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ADEX[®]
The American Board of
Dental Examiners

Administered by:
CDCA  **WREB**  **CITA**

SIMULATED PATIENT TREATMENT CLINICAL EXAMINATION (SPTCE) CANDIDATE MANUAL

2023 ADEX Dental Hygiene Examination

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2023 Exam Cycle

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This manual focuses on the ADEX SPTCE and can be brought into the clinic during the examination.

EXAMINATION AND MANUAL OVERVIEW

CDCA-WREB-CITA administers the ADEX clinical dental hygiene licensure examinations. The ADEX dental hygiene exam consists of a computer-based exam (CSCE OSCE) as well as the Simulated Patient Treatment Clinical Examination (SPTCE) or the Patient Treatment Clinical Examination (PTCE) or. All examinations are based on specific performance criteria developed by ADEX and other content experts which will be used to measure the clinical competency of candidates.

All candidates who take any parts of the ADEX Dental Hygiene examination administered by the CDCA-WREB-CITA between January 1, 2023 and December 31, 2023 are responsible for reading and understanding the 2023 examination manual(s) published by the CDCA-WREB-CITA, any documented changes to the 2023 manual(s), and for reviewing and understanding all other material provided by the CDCA-WREB-CITA regarding the exams administered between January 1, 2023 and December 31, 2023. Candidates should periodically check the CDCA-WREB-CITA website for any changes and/or updates. If any questions arise during the registration process, candidates are responsible for communicating their questions to the CDCA-WREB-CITA staff **via email** (see contact information below). Questions **MUST** be submitted in writing.

The CDCA-WREB-CITA has a blanket Malpractice Insurance policy that covers all dental hygiene candidates for all ADEX examinations. Therefore, candidates are not required to obtain additional limited liability insurance.

The CDCA-WREB-CITA reserves the right to cancel or reschedule any examination in the event of an emergency or other unforeseen circumstance that is beyond the CDCA-WREB-CITA's control. The CDCA-WREB-CITA would either refund those candidates' application fees, reassign candidates to the next available examination site or reschedule the examination at the earliest possible date.

Every effort has been made to ensure that this manual is accurate, comprehensive, clear, and up-to-date. In the rare instances when examination related instructions need to be updated or clarified during the examination year those changes will be communicated to the candidates by the CDCA-WREB-CITA. There may also be other test related material sent to candidates. These materials will be available through their online candidate profiles and/or at registration on the day of the exam.

Please see the *Candidate Registration and CSCE OSCE Manual* for step-by-step instructions on how to register for the ADEX Dental Hygiene Examination through the CDCA-WREB-CITA, as well as guidance regarding the CSCE OSCE registration and content. If you are attempting the PTCE, there is a PTCE Candidate Manual available for your review as well. All CDCA-WREB-CITA candidate manuals can be downloaded from the CDCA-WREB-CITA website: www.cdcaexams.org.



www.cdcaexams.org

contact us: <https://www.cdcaexams.org/contact>

The ADEX Dental Hygiene Examination: Simulated Patient Treatment Clinical Examination

I. EXAMINATION OVERVIEW

- ADEX Dental Hygiene Examination Parts
- Treatment Goals
- Examination Schedule/Timeline Guidelines
- Candidate Professional Conduct
- Infection Control
- Scoring System Overview (2023 ADEX Criteria)
- Instruments

A. ADEX Dental Hygiene Examination Parts

The ADEX Dental Hygiene Examination is based on specific performance criteria used to measure clinical competence. The ADEX Dental Hygiene Examination Committee (DHEC), which is comprised of representatives from ADEX member districts, develops and revises the PTCE/SPTCE Treatment Clinical Examinations. An additional committee of content experts contributes to the ongoing development of the CSCE OSCE. These committees combine their members' considerable content expertise and they also rely on practice and occupational analysis surveys, current curricula, standards of competency and the American Association of Dental Board's (AADB) "Guidance for Clinical Licensure Examinations in Dentistry." This ensures that the content and protocols of the examination are current and relevant to practice. Examination criteria, content, and evaluation methodologies are reviewed annually.

1. The **Simulated Patient Treatment Clinical Examination (SPTCE)** is performed on a typodont, provided by CDCA-WREB-CITA. The candidate will be evaluated on calculus detection, calculus removal, probing measurements and tissue management (penalty only) (see grading rubric on page 9).
2. The **Computer Simulated Clinical Examination OSCE (CSCE OSCE)** is designed to assess various levels of diagnosis and treatment planning knowledge, skills, and abilities. Clinically-based questions are utilized through computer-enhanced photographs, radiographs, optical images of study and working models, laboratory data, and other clinical digitized reproductions.

Many states require a separate jurisprudence exam. The CDCA-WREB-CITA does not administer the jurisprudence examination for the participating boards of dentistry, except for the State of Florida. The respective boards of dentistry develop, administer, and score their own jurisprudence examinations. The CDCA-WREB-CITA does not have access to, nor can it provide, jurisprudence study materials. Candidates should contact the board of dentistry in the state in which licensure is sought to arrange to take the jurisprudence

B. Treatment Goals

The clinical skills procedure of the ADEX Dental Hygiene Treatment Examination evaluates a candidate's ability to:

- **Detect** calculus
- **Remove** calculus
- **Measure** periodontal pocket depths accurately
- **Manage the patient treatment appropriately (to include proper tissue management)**

The candidate will be assigned 1 quadrant for calculus removal, 4 teeth for calculus detection, 2 teeth for probing measurements. These assignments will be provided to the candidate at the time of the examination. Candidates will have 2 hours treatment time for this examination.

C. SPTCE Schedule/Guidelines

1. **Dates and Sites**

Specific examination dates for a participating dental hygiene program can be found on the CDCA-

WREB-CITA website. Dates are determined through collaboration between the Program Director or other official representative of the dental hygiene program and the CDCA-WREB-CITA. Please refer to the *Registration and CSCE OSCE Manual* for the CDCA-WREB-CITA's specific policies and administrative guidelines.

In the event there are extenuating circumstances such as weather or other unforeseen circumstances which may impact or alter the schedule and administration of the examination(s), the CDCA-WREB-CITA will make every attempt to contact candidates with updated information.

Note: The CDCA-WREB-CITA is not responsible for the malfunction of facility or candidate equipment and may or may not allot additional time due to the malfunction of any equipment. Equipment maintenance personnel are onsite during each examination to ensure the equipment and the water are in working order. At the site, should an equipment malfunction occur prior to or during the examination, the candidate must immediately notify the DH Chief Examiner so the appropriate personnel may be contacted.

2. Examination Timeline:

Below are examples of various exam session schedules, actual schedules may vary for each exam:

1 Session	Group A
Exam Check-In, SimProDH Distribution, Clinic Setup, Floor Check-In	2:00 - 3:00 PM
Exam Start	3:00 PM
Exam Finish	5:00 PM
Enter Candidate Findings, Candidate Check-Out, Operatory Turnover	5:00 PM – 5:30 PM

2 sessions	Group A	Group B
Exam Check-In, Typodont Distribution, Clinic Set-Up, CFE Check-In	7:00 - 8:00 AM	10:30 - 11:30 AM
Exam Start	8:00 AM	11:30 PM
Exam Finish	10:00 AM	1:30 PM
Enter Candidate Findings, Candidate Check-Out, Operatory Turn-over	10:00 - 10:30 AM	1:30 - 2:00 PM

3 sessions	Group A	Group B	Group C
Exam Check-In, Typodont Distribution, Clinic Set-Up, CFE Check- In	7:00 - 8:00 AM	10:30 - 11:30 AM	2:00 - 3:00 PM
Exam Start Time	8:00 AM	11:30 AM	3:00 PM
Exam Finish Time	10:00 AM	1:30 PM	5:00 PM
Enter Candidate Findings, Candidate Check-out, Operatory Turn-over	10:00 - 10:30 AM	1:30-2:00 PM	5:00 - 5:30 PM

3. *Timely Arrival*

Candidates are responsible for determining their travel and time schedules to ensure they can meet all of the CDCA-WREB-CITA's time requirements. All candidates are expected to arrive at the examination site well prepared at their designated time, which will be communicated to them via their online candidate profiles. Failure to follow this guideline may result in not being permitted to start the examination. Candidates are encouraged to arrive 30 minutes before their appointed time to assure a timely start.

Candidates will be informed in their online candidate profiles as to the date and session on which they are assigned to challenge the SPTCE. Examination schedules are not finalized until after the examination application deadline. Candidates should note the specific timelines for their assigned session, and the examination must be completed within the allotted time.

D. Candidate Professional Conduct

Integrity of the examination process depends on fairness, accuracy and consistency. Standards are required to ensure that these principles are adhered to by examiners and candidates. Penalties are imposed for violations of such examination guidelines and the penalties are proportional to the seriousness of the violation. Minor violations may result in a warning or reminder. Serious violations may result in a failure of the examination. Candidates are required to adhere to these standards of conduct while participating in the ADEX Dental Hygiene Examination.

1. **Submission of examination records & materials:** All required examination records must be turned in to the DH Chief or Exam Technical Coordinator before the examination is considered complete. If all required documentation and materials are not turned in at the end of the examination, the examination will be considered incomplete, and the candidate may fail the examination.
2. **Registered/assigned procedures:** Only the treatment and/or procedures for which a candidate has registered, paid for, and been assigned to on the specified examination date may be performed. Performing other treatment and/or procedures may result in termination of the examination.
3. **Professional Misconduct:** Professional misconduct is a most serious violation of examination guidelines. Substantiated evidence of professional misconduct (see examples below) during the course of the examination will result in **automatic failure** of the entire examination series. In addition, there will be no refund of examination fees and the candidate will not be allowed to reapply for re-examination for one year from the time of the infraction.

Professional misconduct includes, but is not limited to:

- Falsification or intentional misrepresentation of registration requirements
- Cheating of any kind
- Use of materials or instruments beyond the scope of clinical treatment, including the use of solvents or other chemicals affecting typodonts or patients
- Demonstrating complete disregard for the oral structures
- Misappropriation of equipment (theft)
- Receiving unauthorized assistance
- Alteration of examination records
- Failure to follow instructions from examiners

- Rude, abusive, uncooperative or disruptive behavior toward, examiners, or other candidates
- Use of electronic equipment, to include recording devices, phones, and/or cameras (*candidates are prohibited from the use of any electronic devices during the course of the examination)

E. Infection Control

The current recommended infection control procedures for patient treatment as published by the Centers for Disease Control and Prevention must be followed. These procedures must begin with the initial setting up of the unit, continue throughout the course of the examination and include the final cleanup of the operatory.

- Clean long-sleeved uniforms, gowns, or laboratory coats are to be worn and must be changed if they become visibly soiled. Gowns must be closed at the neck. Gowns or laboratory coats are to be removed before leaving the clinic area.
- Face masks and protective eyewear with side shields must be worn during all procedures. Masks are to be discarded if the masks become damp or soiled.
- Footwear may not include sandals, perforated clogs or open-toed shoes (a safety issue rather than strictly infection control).

Requirements for Personal Protective Equipment for the exam are site specific. Candidates are advised to check with the site to see what PPE is required and whether the site will be providing it for candidates. The CDCA-WREB-CITA will not provide PPE for candidates.

- Upon completion of the examination, it is the responsibility of the candidate to thoroughly clean the operatory by utilizing accepted infection control procedures.

F. Scoring System Overview

Evaluations are made in a “double blind” manner at specified steps as a candidate progresses. Three examiners independently evaluate each presentation of candidate performance and enter their evaluations electronically. Each examiner is unable to see the evaluations of the other two examiners for any procedure presentation, and examiners are prohibited from discussing their evaluations during the examination.

Evaluations are made according to defined criteria, on a point accrual basis with the potential of earning 100 points. That is, for every successful fulfillment of the criterion, points are awarded. The candidate’s performance level is electronically computed for each item evaluated, based on the entries of the three examiners, and by this method, the candidate’s overall score is computed for each procedure. The candidate’s Calculus Detection performance is measured against a pre-determined key which has been verified by three or more examiners.

The full scoring rubric can be found on the next page.

**A score of 75 or greater is required for candidates to pass.
No scores will be rounded.**

2023 ADEX SPTCE SCORING RUBRIC

Skills Assessment	Criteria	Points Possible
Calculus Detection	<ul style="list-style-type: none"> • 4 assigned teeth • 4 surfaces evaluated on each assigned tooth • 16 surfaces will be evaluated for the presence or absence of subgingival calculus (1 point each) 	16
Calculus Removal	<ul style="list-style-type: none"> • One quadrant assigned for scaling • 12 assigned surfaces of calculus will be evaluated for calculus removal (5.5 points each) 	66
Periodontal Probing Measurement	<ul style="list-style-type: none"> • 2 assigned teeth • 6 measurements per tooth • 12 measurements will be evaluated (1 point each) 	12
Final Case Presentation	<ul style="list-style-type: none"> • Evaluation of calculus removal on all remaining surfaces within the assigned quadrant • Calculus remaining on 1 surface (-3 points) • Calculus remaining on 2 or more surfaces (-6 points) 	6
Total		100

Penalty Points:

There is a treatment expectation that candidates will complete treatment assignments without damage to either hard or soft tissue. If tissue damage does occur, Penalty Points will be assessed for each area of tissue damage. The number of assessed Penalty Points will be subtracted from the total score of points accrued during the criteria grading process. The criteria for Tissue Damage is described below:

Soft Tissue Damage: Error in tissue management will result in the assessment of penalty points according to the following criteria:

- One point deducted for each site of minor soft tissue damage, up to three sites
- The presence of four or more minor soft tissue damage sites or one major soft tissue damage site results in an automatic failure.
- Minor Soft Tissue Damage: There is slight soft tissue trauma that is inconsistent with the procedure. Minor soft tissue damage includes: A laceration/abrasion that is ≤ 3 mm; A laceration or injury that would not result in the need for suturing, periodontal packing, or further follow-up treatment.
- Major Soft Tissue Damage: A laceration/abrasion that is > 3 mm and that would require sutures, periodontal packing, or further follow-up treatment. A laceration/injury that would result in exposure of alveolar bone, flap, or amputation of papilla. An unreported broken instrument tip in the sulcus or soft tissue.

Hard Tissue Damage: Error in tissue management will result in the assessment of penalty points according to the following criteria:

- One point deducted for each site of minor hard tissue damage, up to three sites
- The presence of four or more minor hard tissue damage sites or one major hard tissue damage site results in an automatic failure.
- Minor Hard Tissue Damage: slight hard tissue damage that is inconsistent with the procedure or a pre-existing condition. Minor Tissue Trauma may include all hard tissue surfaces that would not require additional definitive treatment.
- Major Hard Tissue Damage: includes major damage to the hard tissue that is inconsistent with the procedure and a pre-existing condition. Major Tissue may include all hard tissue surfaces that would require additional definitive treatment.

G. Instrument Requirements

Candidates are encouraged to have an additional set of instruments on hand during the examination. Candidates will not be allowed additional time for instruments dropped. Inform the DH Chief or ETC if an instrument is dropped.

1. *Required Instruments for Evaluation (3 items):*

Examiners are calibrated in using the 11/12 explorer and a probe with 1 mm markings. It is not required that instruments be sterile for this examination. Examples of these instruments are shown below:

- a) Calculus Detection: 11/12 Explorer (e.g. the ODU 11/12)



- b) Probing Exercise: Probe marked with 1mm increments (e.g. the UNC probe)



- c) Reflective front surface mirror, which may be one or two sided

If an instrument drops, candidate informs the Chief or ETC to explain the protocol followed for patient care. The instrument must be disinfected and then candidate may continue using that instrument. Use of a contaminated instrument without discussion with the Chief or ETC will result in a 100 point penalty.

2. Other Instruments:

Only instruments utilized within the standard of care for dental hygiene procedures may be utilized for this examination. The use of restorative or non-dental instruments or materials are prohibited and grounds for dismissal from the examination.

The use of ultrasonics is site dependent for the Simulated Patient examination. For information regarding ultrasonic/sonic or piezo electric scaling instruments, refer to the host site's Site Information Sheet for details on availability and types of powered/ultrasonic devices. The CDCA-WREB-CITA does not assist with equipment rental for candidates.

Candidates are responsible for checking the Site Information Sheet and, if necessary, contacting the host site to verify that all hand pieces and sonic/ultrasonic scalers are authorized/compatible with school equipment.

The ADEX Dental Hygiene Examination: Simulated Patient Treatment Clinical Examination

I. Pre-examination Preparation

- Orientation
- Virtual Q & A

II. Exam Day Administration

- Admission to Clinic Requirements on Exam Day
- Exam Flow
- Setting Up and Getting Started
- End of Examination Procedure

PRE-EXAMINATION PREPARATION

A. *Dental Hygiene Exam Orientation Video*

Cdcaexams.org > Dental Hygiene (ADEX) > Dental Hygiene Exam Orientation

B. *Candidate Question & Answer Session*

Candidates should be familiar with all online resources and manuals before the question and answer meeting to get the most benefit from this session. These sessions may be virtual or on site, depending on the examination. Candidates are expected to participate in this session where important site information will be given and exam process will be reviewed. Candidates are encouraged to ask questions about the site, the exam process or other exam related issues. Candidates will be notified by email of the day and time of this important session. The question and answer sessions **are not** recorded by the CDCA-WREB-CITA and **cannot** be shared at a later date.

EXAM DAY ADMINISTRATION

A. Admission to Clinic Requirements on Exam Day

To be granted entrance to the candidate clinic on exam day, you must bring the following:

1. A government or school issued photo ID. Acceptable forms of photo identification include such documents as current, valid driver's license, passport, military ID, or official school ID. If your name has recently changed, bring a copy of the marriage certificate or court document to the examination.
2. Your candidate number which can be found on your registration confirmation (available in your online candidate profile). *You may either bring a printout or a screen shot of the registration confirmation or an electronic device that can display your identification information in your secure online profile. Please note that internet connectivity is not always available on-site, so you are strongly advised to print out your form or take a screen shot.

Your candidate ID number (5-digits) will be used throughout the examination process to identify you, your workspace, your forms, all electronic data entry pertaining to you, to track your progress through the examination, when scoring evaluations of your performance, and when reporting your score.

Once candidate ID's have been verified, candidates will receive:

1. Candidate labels and 2 Photo ID Badges
2. Assignment and Candidate Findings Form
3. Mandibular typodont

The maxillary arch will already be in place in the typodont head that is setup in the treatment area.

One of the candidate photo ID labels given upon entry to the clinic must be worn at all times on your outermost garment while on the clinic floor. The second label will be worn on your scrubs.

Candidates should then proceed to their assigned operatory to set up for the exam.

B. Exam Flow

Examination Assignment:

Subgingival Calculus Assignment

- One quadrant will be assigned for treatment which contains 12 surfaces of calculus. **Candidates are responsible for removing all calculus in the assigned quadrant.**
- The *Assignment and Candidate Findings Form* (ACF) will list 10 of the 12 selected surfaces. Candidates will not know the location of the 2 other selected surfaces
- The 12-assigned surfaces of calculus are each worth 5.5 points (66 total points)
- The removal of calculus on all other unassigned surfaces will be evaluated in the Final Case Presentation (6 points)

Calculus Detection Findings

- 4 teeth will be assigned for calculus detection
- The candidate will evaluate 4 surfaces per tooth (MDFL) for the presence or absence of subgingival calculus
- There will be a total of 16 surfaces evaluated each worth 1 point (16 points)

Probing Measurement Findings

- 2 teeth (1 anterior and 1 posterior) will be assigned for probing measurements
- The candidate will record 6 periodontal measurements per tooth (DF,F,MF,DL,L and ML)
- There will be a total of 12 measurements each worth 1 point (12 points)

C. Setting Up and Check-in

Set-Up Period

Candidates will proceed to their assigned workstation and perform the following:

1. Place one of the picture ID labels on your scrubs and the other picture ID label on your outermost clinical garment. You must have a photo ID visible at all times on the clinic floor
2. Place a candidate ID label on the *Assignment and Candidate Findings Form* in the designated area
3. Place a candidate ID label on the plastic bag containing your treatment arch
4. Reserve a candidate ID label for placement on the lower arch before it is turned in (instructions will be given the day of the exam)
5. Mount the lower arch in the provided articulator and shroud
6. Set up exam instruments
7. Move the chair to an appropriate operator position to establish a comfortable working position

Check-in With Floor Examiners – DH Chief, Exam Technical Coordinator:

1. The floor examiner must check the position of the mounted typodont for all candidates and will confirm each candidate's assignments before the exam can begin
2. The floor examiner will inform all candidates when treatment can begin. Candidates may not start treatment until instructed
3. The group finish time will be announced at the Exam Start

4. Candidates will have 2 hours to complete treatment (Calculus Detection, Calculus Removal, and Periodontal Probing)
5. The DH Chief Examiner give 2 time notifications during the examination:
 - a. first at one hour
 - b. second at fifteen minutes before the end of treatment time
 - c. candidates are responsible to monitor and manage their own time

D. Treatment and Check-out

Clinical Treatment

1. Candidates are assigned:
 - a. One (1) quadrant for Calculus Removal
 - b. Four (4) teeth for Calculus Detection
 - c. Two (2) teeth for Periodontal Measurements
2. Candidates are encouraged to begin treatment by completing the Calculus Detection Exercise and recording the findings on the ACF form
 - a. In the Calculus Detection Exercise you will answer YES if there is any **ANY** subgingival calculus present. A rough, grainy surface is **not** considered calculus and would be marked NO
3. Candidates will be assigned a full quadrant for treatment to demonstrate your calculus removal skills.
 - a. Contained within that quadrant are 12 calculus surfaces which have been identified and assigned. The point value for the removal of calculus from the 12 surfaces is 5.5 pts each.
 - b. Candidates will be told 10 of the 12 surfaces assigned. The location of the other 2 assigned surfaces will be unknown.
 - c. Candidates will be evaluated on the removal of all calculus within the quadrant.
 - i. the 12 selected surfaces are weighted more heavily than other unassigned surfaces within the quadrant.
4. Periodontal Measurements are taken **AFTER** the calculus has been removed and treatment is completed.
 - a. Candidates will be recording 6 measurements for each tooth assigned.
5. Polishing is **not** part of this examination
6. If candidates complete the examination before the allotted 2 hour time, they may leave the examination by following the End of Exam Procedure below
7. Arches **are not** to be removed from the articulator until the end of the examination. Once the arch is removed, the examination is over
8. Floor Examiners are available to answer candidate questions during the examination

End of Examination Procedure

1. Wipe down both arches with soap and water or disposable wipe
2. Remove the lower arch and dry it well
3. Place reserved candidate ID label on the lower arch
4. Place the lower arch back into the plastic bag and labeled with a candidate ID label (per set up instructions)
5. Fold the *Assignment and Candidate Findings (AFC) Form* and place in the plastic bag with the lower arch
6. Dry the upper arch and the inside of the shroud with paper towels and/ compressed air. DO NOT remove the maxillary arch
7. Clean up your operatory

8. Gather your personal belongings and all exam materials and go to the designated check out area
9. Meet with the floor examiner to enter your candidate findings from the ACF form into the electronic grading system
10. Check out with floor examiner and return all exam materials, exit the examination

Tissue Management

During the post-treatment evaluations, examiners will evaluate the sub-gingival calculus from all surfaces, as well as tissue management. Candidates must effectively use hand instruments and ultrasonic/sonic cleaning devices without causing unwarranted soft or hard tissue trauma. When no minor hard or soft tissue trauma exists, no penalty points will be deducted.

Results Release

Please see the “Scoring” section of the *Candidate Registration and CSCE OSCE Manual* for detailed information on the results release process, both to the candidates as well as to the State Boards of Dentistry.

The ADEX Dental Hygiene Examination: Simulated Patient Treatment Clinical Examination

III. Assignment and Candidate Findings Form (ACF)

ADEX Dental Hygiene Simulated Patient Assignment and Candidate Findings Form

CANDIDATE LABEL



Quadrant

LR

Version:

A B C D E

Typodont mounting approved & assignment confirmed by CFE/ETC/HFE

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CALCULUS DETECTION FINDINGS

For the teeth listed, indicate if subgingival calculus is present or not present by placing an X in the appropriate box

Yes = present or No = not present for each of the four surfaces on each tooth: Mesial, Distal, Facial, And Lingual

Tooth #	M	D	F	L
<input type="checkbox"/>	Yes No	Yes No	Yes No	Yes No
<input type="checkbox"/>	Yes No	Yes No	Yes No	Yes No
<input type="checkbox"/>	Yes No	Yes No	Yes No	Yes No
<input type="checkbox"/>	Yes No	Yes No	Yes No	Yes No

CALCULUS REMOVAL ASSIGNMENT

Listed here are 10 of the 12 selected surfaces that have been assigned to you. You are evaluated on the removal of all calculus in the entire quadrant, with the 12 pre-selected surfaces having a higher point value.

Tooth # and Surface

<input type="checkbox"/>				
<input type="checkbox"/>				

PROBING MEASUREMENT FINDINGS

One anterior tooth and one posterior tooth is listed for periodontal probing.

Measure and record in the appropriate boxes the depth of each sulcus/pocket on the indicated surfaces to the nearest mm.

Anterior Tooth #				Posterior Tooth #			
DF		DL		DF		DL	
F		L		F		L	
MF		ML		MF		ML	

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EXAM COMPLETED
CHIEF/ETC/HFE #

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FINISH TIME