The ADEX Dental Examination Series

DENTAL CANDIDATE MANUAL

Clinical Examinations: Fixed Prosthodontic, Endodontic, Periodontal & Restorative

EXAM YEAR
2025

Version 20250916

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ADDENDUM

Additions or modifications after initial publication.

- **CDCA-WREB-CITA is now the American Board of Dental Examiners**. CDCA-WREB-CITA, the nation's leading dental exam administrator, and the American Board of Dental Examiners (ADEX), developer of the national ADEX licensure exams, are now combined under a single entity: the American Board of Dental Examiners. This is also reflected in a new organizational logo and updated branding. (09/16/2025)

EXAMINATION OVERVIEW

American Board of Dental Examiners administers the ADEX Dental Examination, which consists of computer-based and clinical exam components. All examinations are based on specific performance criteria developed by ADEX and other content experts used to measure the clinical competency of candidates.

All components of the ***ADEX Dental Examination series*** must be successfully completed (passing scores) within 18 months of the initial attempt of any component in the series. In conjunction with this manual, refer to the Candidate Guide (policies) available on the ADEXtesting.org website for more information regarding the ***ADEX 18-Month Rule, 3-Time Fail Policy***, exam eligibility, registration, and other administrative policies.

- The computer-based ***Diagnostic Skills Examination (DSE OSCE)*** assesses various levels of diagnosis and treatment planning knowledge, skills, and abilities. Patient simulation is achieved through computer-enhanced photographs, radiographs, optical images of study and working models, laboratory data, and other clinical digitized reproductions. Refer to the separate **Computer-based Candidate Manual** for more information.
- The ***Clinical Examinations*** are simulated patient treatment exams performed on a proprietary typodont model in a clinic or simulation laboratory within the designated timeframe. (Refer to the ***Examination Timeline*** section of the respective procedure for guidelines and restrictions.) Candidates are evaluated based on the respective performance criteria (see Criteria Sheets).

  Clinical examinations consist of multiple procedures, which are evaluated and reported as singular exam parts or components. Successful completion of all procedures of the respective clinical examination are required to achieve an overall passing score. Meaning that failure of one or more procedures requires a re-attempt of all procedures of the respective examination.

  A. ***Fixed Prosthodontic Examination.*** Candidates have up to four (4) hours to complete the following procedures:
     1. Ceramic Crown preparation
     2. Porcelain-Fused-to-Metal Crown preparation
     3. Cast Metal Crown preparation

  B. ***Endodontic Examination.*** Candidates have up to three (3) hours to complete the following procedures:
     1. Anterior procedure
     2. Posterior procedure

  C. ***Periodontal Examination.*** Candidates have up to 60 minutes to complete the following procedures:
     1. Calculus removal on 12 assigned surfaces in a mandibular quadrant

  D. ***Restorative Examinations.*** Candidates have up to seven (7) hours to complete the following:
     - ***Posterior Restorative Examination:*** Class II preparation and restoration of carious lesion on a mandibular molar or premolar
     - ***Anterior Restorative Examination:*** Class III preparation and restoration of carious lesion on a maxillary incisor

PERFORMANCE EXPECTATIONS

Candidate performance is evaluated according to the criteria defined in the Criteria Sheet for the respective procedure. Examiners evaluate each presentation of candidate performance independently and enter their evaluations electronically. Each examiner is unable to see the evaluations of the other two examiners for any procedure, and examiners are prohibited from discussing their evaluations during the examination.

Skills Assessment	ADEX Prosthodontic Exam Content	Criteria
All-Ceramic Crown Tooth #9	• Preparation on a central incisor	12
Porcelain-fused-to-Metal Crown Tooth #5	• Preparation as an anterior abutment for a 3-unit fixed dental prosthesis (bridge)	12
Cast Metal Crown Tooth #3	• Preparation as the posterior abutment for same 3-unit fixed dental prosthesis (bridge)	12

Skills Assessment	ADEX Endodontic Exam Content	Criteria
Anterior Procedure Tooth #8	• Access preparation, canal preparation, and obturation	10
Posterior Procedure Tooth #14	• Access preparation and canal identification	6

Skills Assessment	ADEX Periodontal Exam Content	Criteria
Periodontal Scaling	• Calculus removal on 12 assigned surfaces in a mandibular quadrant • Tissue management (hard and/or soft)	3

Skills Assessment	ADEX Restorative Exams Content	Criteria
Anterior Restorative Procedures	• Class III Composite Preparation • Class III Composite Restoration	9 6
Posterior Restorative Procedures**	• Class II Amalgam Preparation • Class II Amalgam Restoration • Class II Composite Preparation • Class II Composite Restoration	13 6 13 7

** Candidate may choose to complete either an Amalgam or Composite Posterior Restorative procedure.

Exam content is based on the "**Universal Numbering System**" of dental notation.

Scoring Overview

The criteria gradations of competence are described across a 3-level rating scale. Those criteria appear on the respective Criteria Sheet and are the basis for the evaluation. The three rating levels are as follows:

- **ACC (Clinically Acceptable):** The treatment is of acceptable quality, demonstrating competence in clinical judgment, knowledge, and skill.
- **SUB (Marginally Substandard):** The treatment is of marginal quality, demonstrating less than expected clinical judgment and/or skill.*
- **DEF (Critically Deficient):** The treatment is of unacceptable quality, demonstrating critical areas of incompetence in clinical judgment, knowledge, and/or skill.

  If a criterion is assigned a rating of **critically deficient** by two or more examiners, no points are awarded for that procedure, and the candidate will fail that procedure.

***3-SUB RULE:** If examiners independently confirm three marginally substandard over-preparation criteria on the same procedure, then the procedure will be determined to be critically deficient, and the candidate will fail that procedure. Applicable criteria are highlighted in yellow on the criteria sheet.

NOTE: Candidates are not informed of the outcome of any procedure during the examination. For the Restorative examination, candidates will restore the prepared tooth even in the case of a failure of the preparation.

Result Details. A score of 75 or greater is required to pass each part of the examination; however, results are reported as Pass/Fail to Candidates and licensing jurisdictions for each part. Applicable criteria are provided to candidates of failed clinical attempts. Post-exam images, details or explanation beyond the stated criteria are not reported.

10-Day Retake Waiting Period. A 10-day waiting period is required between the date of failure and the re-attempt of any clinical part of the ADEX examination.

Standards of Conduct

Integrity of the examination depends on fairness, accuracy and consistency. Established standards of conduct ensure that these principles are adhered to by examiners, candidates, and all individuals and entities involved in examination administration.

Dismissal, failure of the examination or a reduction in an examination score may result from improper performance or unethical conduct (misconduct).

Candidates are required to adhere to these standards of conduct while participating in an ADEX Examination or any American Board of Dental Examiners administered examination. Refer to the Candidate Guide for conduct and examination guidelines resulting in penalties or automatic failure of the examination and/or examination series (e.g. use of prohibited electronic devices, etc.).

IMPORTANT REMINDER: Photography

Photography or recording of any aspect of the clinical or computer-based examination is strictly prohibited and grounds for immediate dismissal.

EXAM PREPARATION

OFFICIAL RESOURCES

Candidates are responsible for reading and understanding manuals and materials published by American Board of Dental Examiners. Candidates bear all risk of any misunderstanding resulting from the use of or reliance on unofficial, non-authorized or third-party information or materials.

Refer to the Dental Examination Overview and Test Prep pages of the ADEXtesting.org website for official resources.

Candidate Guide, Exam Manuals, Criteria Sheets & Forms for Exam Use

Official resources available for candidate use during the examination.

- Refer to the Candidate Guide for American Board of Dental Examiners policies and procedures regarding eligibility requirements, candidate conduct, infection control protocols, results release, and exam administration.
- Refer to this ***Candidate Manual*** for exam protocols, procedures, materials, and performance expectations.
- Downloadable ***Criteria Sheets*** provide the criteria used to evaluate a candidate's performance.
- Downloadable ***sample examination forms*** are for candidate reference only, not for exam use. Official printed examination forms are provided at the exam site during cubicle/workstation set-up.

Typodonts & Manikins

All candidate assignments are performed on American Board of Dental Examiners provided ***proprietary magnetically retained typodonts and teeth***. Manikin, shroud and mounting post are also provided for candidate use during the examination.

Questions? Contact Us

Site Info Sheets

Visit the Calendar section of the ADEXtesting.org website for ***Site Info Sheets*** regarding host-provided supplies and equipment, infection control protocols, PPE, equipment rental, and other valuable information for each clinical exam location. Contact site host directly with questions regarding information listed in their ***Site Info Sheet.***

Submit questions regarding exam availability, registration and fees to American Board of Dental Examiners via Contact Us.

Q&A Session

The ***Q&A Session*** affords Candidates the opportunity to ask questions about exam processes or other exam-related concerns, including host site-specific protocols, in advance of their clinical examination.

Registered Candidates are notified of their scheduled Q&A Session date and time via email; participation is strongly encouraged. Sessions may be virtual or onsite, depending on host site preference/availability. Q&A Sessions are not recorded by American Board of Dental Examiners.

Video Tools

Visit the Test Prep page to access ***videos*** highlighting the examination day experience. Only videos branded and published by ADEX Testing Media are valid sources of information. However, these videos are for demonstration purposes only, not a replacement for information contained within this ***Candidate Manual***.

INSTRUMENTS & MATERIALS

Instrument Guidelines

- Candidates are ***responsible for furnishing their own instruments and materials*** as needed to complete the required dental examination procedures.
- Candidates must use their best clinical judgment and diagnostic skills when determining which dental instruments and armamentarium are required to perform each procedure as an instrument list is not provided.
- Only instruments, materials and techniques within the standard of patient care for the dental procedure specific to each examination part may be used. (Use of inappropriate instruments, materials, solvents or techniques is prohibited and grounds for termination of the examination.)
- Instruments must be clean and disinfected, but sterilization is not required for simulated patient (i.e. manikin) examinations. Once the examination begins, all CDC infection control guidelines must be followed.
- Some locations may have instruments available for candidate use for an additional fee. For information regarding instrument availability, hand-piece compatibility, and materials provided, refer to the respective exam host Site Info Sheet located in the Calendar section of the ADEXtesting.org website. Contact the site host directly with questions regarding school-related information listed within their Site Info Sheet. Any arrangements for instrument or equipment rental should be completed well in advance of the examination to ensure availability, if applicable.

CONTAMINATED INSTRUMENT PROTOCOL

Once treatment begins, inform the CFE if an instrument becomes contaminated (e.g. dropped). In lieu of replacing the instrument, the candidate must explain the protocol followed for patient treatment, and ***wipe down/disinfect*** the instrument prior to use.

IMPORTANT REMINDER: School Equipment

Notify Clinic Floor Examiner (CFE) immediately of any school equipment malfunction.

EXAMINATION TEAM MEMBERS

- **Chief Examiner** - oversees exam administration in both Candidate and Grading Examiner clinics/areas
- **Clinic Floor Examiner (CFE)** - oversees Candidate functions
- **Grading Team Captain/Grading Examiners** - evaluate Candidate performance according to published criteria; no candidate interactions
- **Support Staff (ETA, ETC)** - provides exam administration support in both Candidate and Grading Examiner clinics/areas

Infection Control Guidelines

Candidates are required to adhere to current ***Centers for Disease Control and Prevention (CDC)*** infection control guidelines and recommendations for all simulated patient (manikin) examinations. However, the exam site host may impose additional requirements or restrictions. Refer to the Site Info Sheet for a list of school-provided materials and equipment, PPE requirements, and plan accordingly.

Personal Protective Equipment (PPE). Candidates are responsible for following basic Personal Protective Equipment (PPE) requirements for all clinical examinations as outlined by American Board of Dental Examiners.

- Mask
- Gloves
- Appropriate clinical attire/scrubs
- Close-toed shoes
- Protective eyewear, loupes or prescription eyewear with side shields

Refer to the Candidate Guide for additional information regarding minimum infection control requirements.

Instruments & Materials Used for Evaluation

Examiners utilize the following instruments and materials during the evaluation processes:

- Perio probe with millimeter markings (e.g. UNC-15)
- 11/12 explorer (Periodontal exam)
- Endodontic explorer (Endodontic exam)
- Sharp explorer (e.g. shepherd's hook) (Restorative exam)
- Dental floss, articulating paper (Restorative exam)
- Putty matrices/reduction guides (Prosthodontic exam)

Prohibited Items

Presence of the following prohibited items will result in confiscation of materials, as well as dismissal from and failure of the examination.

- Non-dental instruments
- Digital scanner
- Electronic devices (e.g. phone, smart watch, camera, etc.)
- Pre-made reduction guides/putty matrices and/or impressions
- Pre-made overlays, clear plastic shells, models
- Extra and/or pre-prepared typodont teeth
- Screwdrivers
- Solvents
- Non-official reference materials

Dental assistants are not permitted during any aspect of the examinations.

Refer to the Candidate Guide for additional information and violations applicable to all exam types.

Use of Solvents for Treatment Procedures

Solvents or any technique or material deemed unacceptable for patient care are prohibited.

Alcohol **can *only*** be used after the anterior endodontic procedure has been completed to remove excess sealer from the chamber (as performed clinically when treating patients).

EXAM ADMINISTRATION

Prosthodontic, Endodontic & Periodontal

EXAMINATION TIMELINE

The examination timeline below is for ***example only***; actual schedules may vary by candidate procedure. Candidates are notified via email once their individual **examination schedule and Q&A Session** information are available in their Candidates.ADEXtesting.org profile approximately 2-3 weeks prior to the clinical exam. The Chief Examiner or Clinic Floor Examiner announces the start of examination.

Session	Start Time	Stop/Finish Time
Candidate Check-In, Clinic Entrance, Workstation Setup	6:30 AM	8:00 AM
Prosthodontic Examination (4 hours)	8:00 AM	12:00 PM
Break (Optional)[1]	*12:00 PM*	*12:30 PM*
Endodontic Examination[2] **(3 hours)**	12:30 PM**	3:30 PM
Periodontal Examination[2] **(1.0 hour)**	3:30 PM**	4:30 PM

NOTE: Treatment may begin only after the Chief Examiner or Clinic Floor Examiner announces the start of examination.

[1]**BREAKS.** Breaks are permitted between exam parts and taken at the discretion of the Candidate. All procedures must be started by the scheduled start time to receive the full time allotment. Time adjustments or extensions are not permitted for discretionary breaks taken during treatment timelines. Plan accordingly.

[2]**Start Time dictates Stop/Finish Time.** Candidate may begin Endodontic or Periodontal procedures in advance of scheduled start time. Clinic Floor Examiner (CFE) will record assigned Finish Times on ***Progress Forms***.

IMPORTANT REMINDER: Time Management

Candidates are responsible for managing and monitoring their time appropriately to ensure timely arrival and procedure completion according to their assigned examination schedule or finish time to avoid penalty.

EXAM CHECK-IN

Prosthodontic, Endodontic & Periodontal

IDENTIFICATION REQUIREMENTS FOR ADMISSION

The following items are required for admission to the clinical examination:

- ***PHOTO IDENTIFICATION.*** A government or school issued photo ID. Acceptable forms of non-expired photo identification include such documents as current, valid driver license, passport, military ID, or official school ID.

  Recent Name Change. If your legal name has recently changed, bring a copy of the supporting name change document (e.g. marriage certificate, dissolution decree or court document) to the clinical examination.

Candidate ID Number, Badges & Labels

CANDIDATE ID NUMBER. Note that your Candidate ID Number will be used on all badges, labels and forms to maintain your anonymity during the examination; and in conjunction with your name on all post-exam results reports.

ID BADGES. Upon identity verification, candidates receive a sheet of candidate labels, including two (2) Candidate Photo Badge labels. Photo badge label must be visible on your outermost garment throughout the examination.

LABELS. Place your Candidate ID Label/QR Code on all examination forms and cubicle card.

Exam Packet & Forms

Progress Forms are used to document and track your progress and communicate with examiners. Progress Forms must be verified by a CFE before proceeding to next step of exam process.

IMPORTANT REMINDER: Official Resources & References

Only the Candidate Manual, Candidate Guide, and Exam Criteria Sheets are permitted in the clinic area. A Candidate's personal, handwritten notes or illustrations recorded on the pages of the manual are also permitted.

EXAM DAY

Prosthodontic, Endodontic & Periodontal

Clinic Entrance

1. Candidates may enter the clinic or simulation lab used for the examination at 6:30 am
2. Check-in to receive exam packet (Candidate ID Labels, exam forms) and typodont

Cubicle or Workstation

1. Identify cubicle/workstation
2. Evaluate typodont, and indicate approval on ***Progress Forms***
3. Setup instruments and materials

Set-up Period

Gloves are not required prior to typodont mounting or exam start. Clinic Floor Examiners (CFE) monitor candidate progress and confirm that typodonts are properly mounted, and shrouds appropriately placed.

1. CFEs will circulate to loosen Endo tooth #8 retention screw (Candidates may NOT loosen screw.)
2. Candidates measure length of the Anterior Endo tooth with CFE present and attests that a measurement was taken on the ***Endodontic Progress Form.*** The Anterior Endodontic procedure is performed on teeth of varying lengths, making careful measurement an important step in the set-up process.
3. CFE re-tightens the tooth in typodont.
4. Holes may be punched in the rubber isolation dam, but not placed in the manikin prior to exam start time.
5. Candidates make putty matrices/reduction guides.

Time Management

Examiners are not responsible for stopping candidates at their assigned finish times. Failure to meet the examination timeline requirements for a procedure results in a violation of exam standards penalty and failure of the exam.

Typodont & Assigned Teeth

Typodonts are provided at Check-in. Evaluate typodont for acceptance. Indicate acceptance and approval on respective ***Progress Form***.

TOOTH MARKING. Teeth may be marked--*only after the official exam start*--in a way that could be done on a patient following proper infection control techniques.

WRONG TOOTH. If a procedure is started on the wrong tooth, stop working and immediately notify a CFE.

Refer to respective Criteria Sheet for evaluation criteria for each exam procedure.

PROSTHODONTIC EXAM

The candidate may perform the Prosthodontic Examination procedures (ceramic, PFM, cast metal crown preparations) in any order they choose.

- Candidate must check-in with Clinic Floor Examiner (CFE) for authorization of typodont mounting. Treatment may begin only after the start of the exam. Both maxillary and mandibular typodont arches must be in place for all treatment procedures.
- All candidates must stop working by their assigned Finish Time, which is four (4) hours after the start of the exam.
- After all Prosthodontic procedures have been completed, request a CFE to begin the check-out process for the Prosthodontic exam. Once checked out of the Prosthodontic exam, you cannot return to any prosthodontic procedure.

Putty Matrices

Putty matrices or reduction guides must be fabricated during the setup time or using full infection control procedures once the Prosthodontic Exam has begun.

Two putty matrices are to be fabricated for the ceramic crown and two for the combination of the cast metal crown and PFM preps. One of each set of putty matrices is to be sectioned mesiodistally and one facio-lingually over each tooth to be prepared. This may be done without the use of gloves before typodont mounting. Other impressions may be taken during the exam using CDC infection control procedures.

Reduction guides or putty matrices must be placed into the typodont box with the typodont at the end of the examination. All other impressions, casts, or models must also be turned in.

Refer to Guide to Fabrication PDF for additional information regarding candidate-fabricated putty matrices.

Additional Information

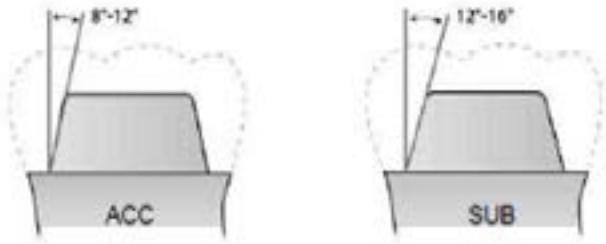
- Occlusal equilibration of typodont teeth is prohibited.
- Rubber dam isolation not required.

Impressions

If exam site allows, Candidates may make analog impressions and pour models to evaluate preparations (e.g. parallelism for the bridge preps or an undercut on any prep). (Digital scanning of preparations is prohibited.) All model pouring must be performed in the designated location. Candidates may not remove any examination materials from the Clinic Floor.

Models and impressions MUST be submitted to a CFE at the completion of the exam.

Taper is defined as gradually becoming narrower in one direction. For examination purposes, the requirements for tapering are illustrated below:



Taper greater than 16 degrees is considered Critically Deficient.

Preparation Line of Draw

The two bridge abutment preparations must allow a common line of draw.

ENDODONTIC EXAM

You may choose to start the Endodontic Exam earlier than the scheduled start time. If you opt to start early, the CFE will record your assigned finish time for the endodontic procedures on your ***Progress Form***, which will be three (3) hours from the time you started the Endodontic Exam.

The candidate may perform the endodontic procedures (anterior, posterior) in any order they choose (separate isolation dam required for each procedure).

- Candidate must check-in with Clinic Floor Examiner (CFE) for authorization of typodont mounting. Treatment may begin only after check-in is complete. Both maxillary and mandibular typodont arches must be in place for all treatment procedures.
- All candidates must stop working by their assigned Finish Time, which is three (3) hours after their start time.
- After all endodontic procedures have been completed, request a CFE to begin the check-out process for the Endodontic exam. Once checked out of the Endodontic exam, you cannot return to any endodontic procedure.

Acadental Tooth #8

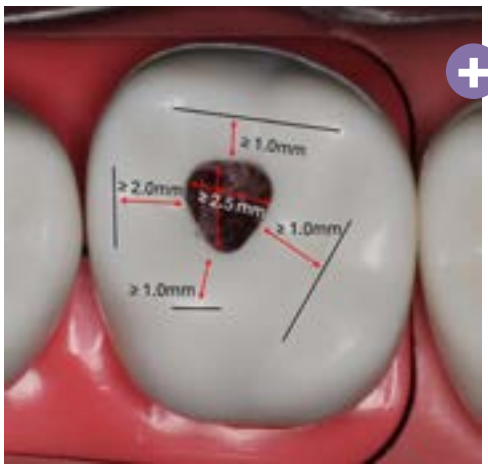
Additional treatment considerations:

The exam tooth is designed to be consistent with the pulpal anatomy of a 21-year-old patient. When ***shaping the canal***, the canal should be prepared to an appropriate file size. The size and shape of the anterior access opening should be consistent with the size and anatomy of the pulp chamber of a 21-year-old patient and allow for complete debridement of the pulp chamber.

When ***obturating the canal*** on tooth #8, this must be done with pink or colored gutta-percha since white or light-colored obturation material is difficult to distinguish from the sealer. Warm gutta-percha or carrier-based, thermo-plasticized gutta-percha techniques are acceptable but discouraged as they may cause damage to the plastic endodontic tooth.

Avoid placing **isolation dam clamps** on teeth treated during the exam.
Clamp only adjacent teeth, or use alternate methods (ligation), to secure isolation dam.

Landmarks used in Evaluating Endodontic Criteria



Buttons not functional on all platforms.

AMERICAN BOARD of DENTAL EXAMINERS

PERIODONTAL EXAM

You may choose to start the Periodontal Scaling Exam earlier than the scheduled start time. If you opt to start early, the CFE will record your assigned finish time for the periodontal scaling procedure on your ***Progress Form***, which will be one (1) hour from the time you start the Periodontal Scaling Exam.

- Candidate must check-in with Clinic Floor Examiner (CFE) for authorization of typodont mounting. Periodontal treatment may begin only after check-in is complete. Both maxillary and mandibular typodont arches must be in place for all treatment procedures.
- All candidates must stop working by their assigned Finish Time, which is one (1) hour after their assigned start time.
- After all periodontal treatment has been completed, request a CFE to begin the check-out process for the Periodontal Scaling exam.
- Once checked out of the Periodontal Scaling exam, the CFE will permit you to dismount the typodont.

Candidate performance is evaluated for calculus removal on 12 assigned surfaces and whether there is evidence of hard, and/or soft tissue trauma. Calculus remaining on four (4) or more of the assigned surfaces and/or a critical deficiency in tissue management will result in a 100-point penalty.

Refer to Periodontal Scaling Procedures Criteria Sheet for evaluation criteria.

EXAM DAY COMPLETION

Prosthodontic, Endodontic & Periodontal

1. Once dismounted, typodonts should be thoroughly cleaned and dried.
2. Candidate must be in line to turn in all required materials (listed below) no later than 15 minutes after scheduled exam end time.
3. CFE will check and collect all required materials at a central location in the clinic.
4. Candidate is required to present the following items at the check-out station:
   - Progress Forms
   - Any fabricated putty matrices, models, impressions, or reduction guides made during examination
   - Sheet of Candidate ID Labels
   - Typodont and typodont box containing:
     - Typodont articulator, and/or metal carry trays;
     - Maxillary arch segments, each labeled with Candidate ID QR Code;
     - Mandibular arch, labeled with Candidate ID Label;
     - Molded plastic carrier trays (2).
5. At check-out station, the CFE will complete the following:
   a. Separate arches, segments from articulator carrier trays.
   b. Secure mandibular arch, maxillary segments typodont in molded plastic trays to prevent damage during transport.
   c. Place mandibular perio arch, maxillary segments, ***Progress Forms,*** putty matrices (if applicable) in typodont box; seal box with Candidate ID Label.
6. Candidate cleans their assigned operatory/cubicle/workstation and exits clinic

CANDIDATE QR CODE LABEL

Place on each **maxillary** Prosthodontic and Endodontic arch segments

CANDIDATE ID LABEL

Place on **mandibular** Periodontal arch with ID Number displayed intra-orally

IMPORTANT REMINDER: Typodont Removal

Do not remove typodont arches from the simulated patient until instructed to do so by Clinic Floor Examiner (CFE).

Arch removal without Examiner approval after exam begins is grounds for exam termination.

EXAM ADMINISTRATION

Restorative

EXAMINATION TIMELINE

The examination timeline below is for ***example only***; actual schedules may vary by candidate procedure. Candidates are notified via email once their individual **examination schedule and Q&A Session** information are available in their Candidates.ADEXtesting.org profile approximately 2-3 weeks prior to the clinical exam.

Session	Two (2) Procedures (7 Hours)	Single (1) Procedure (3.5 Hours)
Candidate Check-In, Clinic Entrance, Workstation Setup	6:30 AM	6:30 AM
Exam Begins	8:00 AM	8:00 AM
Exam Ends	3:00 PM	11:30 AM

START TIME: Treatment may begin only after the Chief Examiner or Clinic Floor Examiner announces the start of examination.

BREAKS. Breaks are permitted at the discretion of the Candidate. After the exam begins, all procedures must be completed within allotted timeframe; time adjustments or extensions are not permitted for breaks. Plan accordingly.

FINISH TIME: Examiners are not responsible for stopping candidates at their assigned finish times. Failure to meet the examination timeline requirements for a procedure results in a violation of exam standards penalty and failure of the exam.

TWO-PROCEDURE TIMELINE

All procedures must be completed (restoration in place) within the allotted examination timeframe. First restorative procedure must be completed and returned from grading prior to beginning second restorative procedure.

Procedure Completed within 3.5-Hour Timeframe	Procedures Completed within 7-Hour Timeframe	Attempt Status
First restorative procedure incomplete	Both restorative procedures completed	Both procedures evaluated
First restorative procedure completed	Both restorative procedures completed	Both procedures evaluated
First restorative procedure completed	Second restorative procedure incomplete	First procedure evaluated; Automatic Fail of second procedure
First restorative procedure incomplete	Second restorative procedure incomplete	Automatic Fail of both procedures

EXAM CHECK-IN

Restorative

IDENTIFICATION REQUIREMENTS FOR ADMISSION

The following items are required for admission to the clinical examination:

- ***PHOTO IDENTIFICATION.*** A government or school issued photo ID. Acceptable forms of non-expired photo identification include such documents as current, valid driver license, passport, military ID, or official school ID.
- ***Recent Name Change.*** If your legal name has recently changed, bring a copy of the supporting name change document (e.g. marriage certificate, dissolution decree or court document) to the clinical examination.

Candidate ID Number, Badges & Labels

CANDIDATE ID NUMBER. Note that your Candidate ID Number will be used on all badges, labels and forms to maintain your anonymity during the examination; and in conjunction with your name on all post-exam results reports.

BADGES. Upon identity verification, candidates receive a sheet of candidate labels, including two (2) Candidate ID Badge labels. Photo badge label must be visible on your outmost garment throughout the examination.

LABELS. Place your Candidate ID Label on all examination forms and cubicle cards.

Exam Packet & Forms

Progress Forms are used to document and track your progress and communicate with examiners. Modification and Pulp Cap Forms are used to request proposed changes to a cavity preparation. ***Progress Forms, Modification Request Forms, and Pulp Cap Request Forms*** must be verified by a CFE before proceeding to next step of exam process.

Typodont & Teeth

Typodonts and CompeDont™ teeth are provided at Check-in. Evaluate typodont for acceptance. Indicate acceptance and approval on respective ***Progress Form.***

WRONG TOOTH. If a procedure is started on the wrong tooth or surface, stop working and immediately notify a CFE.

IMPORTANT REMINDER: Official Resources & References

Only the Candidate Manual, Candidate Guide, and Exam Criteria Sheets are permitted in the clinic area. A Candidate's personal, handwritten notes or renderings recorded on the pages of the manual are also permitted.

EXAM DAY SET-UP

Restorative

Clinic Entrance

1. 6:30 AM - Candidates may enter the clinic or simulation lab used for the examination
2. When instructed - Check-in to receive exam packet (Candidate ID Labels, exam forms) and typodont

Cubicle or Workstation

1. Identify cubicle/workstation
2. Setup instruments and materials
3. Place Candidate ID Label on all applicable forms and Typodont Box
    - Cubicle Cards (1 identifies workstation; 1 accompanies typodont to Evaluation Station)
    - Anterior Restorative Progress Form
    - Anterior Restorative Modification Request Form
    - Posterior Restorative Progress Form
    - Posterior Restorative Modification Request Form
4. Evaluate typodont and indicate approval on ***Progress Forms***

Procedure Check-In

Clinic Floor Examiners (CFE) monitor candidate progress and confirm that typodonts are properly mounted, and shrouds appropriately placed.

1. CFE distributes radiographic images for both anterior and posterior procedures.
2. Candidate diagnoses lesion in each image (one carious lesion present in each image).
3. Candidate records proposed restoration to treat each lesion on the corresponding ***Progress Form***.
4. CFE reviews your diagnosis/proposed treatment plan for each lesion.
    - Initial Misdiagnosis. If you misdiagnose a lesion, you are permitted a second attempt to diagnose it appropriately. If the second diagnosis is correct, you will be allowed to proceed.
    - Second Misdiagnosis. If you misdiagnose a second time, you will not be permitted to challenge that procedure during this exam session.
5. CFE approves typodont mounting and affixes Candidate ID Labels on both CompeDont™ arches.
6. Candidate indicates, and CFE records, procedure to challenge first.
7. Intraoral procedures may not begin until CFE announces start time (8:00 AM or as scheduled).

Refer to respective Criteria Sheet for evaluation criteria for each exam procedure.

IMPORTANT REMINDER: Time Management

Candidates are responsible for managing and monitoring their time appropriately to ensure timely arrival and procedure completion according to their assigned examination schedule or finish time to avoid penalty.

RESTORATIVE EXAM

Candidates must check-in with Clinic Floor Examiner (CFE) for approval of typodont/CompeDont™ mounting, lesion diagnosis, and paperwork. If approved, intraoral procedures may begin only after the scheduled examination start time (8:00 AM).

The following items are required each time a procedure is submitted for evaluation:

- Cubicle card
- Progress Form
- Modification and/or Pulp Cap Request Form(s) (if applicable to procedure)

If attempting both Anterior and Posterior procedures, the second restorative preparation may not be started until the first restorative procedure has been graded (i.e. after the completed restoration has been evaluated and the typodont has been returned to the candidate). Both maxillary and mandibular arches must be in place for all treatment procedures.

Cavity Preparation. Contact CFE immediately to submit a modification request, or if a pulpal exposure occurs during the cavity preparation process (see Modification Request and Pulpal Exposure procedures).

Cavity Preparation Completed:

1. Check-in with a CFE when you have completed the cavity preparation.
2. CompeDont™ will be transported to the Evaluation Station for evaluation of the prepared cavity.
3. All required paperwork and materials must accompany the CompeDont™ arches.
    - Note that the CompeDont™ may be in the Evaluation Station for an average of 30 minutes for each visit. Plan accordingly.
    - When your typodont returns from the Evaluation Station, the CFE will review the findings and provide instruction as appropriate.

Communication from Grading Examiners. When applicable, the CompeDont™ arch returns from the Evaluation Station along with instructions to the Candidate. Before proceeding to the next step of treatment, the candidate must review the instructions to Candidate with a CFE.

Restorative Exam Guidelines

- **BITE BLOCKS, WEDGES, SECTIONAL MATRICES,** etc, may be used during treatment, but must be removed before sending the CompeDont™ to the Evaluation Station.
- **ISOLATION DAM**: An isolation dam (e.g. rubber dam) is required for all procedures
    - Isolation dam must be placed before starting the preparation and used until the restoration is completed
    - Isolation dam must be in place whenever the preparation is sent to the Evaluation Station.
    - At least one tooth on either side of the prepared tooth must be included under the isolation dam unless it is the most posterior tooth.
    - Isolation dam must be intact and provide an unobstructed view of the entire cavity preparation.
    - Candidate must replace isolation dam before rendering any further treatment if dislodged in transit to/from the Evaluation Station.
    - Isolation dam may be removed when the candidate is ready to check and adjust the occlusion of the restoration.
    - Isolation dam must be removed for evaluation of the finished restoration.

Modification Requests

Modification requests are intended to provide a process whereby a candidate can inform the examiners of justified preparation modifications as determined by the candidate in demonstration of their clinical judgment and diagnostic skill. The criteria established by ADEX for the evaluation of cavity preparations in the restorative exam are based on the candidate's preparation of an acceptable cavity design.

If a candidate determines that extension of the cavity preparation beyond the acceptable range is necessary for the complete removal of caries, the candidate should first prepare the cavity to within the acceptable range as defined by criteria measurements, and then submit a modification request to the Evaluation Station BEFORE extending the cavity preparation beyond the maximum limit of the acceptable range in any dimension. (Caries, as defined by ADEX for the Restorative Examinations, is penetrable with a sharp explorer using light pressure, exhibiting "tug-back.")

The candidate must take the preparation to within the acceptable range in all dimensions before submission of a modification request. In addition, the specific wall and/or surface requested to be modified must be taken to the maximum limit of the acceptable range as defined in the criteria. If the preparation does not meet these specifications at the time a modification request is submitted to the Evaluation Station, the modification request will be denied, and a penalty will be applied.

The ***Modification Request Form*** utilized to communicate with the Evaluation Station must be completed in its entirety. The candidate will attest that the preparation is to acceptable dimensions as described above by writing their Candidate ID Number in the appropriate box on the ***Modification Request Form***. Incomplete forms will be returned to the candidate for completion.

The modification request must be specific and denote the following:

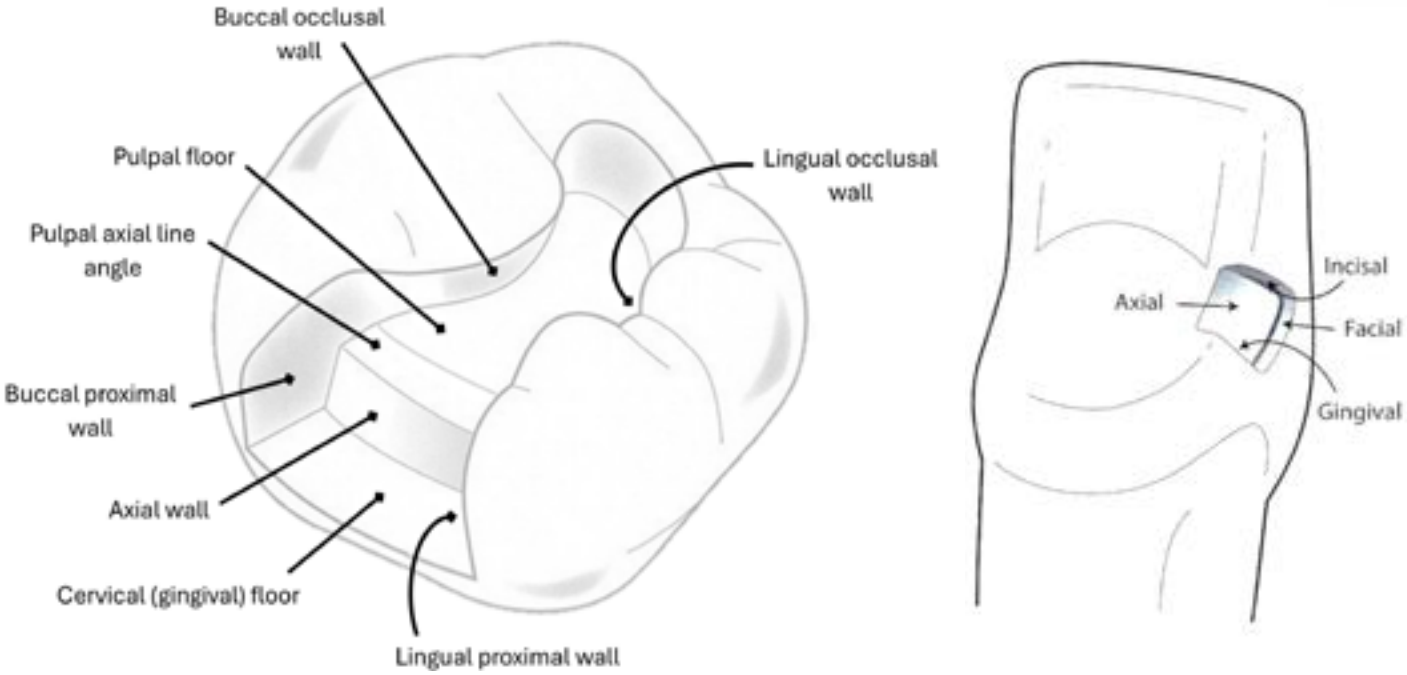
1. "What" modification will be made to the preparation (e.g. extend or deepen the preparation)
2. "Where" the modification of the preparation from ideal will occur (i.e. which specific wall/surface)
3. "Why" the modification beyond acceptable limits is required (e.g. caries)
4. "How Much" modification beyond acceptable limits will occur (e.g. 0.5 — 1.0 mm)

NOTE: Requests containing any cross-outs or strikethroughs will be denied. If an error or adjustment to the recorded information is necessary, candidates must strike through the entire modification request section and re-write the correct request in its entirety in a separate section on the ***Modification Request Form***.

Lack of clinical judgment or skill. Should a typodont be presented for a modification request and the candidate's performance or the nature of the modification request demonstrates a critical lack of clinical judgment or skill, and/or demonstrates a disregard for patient welfare, a penalty will be applied that will result in a loss of all points and failure of that procedure.

Unjustified modification requests will result in a penalty points deduction. Four (4) unique modification request denials will result in a review by the Exam Chief for possible application of the 100-point penalty for a critical lack of clinical judgment. Candidates are not informed of any applicable penalties during the exam.

Terminology to be used when requesting a Modification:



Denial of Modification Requests

A request for modification may be denied based on any one of the parts of the request. For example, if a request to "extend the box to the lingual 2 mm to remove caries" is denied, the candidate should not assume that the request was denied because there are no caries. The denial may be because the request to remove 2 mm is excessive.

Denied requests for modification will result in a point deduction for each request. In addition, more significant penalties will be applied for specific errors related to modification requests which are listed elsewhere in this manual.

If a candidate extends a preparation beyond the dimensions requested and approved, the completed preparation will be evaluated as over-extended.

A Note About Unsupported Enamel

In most cases, the presence of unsupported enamel is either representative of candidate error or the removal of the unsupported enamel does not require a modification request.

When a candidate has approval to extend a certain wall to a specified extent (either within acceptable dimensions or through a modification request), the approved extent includes the cavosurface margin of that specific wall, if applicable.

Modification requests to remove unsupported enamel will be denied in the following cases:

- ***Not yet to extent.*** If removing the undermined enamel *would not extend* the preparation beyond acceptable (or approved) limits, it may be removed to the same extent as the dentin of the associated wall without submitting a modification request.
- ***Over-extended.*** The associated wall has already been over-extended due to candidate error if the margin is undermined and removing it *would extend* the outline of the preparation beyond the acceptable limits.

INDIRECT Pulp Cap Request

A candidate should be able to recognize, during caries excavation, those instances in which a potential for exposure exists. If the removal of remaining caries will result in pulp exposure, the candidate may request treating the tooth with an indirect pulp cap. The procedure is as follows:

- Before submitting a request for an indirect pulp cap, at least one modification request to remove caries must have been granted and completed by the candidate. To request treatment of the tooth by an indirect pulp cap, the candidate must have removed all caries other than that directly over the pulp, and there must be no need for further preparation/modification. The candidate must also be able to determine that there is only approximately 0.5 mm of tooth structure beneath remaining caries before the exposure may occur.
- All caries, except in the area of possible pulp exposure, must be removed.
- On the ***Indirect Pulp Cap Request Form*** indicate:
  - "What" – Describe technique and materials to be used
  - "Where" – Indicate location accurately
  - "Why" – e.g., Exposure will occur by removing remaining caries

No other modification request should be included with this request. The request will be granted or denied by examiners at the Express Chair. The following are the next steps:

1. If the request is granted, the candidate will proceed with placement of the indirect pulp cap under the supervision of the CFE. Unsatisfactory placement of the indirect pulp cap, as determined by the CFE, will be evaluated at the Express Chair in the evaluation area.

   If the request is granted, no further treatment of the tooth preparation is allowed after the placement of the indirect pulp cap. After approval of the indirect pulp cap placement, the CompeDont™ typodont is sent to the Evaluation Station for final evaluation of the preparation.

2. If the request is not granted, a penalty will be assessed, and the preparation will be sent directly for preparation evaluation.

Refer to Indirect Pulp Cap Flow Chart PDF for a visual representation of this process.

DIRECT Pulp Cap Request

In case of exposure of the dental pulp during cavity preparation, complete the following steps:

1. Immediately inform the CFE who will provide the ***Direct Pulp Cap Request Form***. Once you have filled out the form, the CFE will review your notations.
2. The CompeDont™ must be sent to the Express Chair with an isolation dam in place, with all the proper paperwork. At the Express Chair, examiners will evaluate the following:
    - The pulp exposure was appropriately recognized by the candidate, justified by the clinical findings, and judged to be treatable with a direct pulp cap.
    - An isolation dam was in place when the exposure occurred.
    - A previous Modification Request Form indicates that the candidate had the approval to extend the preparation.
    - The candidate did not exceed the dimensional limits of the approved modification request(s).
    - Damage to the pulp is slight and does not preclude the possibility of successful pulp capping.
    - The candidate's proposed treatment is appropriate.

If the above statements are true: a pulp cap must be placed by the candidate and examined and approved by a CFE before sending the CompeDont™ to the Evaluation Station for evaluation of the preparation.

Inappropriate Direct Pulp Cap Request

If examiners in the Evaluation Station find no evidence of a pulp exposure when evaluating a request for a Direct Pulp Cap, a penalty will be assessed for demonstration of a critical lack of clinical judgment and diagnostic skill, which will result in a loss of all points and failure of that procedure.

Unrecognized Exposure

If examiners in the Evaluation Station find a pulp exposure that was not identified by the candidate, either when evaluating a modification request or when evaluating a completed preparation, a penalty will be assessed for demonstration of a critical lack of clinical judgment and diagnostic skill, which will result in a loss of all points and failure of that procedure.

EXAM DAY COMPLETION

Restorative

Restoration Placement

After the preparation has been evaluated and the CompeDont™ is returned to the candidate, the Candidate must be authorized by the CFE to proceed with placement of the Restoration. An isolation dam must be in place during the placement of restorative materials.

Restoration Evaluation

Once the restoration is completed to candidate satisfaction, contact the CFE. The CompeDont™ will be sent with all required paperwork to the Evaluation Station for evaluation of the completed restoration.

Once grading is complete, the CompeDont™ is returned to the candidate. The candidate must check-in with the CFE before starting the next assigned procedure.

Note the following:

- Class II amalgam restoration must be sufficiently set to allow a check of the occlusion.
- Composite restorations must be presented without surface glaze or sealer on the restoration.

Check-out Procedures

After completing the final restorative procedure, consolidate all required paperwork and materials into the provided white envelope before proceeding to the designated check-out station to complete the check-out process.

Candidates are required to present the following items at the check-out station:

- Completed Progress Form(s) and all paperwork received during the exam
- Modification Request Forms
- Radiographs
- Cubicle Cards
- Unused Candidate ID Labels/QR Codes
- Properly labeled CompeDont™ arches in typodont box
- Typodont articulator, and/or metal carry trays

IMPORTANT REMINDER: Typodont Removal

Do not remove typodont arches from the simulated patient until instructed to do so by Clinic Floor Examiner (CFE).

Arch removal without Examiner approval after exam begins is grounds for exam termination.

EXAMINATION PENALTIES

Penalty	POINT DEDUCTION
Failure to complete an assigned examination procedure	100
Violation of examination standards, rules or guidelines, or time schedule	100
Treatment of teeth other than those approved or assigned by examiners	100
Gross damage to adjacent tooth structure—teeth or tissue	100
Unrecognized exposure	100
Inappropriately managed pulpal exposure (mechanical or pathologic)	100
Unjustified mechanical exposure	100
Failure to complete treatment within the stated guidelines of the examination	100
Critical lack of clinical judgment/diagnostic skills	100
Unprofessional attitude, rude, inconsiderate/uncooperative with examiners or other personnel	100
Request to remove caries or decalcification without clinical justification	21
Pulp cap is inappropriately placed	16
Inappropriate request for indirect pulp cap	16
Poor simulated patient management	11
Initial preparation is not to at least acceptable dimensions	11
Repeated requests to modify/extend approved treatment plans without clinical justification	11
Unsatisfactory completion of modifications required by the examiner	11
Any denied modification request	1
Appearance: unprofessional, unkempt, unclean	1
Violation of universal precautions	1
Improper/incomplete recordkeeping	1
Inadequate isolation	1
Improper operator and/or simulated patient position	1

Refer to the Candidate Guide for additional conduct and examination guidelines resulting in penalties or automatic failure of the examination and/or examination series (e.g. use of prohibited electronic devices, etc.).

EXAM FORMS & CRITERIA SHEETS

Criteria Sheets and sample examination forms are downloadable for candidate reference. Official printed examination forms are provided at exam site during Check-In.

PROSTHODONTIC EXAM

Criteria Sheets:

- Ceramic Crown Prep Criteria
- PFM Crown Prep Criteria
- Cast Metal Prep Criteria

Examination Forms:

- Prosthodontic Progress Form

Supplemental Information:

- Guide for Fabrication of Putty Matrices

ENDODONTIC EXAM

Criteria Sheets:

- Anterior Endo Procedure Criteria
- Posterior Endo Procedure Criteria

Examination Forms:

- Endodontic Progress Form

PERIODONTAL EXAM

Criteria Sheets:

- Periodontal Scaling Procedure Criteria

Examination Forms:

- Periodontal Progress Form

RESTORATIVE EXAM

Criteria Sheets:

- Anterior Composite Prep Criteria
- Anterior Composite Restoration Criteria
- Posterior Amalgam Prep Criteria
- Posterior Amalgam Restoration Criteria
- Posterior Composite Prep Criteria
- Posterior Composite Restoration Criteria

Examination Forms:

- Anterior Progress Form
- Anterior Modification Request Form
- Posterior Progress Form
- Posterior Modification Request Form
- Direct Pulp Cap Request Form
- Indirect Pulp Cap Request Form

Supplemental Information:

- Flow Chart of Indirect Pulp Cap Request
- Guide to Fabrication of Putty Matrices

Visit ADEXtesting.org to download full-size sample examination forms