsibility for your compliance with all reministions mandated to samehouse than Orcimational Safety and Haalh Administration (ASHA).	Name of Licensed Provider
אונו מו ובפתשתטום וומותמכבת וס בוווטוטלבבם אל נווב טננטטמנומו סמובול מות וובמותו אתווווווסת מנוטו (טטווא).	Address Telephone Number
WREB does not assume responsibility or liability for the health status of you, your dentist or the patient(s). If an injury or exposure to infectious agents occurs during the course of this examination, neither WREB nor the school assumes any responsibility to provide follow-up care. It is the Candidate's responsibility to assure that you see a licensed health care professional and initiate appropriate management and follow-up care.	City/State/Zip
LIMITATION OF LIABILITY AND INDEMNITY AGREEMENT	Signature of Provider Date
You hereby expressly agree to assume the risk for an exposure or injuries of any kind that occur before, during or after the WREB Examination. You agree to indemnify WREB against and hold WREB harmless from any and all losses, claims, demands, damages, assessments, costs and expenses (including reasonable attorneys' fees) of every kind, nature or description resulting from, arising out of or relating to your health care, status or condition before, during or after the examination.	OR B. The patient is a "Patient of Record" at the
DEMININED. The use of uncuthenized societants is accurate for immediate dismissed from the norm for the Candidate	Signature of Authorized School Official Date
NERVINUELS. THE USE OF UNBUTTORIZED ASSISTANTS IS BY OUTLOS FOR ITTIMEGIATE OTSTIMESALITION THE EXAMINATION THE resulting in disciplinary action and possible denial of license to practice dentistry. An individual who serves as an unauthorized assistant may be subject to disciplinary action in the state in which licensed/certified.	<ol> <li>PATIENT ACCEPTANCE</li> <li>I have read the <u>above, and</u> understand and accept that additional treatment related to services rendered</li> </ol>
The following information must be completed by the Assistant(s): By signing below, I hereby confirm that I am qualified in accordance with the Candidate Guide and have read and understand the Disclosure Statement, Limitation of Liability and Indemnity Agreement above:	during this exam may be required. I understand that any necessary follow-up care is the responsibility of the licensed dentist (Option A above) who signs this form. No school or exam location is responsible for providing follow-up care, unless that school or exam location has signed this "Follow-Up Care Agreement" (Option B above <u>), and</u> acknowledges responsibility for follow-up care. I understand that there may be a fee involved in the follow-up care and that 1 will be resconsible for that fee unless other arraneements have been made with
OPERATIVE Assistant (print name) Signature Address City/State/Zip	the Candidate. It is further understood that the provider listed above (Option A or Option B) has no obligation to provide care if not initiated within sixty (60) days after the exam.
PERIO Assistant (print name) Signature Address City/State/Zip	Patient Signature (or Parent/Guardian if patient is a minor) Date
ADDITIONAL Assistant (print name) Signature Address City/State/Zip	White Copy: Candidate File Yellow Copy: Patient

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