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DENTAL HYGIENE CANDIDATE INFORMATION
MISSISSIPPI ANNUAL LICENSURE EXAMINATION
MAY 27, 1998

INTRODUCTION

1. Please read carefully the following instructions and requirements. Most of the candidate's questions concerning the application and examination process should be answered in these instructions. However, if the candidate has further questions, please contact the Board office at 601-944-9622. The candidate must bring these instructions to the examination and retain them in his/her possession at all times. No additional copies of these instructions will be available.
 2. The jurisprudence examination, orientation, and clinical examination will be given Wednesday, May 27, 1998, at the University of Mississippi Medical Center School of Dentistry located on the campus of the University Medical Center, 2500 North State Street, Jackson, Mississippi. Candidates will report to Room D-113 of the University of Mississippi Medical Center School of Dentistry on Wednesday, May 27, 1998, First Floor, promptly at 7:15 a.m. for registration, jurisprudence, and orientation.
 3. The Mississippi State Board of Dental Examiners grants licenses to practice dental hygiene by two methods: (a) examination; and (b) licensure by credentials, and meeting the criteria thereof. Mississippi does not engage in reciprocity agreements with other states, and no temporary licenses or permits are issued or special examinations given.
 4. The Mississippi State Board of Dental Examiners reserves the right to modify these instructions and requirements before and during the examination of the candidates.
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STANDARDS OF CONDUCT FOR DENTAL HYGIENE CANDIDATES

1. The Mississippi State Board of Dental Examiners administers this examination following the highest ethical and moral standards of the professions of dentistry and dental hygiene. Each candidate will be expected to conduct himself/herself in a professional manner.
2. Throughout the course of the examination, the candidate shall be responsible for the following:
 - a. Maintaining a professional appearance at all times
 - b. Demonstrating proper patient management

- c. Showing the patient proper consideration and treatment
- d. Exhibiting consideration for test site personnel, examiners, and other candidates
- e. Maintaining proper aseptic techniques
- f. Protecting and showing concern for tooth structure and supporting tissue during patient treatment
- g. Successfully following all rules of this examination process
- h. Not bringing into this examination area any previously recorded dental or dental hygiene clinical data

APPLICATION REQUIREMENTS

1. A candidate for examination for dental hygiene licensure shall be a citizen of the United States, except as otherwise provided in Miss. Code Ann. § 73-9-23; be of good moral character; have a high school education; and have attained the age of eighteen (18) years. A candidate must also exhibit a diploma or certificate of graduation from a dental hygiene program accredited by the Commission on Accreditation of Dental and Dental Auxiliary Educational Programs of the American Dental Association, except as otherwise provided in Miss. Code Ann. § 73-9-23.
2. A completed application should be returned to the Secretary of the Board by **CERTIFIED MAIL WITH RETURN RECEIPT REQUESTED**. The application, fees, and all required supporting documentation must be received in the Board's office at least thirty (30) days prior to the announced date of the examination, or Monday, April 27, 1998. The Board's correct mailing address is:

Mississippi State Board of Dental Examiners
Suite 100
600 East Amite Street
Jackson, Mississippi 39201-2801

Attention: Licensure Examination Coordinator

3. Board fees and usage fees must be paid in two (2) separate amounts by certified check or money order. **PERSONAL CHECKS ARE NOT ACCEPTABLE AND WILL BE RETURNED WITH THE APPLICATION TO THE CANDIDATE**. Examination fees are returned to the candidate only if the candidate's application is not accepted by the Board. In the event of illness or an emergency, fees will be applied to the next scheduled Mississippi examination for licensure, provided the Board office is notified within twenty-four (24) hours

- prior to the examination. However, candidates who fail to appear for the examination forfeit the entire examination fee.
4. Candidates who are unsuccessful on the examination may apply for a future examination and will be considered as new candidates. However, candidates will be allowed to take the licensure examination only twice, and candidates who fail the second time must successfully complete six (6) months of clinical training in an accredited dental hygiene school before being allowed to take the examination for the third, and final, time.
 5. Any candidate with a mental or physical condition which would require a reasonable deviation from the normal administration of the examination should submit a written statement from a qualified physician at the time of application in which the condition is clearly stated. A decision regarding the candidate's suitability for examination will be made based on the physician's statement, completion of application requirements, and the University of Mississippi Medical Center School of Dentistry's capabilities to accommodate the mental or physical condition of the candidate.
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APPLICATION COMPLETION

1. **TYPED** application form filled out completely, properly signed, and notarized. An unmounted black and white or color bust photograph not less than 2½" x 2½" of the candidate taken not more than six (6) months prior to the date of application must be attached to the candidate's application.
2. Certified check or money order in the amount of One Hundred Fifty and No/100 Dollars (\$150.00) made payable to the Mississippi State Board of Dental Examiners to be mailed with the application. This amount is the candidate's Board application fee.
3. Certified check or money order in the amount of Seventy-Five and No/100 Dollars (\$75.00) made payable to the University of Mississippi Medical Center School of Dentistry to be mailed with the application. This amount covers the candidate's clinic fees such as disposable materials, radiographic film, and materials listed in the "University of Mississippi Medical Center School of Dentistry Information for Candidates for Dental Hygiene Licensure" (see blue instructional material).
4. Notarized signatures of two (2) reputable citizens of the state in which the candidate is a resident (see application form, Item #16, for further information).
5. Self-Query from National Practitioner Data Bank. Candidates who have graduated from an accredited dental hygiene school prior to January 1, 1998 must make a self-query from the National Practitioners Data Bank. This can be done by contacting the Data Bank at Post Office Box 10832, Chantilly, Virginia, 20151. The Data Bank's telephone number is 800-767-6732, and the facsimile number is 703-802-4109. The Data Bank provides the candidate

with a form even though no reports have been filed. The **ORIGINAL** of this form must be submitted with the candidate's application.

6. Copy of National Board Dental Hygiene Examination Grade Card. Please contact the Joint Commission on National Dental Examinations, telephone number 800-621-8099, to request a copy of the grade card to be mailed to the Board's office. It is the Board's policy not to release National Board grades under any circumstances; therefore, please do not contact the Board office for scores. Candidates will be required to have passed all parts of the National Board Dental Hygiene Examination prior to issuance of a Mississippi license. Candidates may take the Mississippi licensure examination without having passed the National Board, but candidates will not be issued Mississippi licenses until a copy of the National Board Dental Hygiene Examination passing score has been received by the Mississippi State Board of Dental Examiner's office. (For this purpose, passing scores on the Mississippi State Board examination are valid through December 31, 1998.)
7. Copies of official transcripts from each college and dental hygiene school attended. These transcripts must be mailed directly to the Board office by the schools. Transcripts will not be accepted from the candidate. All transcripts must be received at the Board office by the deadline, Monday, April 27, 1998. Final dental hygiene school transcripts must show the degree awarded. Even though the candidate's dental hygiene school transcript is not complete, any partial dental hygiene school transcripts must also be received by Monday, April 27, 1998 so that the application can be processed.
8. Affidavit signed by the dental hygiene school dean (see enclosed memorandum and Affidavit). Candidates who are still in dental hygiene school at the time their application is submitted must have this form completed and returned with the application. If the candidate has not graduated prior to the examination, a final official transcript noting the date of graduation must be sent by the dental hygiene school dean to the Board office prior to issuance of a Mississippi license. For those candidates whose dean has certified expected graduation, a passing score on this examination is valid until August 31, 1998.
9. Certified statement verifying license status and good standing from the Secretary of the Board of Dental Examiners in each state in which candidate is currently or has previously been licensed. In states where the candidate previously has been licensed, the Secretary of the Board must notify the Board as to the reason for license expiration or revocation.
10. Proof of having liability insurance coverage while the clinical examination is in progress. An insurance application form is enclosed for the candidate's convenience; however, the candidate may use any insurance company of his/her choice. If the candidate is currently in practice and has malpractice insurance, his/her insurance company must submit a certificate of insurance stating that the candidate is covered for the Mississippi dental hygiene licensure examination and will be current through May 29, 1998. Please make certain the effective dates are listed on the certificate of insurance. A photocopy of an office malpractice insurance policy is not acceptable. This must be submitted with the candidate's application.

11. Proof of having completed the Cardiopulmonary Resuscitation Course (adult, one man), which must be current at the time of the examination. This must be submitted with the candidate's application.
12. Formal declaration of intent to become a citizen of the United States. Any candidate who is not an United States citizen at the time his/her application is mailed to the Board office must include in his/her application packet a formal declaration of intent to become an United States citizen, pursuant to Miss. Code Ann. § 73-9-23.

PREPARING FOR THE EXAMINATION

1. **Securing Patients**

Candidates must furnish their own patients and must be responsible for their appearance on schedule. The Mississippi State Board of Dental Examiners is not responsible for procuring patients for this examination.

2. **Instruments**

Candidates must furnish their own sterile instruments. The use of ultrasonic scalers is permitted; however, it is the candidate's responsibility to provide the equipment of choice and to ensure compatibility with University of Mississippi Medical Center School of Dentistry equipment.

3. **Supplies**

Candidates for licensure are required to wear scrub gowns, gloves, masks, and protective eyewear. Gloves, masks, and face shields will be supplied. Candidates must provide their own scrub gowns. It is suggested that patients also wear protective eyewear during the clinical procedure.

4. **Candidate Identity**

No name tags or monograms denoting the identity of the candidate or the dental hygiene school attended may be worn. Each candidate will be assigned a candidate number during registration. This number must be worn by the candidate on his/her right lapel and also will be displayed on the assigned operatory.

PATIENT SELECTION AND GRADING SYSTEM

1. **Patient Selection**

PATIENT SELECTION IS PROBABLY THE SINGLE MOST IMPORTANT FACTOR IN PREPARING FOR THIS EXAMINATION. SINCE MARGINAL PATIENTS MAY BE REJECTED, IT IS ADVISABLE TO BRING A BACKUP PATIENT. Sharing of backup patients among candidates is recommended. Unacceptable patients will be dismissed, and another patient must be provided if the candidate is to continue the examination. (See item number 2 in this section for procedures in the event a patient is rejected.) The patient's acceptability will be evaluated on the basis of health condition, dentition, radiographs, dental charting, and patient classification. Refer to Sections 1.a. through 1.e. for these requirements.

a. **Health Condition**

The patient's health must be acceptable for prophylactic treatment. If conditions indicate an alteration in treatment procedures or a need to consult the patient's physician, the candidate must obtain the necessary written clearance from the patient's physician before the patient is accepted. There should be no soft tissue lesions which would contraindicate dental hygiene instrumentation.

b. **Dentition**

The patient must have a minimum of eighteen (18) natural teeth with at least ten (10) posterior teeth. One or more of the following is recommended, but not required:

- (1) Restorations
- (2) Fixed Prosthesis
- (3) Missing Teeth
- (4) Defective Restorations
- (5) Caries

c. **Radiographs**

The patient must have a full mouth series of radiographs (FMX) exposed within the past three (3) years and two (2) to four (4) bitewing radiographs taken within thirty (30) days prior to the clinical examination, if the FMX has not been exposed within thirty (30) days. Panoramic radiographs are **NOT** acceptable. All radiographs (FMX and bitewing radiographs) must be mounted and brought for use on the day of the clinical examination. Radiographs taken prior to the Mississippi examination will not be graded. Radiographs must be properly mounted by the candidate in the accepted American Dental Association (ADA) method -- raised portion of dimple toward examiner. If the patient needs the FMX for further dental treatment, make sure there is a duplicate set. Pre-operative and post-operative radiographs will be returned to the patient **ONLY IF** the candidate provides a self-addressed, stamped envelope for the patient; otherwise, all unclaimed radiographs will be destroyed. These

radiographs will be mailed forty-five (45) days after conclusion of the examination to the patients of those candidates who have successfully completed the examination. (See item 2 on page 12 for requirements concerning return of radiographs to the patients.) Candidates must not request the return of any radiographs following the conclusion of the examination.

d. **Dental Charting**

Required dental charting will include a periodontal probe assignment and identifying/charting restorations, defects, missing teeth, caries, fixed prosthesis, etc. The dental chart utilized by the Board has a buccal, occlusal, mesial, distal, and lingual view of all teeth, a recession index, and a periodontal probe depth charting area. All teeth will be numbered 1 through 32 starting with the upper right third molar and ending with the lower right third molar. See the sample of acceptable symbols to use for charting purposes on page 25.

e. **Patient Classification**

THERE MUST BE CLINICAL AND RADIOGRAPHIC EVIDENCE OF SUBGINGIVAL CALCULUS. Patients with generalized pocket depths greater than six (6) millimeters (mm) will be **UNACCEPTABLE**.

- (1) Light -- Unacceptable: Moderate subgingival calculus not present on molars, bicuspid, or anteriors in two (2) quadrants -- too light for testing
- (2) Light: Isolated areas of calculus (spicules or small ledges of subgingival adequate for testing) and the presence of moderate stain
- (3) Moderate: General small interproximal ledges of moderately tenacious subgingival calculus
- (4) Heavy: Generalized subgingival deposits which may continue through the interproximal and line angles; may also be tenacious sheets
- (5) Heavy -- Unacceptable: Calculus too heavy and tenacious; tissue condition is prohibitive

2. **Patient Rejection**

The following will occur in the event a patient is rejected:

- a. The patient will be informed, and a pink rejection slip will be placed in the candidate's operatory.

- b. Immediately after the candidate is allowed to return to the clinic, the candidate must do the following:
 - (1) Secure another patient
 - (2) Complete a new Medical Health History Form which may be obtained from Board staff
 - (3) Complete a new Patient Disclaimer, Consent, and Release Form which may be obtained from Board staff
 - (4) Contact the clinical floor examiner for a new starting check
- c. After the clinical floor examiner has issued a new starting check, the patient must be escorted by the candidate to the grading clinic for a new prophylaxis and periodontal charting assignment. A new starting time will be assigned to the candidate.
- d. The candidate should wait for the patient in the grading clinic waiting room. If the patient is accepted, the candidate will immediately return to his/her assigned operatory and begin the clinical examination.

3. **Grading System**

The licensure examination is given to protect anonymity, and the Board has adopted a double-blind grading system. One examiner is assigned to each clinic as a clinical floor examiner. This clinical floor examiner will do the following:

- a. Check the patient's Medical Health History Form
- b. Check the Patient Disclaimer, Consent, and Release Form
- c. Review the candidate's patient education and general charting
- d. Ensure the candidate maintains the appropriate standards of conduct
- e. Inspect the periodontal charting assignment
- f. Be available for emergency situations

Three (3) grading examiners grade the prophylactic assignment in a grading clinic which will be entirely separate from the candidate clinics. Refer to section 3, "Grading Procedure," on page 17, for items the candidate must take to the grading clinic at the time he/she escorts the patient to the grading clinic for grading. The patient will be returned to the appropriate clinic by staff of the University of Mississippi Medical Center School of Dentistry. Under no circumstances will candidates be allowed in the grading clinic. Further details and directions will be given at the orientation session.

A pass or fail grade counting as ten percent (10%) of the candidate's overall grade will be given for the following:

- a. Charting
 - b. Patient education
 - c. Patient management
 - d. Post-operative bitewing radiographs
 - e. Maintaining standards of conduct

Zero (0) grades will be given for the following:

- a. Patient mismanagement or deceit
 - b. Presenting patient not meeting requirements
 - c. Patient education (incomplete or none given)
 - d. General and periodontal charting (gross irregularities)
 - e. Serious violations of standards of conduct

The patient will be rated according to the amount of calculus/stain evident. The rating consists of light, moderate, or heavy, and points will be deducted for the following:

- a. Tissue trauma/tears
 - b. Stain
 - c. Residual calculus

A successful candidate must obtain a grade of seventy-five percent (75%) or above as an overall average, and the grading percentages are as follows:

- a. **90% OF THE TOTAL GRADE:** Prophylaxis
- b. **10% OF THE TOTAL GRADE:** Charting, patient education, patient management, post-operative bitewing radiographs, and maintaining standards of conduct

COMPLETING THE EXAMINATION

Registration

MAY 27, 1998
DENTAL HYGIENE LICENSURE EXAMINATION

7:15 a.m. to 7:30 a.m.	REGISTRATION First Floor Room D-113
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1. **Time, Date, and Location for Registration**

Registration for all dental hygiene licensure candidates will be conducted from 7:15 a.m. until 7:30 a.m. on Wednesday, May 27, 1998, in Room D-113 of the University of Mississippi Medical Center School of Dentistry. All candidates are strongly advised to arrive at the University of Mississippi Medical Center School of Dentistry no later than 7:00 a.m. Candidates may wait in the first floor lounge until registration begins, and patients may wait in the first floor lounge until the candidate is ready to take the patient to the fourth floor clinic. No patients or candidates will be permitted in the clinics prior to 8:00 a.m.

2. **Administrative Procedures**

Upon the candidate's arrival in Room D-113, the candidate should check-in with Board staff who will be located at the front of the room. The candidate must present one form of picture identification at the time of registration; afterwards, the candidate will be given a yellow registration packet containing the following materials:

- a. 1998 Dental Hygiene Licensure Candidate Address and License Information Form (white paper)
- b. Survey Questions for the 1998 Mississippi Dental Hygiene Licensure Examination (buff paper)
- c. Answer sheets (two) for the jurisprudence examination and Board survey
- d. Candidate badge
- e. Patient badge
- f. Sharpened pencil

The candidate should carefully check his/her packet to ensure that all above-listed items have been included in the packet and that the number on the candidate badge corresponds to the number on the outside of the yellow candidate packet. This packet must remain with the candidate during the entire examination. The candidate must return the yellow candidate packet, candidate badge, patient badge, survey questions, and completed answer sheet for the survey to Board personnel in the candidate's clinic at the conclusion of the examination on Wednesday, May 27, 1998. These items are the property of the Board, and any candidate who does not properly return all items may have his/her license withheld until such time as all items have been returned to the Board.

Once the candidate receives his/her registration materials, the candidate should be seated and prepare for the jurisprudence examination which will be administered immediately upon conclusion of registration. Once seated, the candidate should remove only the answer sheet for the jurisprudence examination and the pencil; all other items should remain in the yellow candidate packet.

Jurisprudence Examination

MAY 27, 1998	
DENTAL HYGIENE LICENSURE EXAMINATION	
7:30 a.m. to 8:00 a.m.	JURISPRUDENCE EXAMINATION First Floor Room D-113

1. **Time, Date, and Location for the Jurisprudence Examination**

All candidates are required to successfully complete a written examination based on the Mississippi Dental Practice Act and the regulations of the Board. This examination will be conducted from 7:30 a.m. until 8:00 a.m. on Wednesday, May 27, 1998, in Room D-113 of the University of Mississippi Medical Center School of Dentistry.

2. **Administrative Procedures**

Candidates should be prepared to begin the examination promptly at 7:30 a.m., with only the answer sheet for the jurisprudence examination and the Board-provided pencil on the desks. All other materials should be carefully placed under the desks. Once all materials are properly placed, Board personnel will distribute the jurisprudence examinations. No handwritten marks should be made on the jurisprudence examination; only the answer sheet should be used to denote the candidate's numerical identity and examination responses.

The candidate should write his/her **CANDIDATE NUMBER** in the top right-hand box labeled "Identification Number," preceded by a series of the numeral "1." Candidates whose numbers range from 1DH through 9DH, should put 7 "1s", then put a zero ("0"), and then put the actual candidate number (e.g., 11111108). Candidates whose candidate numbers range from 10DH and above should put 7 "1s" and then put the actual candidate number (e.g., 11111121). The candidate should then darken the appropriate circles below the numbers he/she has just written. No names must be written on this answer sheet; the "Identification Number" box is the only box to be completed at the top of the answer sheet.

The jurisprudence examination consists of fifty (50) true or false questions concerning the Mississippi Dental Practice Act and regulations adopted by the Board, copies of which have

been included in the candidate's examination manual. Candidates are strongly urged to carefully study these materials to ensure that a passing score is obtained.

A minimum passing score of seventy-five percent (75%) must be obtained to be successful on the jurisprudence examination. Candidates who are unsuccessful on the jurisprudence examination will not be allowed to proceed with the clinical portion beginning Wednesday, May 27, 1998 at 9:00 a.m.

Once the candidate has finished the jurisprudence examination, he/she should very quietly turn over his/her completed answer sheet and jurisprudence examination and wait until all other candidates have finished the examination. Once the jurisprudence examination has been concluded, Board staff will retrieve all completed answer sheets, jurisprudence examinations, and Board-provided pencils.

Orientation

MAY 27, 1998	
DENTAL HYGIENE LICENSURE EXAMINATION	
8:00 a.m. to 8:45 a.m.	ORIENTATION First Floor Room D-113

1. **Time, Date, and Location for Orientation**

Orientation will begin immediately following the jurisprudence examination and will be conducted from 8:00 a.m. until 8:45 a.m. on Wednesday, May 27, 1998, in Room D-113 of the University of Mississippi Medical Center School of Dentistry.

2. **Administrative Procedures**

All candidates will complete the 1998 Dental Hygiene Licensure Candidate Address and License Information Form included in the yellow candidate packet. Candidates should very carefully consider all information, as this information will be used in preparing licenses for those candidates who successfully complete the licensure examination. The candidate number must be placed in the upper right-hand corner, and all licensure information must be legibly printed in each appropriate blank on the form. Board personnel will collect the completed forms and review them for readability and completeness. The candidate is responsible for supplying the correct information on the form, and he/she will be held responsible for any incorrect information appearing on his/her license as a result of incorrectly submitted information. An additional fee will be charged to the candidate for preparation of a replacement license as a result of incorrect information supplied by the candidate.

While the candidates are completing the 1998 Dental Hygiene Licensure Candidate Address and License Information Forms, only 9" x 12" self-addressed, stamped envelopes will be collected for the return of pre-operative and post-operative radiographs to the patients forty-five (45) days after conclusion of the examination. The envelopes must have a minimum postage of \$.64, and no other size envelopes or less postage will be accepted.

After the envelopes for return of radiographs have been collected and upon completion of the 1998 Dental Hygiene Licensure Candidate Address and License Information Form by all candidates, the Board's Dental Hygiene member and Executive Director will make brief presentations. Subsequently, a short question and answer session will be conducted. Upon conclusion of orientation, candidates are to immediately report to the clinics on the fourth floor for operatory setup and starting checks.

Operatory Setup

MAY 27, 1998	
DENTAL HYGIENE LICENSURE EXAMINATION	
8:45 a.m. to 9:00 a.m.	OPERATORY SETUP Fourth Floor Clinics

1. Arrival in Operatory

Operatory Setup will take place on Wednesday, May 27, 1998 from 8:45 a.m. to 9:00 a.m. in the fourth floor clinics of the University of Mississippi Medical Center School of Dentistry. Immediately upon conclusion of orientation, the candidate must meet the patient in the first floor lounge and escort him/her to the candidate's assigned operatory where the patient may be seated. Assigned operatory numbers correlate to assigned candidate numbers. A clinical floor examiner will be available to assist the candidate. A manila folder containing the following items will be in the candidate's assigned operatory:

- a. Assignment Sheet
- b. Patient Disclaimer, Consent, and Release Form
- c. General/Periodontal Chart Instructions and Symbols
- d. Periodontal Chart
- e. Radiographic film packet and mount for post-operative bitewing radiographs

2. Medical Health History Form

The Medical Health History Form included with the candidate's examination manuals should be completed prior to the examination. On the day the candidate completes the Medical Health History Form, the patient must sign and date the form. The candidate must bring the

completed, signed, and dated Medical Health History Form with him/her the morning of the clinical examination. The candidate will review and update the form at this time; upon updating, the patient must initial and date the Medical History Update section of the Medical Health History Form, and the candidate must initial the form with his/her **CANDIDATE NUMBER (NOT SIGNATURE)**. This form should be placed in the manila folder discussed in section 1 above that will be provided in the candidate's operatory. **IF THE PATIENT HAS MEDICAL PROBLEMS, CONSULT THE CLINICAL FLOOR EXAMINER.**

3. **Patient Disclaimer, Consent and Release Form**

The Patient Disclaimer, Consent and Release Form may be partially completed prior to the examination. The patient must sign this form before a witness, and anyone except the candidate may witness the patient's signature. Also, the candidate will be unable to note his/her candidate number on the form until the day of the examination. Once the Patient Disclaimer, Consent, and Release Form has been fully completed, signed, and witnessed, it should be placed in the manila folder discussed in section 1 above that will be provided in the candidate's operatory.

4. **Patient Number**

The patient number provided during registration in the yellow candidate packets should be fastened on the patient's right lapel.

**Starting Checks, Prophylaxis Assignment,
and Periodontal Charting Assignment**

MAY 27, 1998	
DENTAL HYGIENE LICENSURE EXAMINATION	
9:00 a.m. to 9:30 a.m.	STARTING CHECKS, PROPHYLAXIS ASSIGNMENT, AND PERIODONTAL CHARTING ASSIGNMENT Fourth Floor Clinics

1. **Requesting a Starting Check**

Starting checks and prophylaxis and periodontal charting assignments will take place on Wednesday, May 27, 1998 from 9:00 a.m. to 9:30 a.m. in the fourth floor clinics of the University of Mississippi Medical Center School of Dentistry. Once the candidate has completed the above requirements for the Medical Health History Form and Patient

Disclaimer, Consent, and Release Form, the candidate must request a starting check and have the clinical floor examiner do the following:

- a. Write his/her clinical floor examiner number on the Health/Dental History section of the candidate's Assignment Sheet.
- b. Write the patient number on the candidate's Assignment Sheet; however, no candidate number is written on the Assignment Sheet at this time.
- c. Review the Medical Health History Form and write his/her clinical floor examiner number on the reverse of the patient's Medical Health History Form in the space provided.
- d. Review the Patient Disclaimer, Consent, and Release Form, and ensure it has been completed and signed with the patient's signature and the candidate's number.

2. **Vacating the Operatory**

When Step 1 above is complete, the candidate will leave the patient at the assigned operatory. However, prior to leaving the candidate will do the following:

- a. Remove the candidate number, any other identification, and the manila folder from the assigned operatory and take all items with the candidate to the respective clinic waiting area.
- b. Turn the operatory lights toward the ceiling to indicate that the patient is ready for a prophylaxis and periodontal charting assignment.
- c. Leave only the Assignment Sheet with the patient. The Health/Dental History section should be checked, and the clinical floor examiner will note his/her review by placing the appropriate examiner number on the form. The patient number only should be on the Assignment Sheet.
- d. Leave the FMX and pre-operative bitewing radiographs with **PATIENT NUMBER ONLY** on mount. No candidate names, candidate numbers, or patient names should appear on mounts.

3. **Prophylaxis and Periodontal Charting Assignments**

Once all candidates have vacated the clinic, grading examiners will enter the clinic. One grading examiner will rate the patient and make the candidate's assignment for completion. The candidate's prophylaxis and periodontal charting assignment may consist of one, two, three, or four quadrants depending on the classification/difficulty of the patient. The term "scaling" includes complete removal of explorer-detectable calculus (supragingival and subgingival), soft deposits, plaque, stain, and smoothing of unattached tooth surfaces.

Unattached tooth surfaces are the portion of the crown and root surface to which no tissue is attached. Upon completion of patient rating and assignment, the candidate will be given a starting time which allows him/her to begin scaling, oral hygiene instructions, etc.; this time will be written on the Assignment Sheet.

4. **Returning to the Operatory**

Once prophylaxis and periodontal charting assignments have been made for all candidates, the grading examiners will leave the clinic, and the candidates may return to their assigned operatories. When the candidate returns to the assigned operatory after periodontal charting and prophylaxis assignments have been made, the candidate must replace the candidate number on the assigned operatory. At this time, the candidate should write his/her candidate number on the Assignment Sheet.

5. **Patient Rejection**

In the event the candidate's patient is rejected, refer to the instructions regarding patient rejection on page 7 of this manual.

Clinical Examination

MAY 27, 1998	
DENTAL HYGIENE LICENSURE EXAMINATION	
9:30 a.m. to 12:30 p.m.	CLINICAL EXAMINATION

1. **Completion of Prophylaxis and Periodontal Charting Assignments**

The clinical examination will be held on Wednesday, May 27, 1998 from 9:30 a.m. until 12:30 p.m. in the fourth floor clinics at the University of Mississippi Medical Center School of Dentistry. Each candidate must complete the assigned procedures within the three (3) hour period. The clinical floor examiner must review and place his/her clinical floor examiner number by the completed Periodontal Charting Assignment, Patient Education and General Charting, and Maintaining Standards of Conduct sections of the Assignment Sheet. This may be done at any time during the three (3) hour period. The candidate may send the completed patient to the grading area any time within the three (3) hour period. When all assignments are complete, the candidate must personally escort the patient to the grading clinic door; afterwards, the candidate may clean the operatory.

2. **Post-Operative Radiographs**

Post-operative bitewing radiographs must be taken after completion of scaling. Four (4) duplicate radiographic film packets will be issued for this purpose; however, a minimum of two (2) post-operative bitewing radiographs must be taken for each side of the patient's mouth which has been assigned for prophylaxis. Upon review of post-operative bitewing radiographs, the candidate may return to his/her operatory to scale if the candidate has allowed enough time for this; however, the candidate is not allowed to re-take any post-operative bitewing radiographs. All radiographic equipment will be pre-set with no adjustments necessary, and no bitewing radiographic instruments will be permitted. These radiographs should be made in the candidate's assigned clinic on the fourth floor; however, if necessary, an alternative location is the second floor radiology clinic.

3. **Grading Procedure**

At the time the candidate escorts the patient to the grading clinic door, the candidate must take the manila folder, and the grading area receptionist must note the **COMPLETION TIME** on the Assignment Sheet. The manila folder should contain the following items:

- a. Assignment Sheet
- b. Patient Disclaimer, Consent, and Release Form
- c. General/Periodontal Chart Instructions and Symbols
- d. Periodontal Chart
- e. Medical Health History Form
- f. Pre-Operative bitewing radiographs and FMX -- patient number and "pre-op" must be written on all mounts; no candidate names, candidate numbers, or patient names should be written on mounts
- g. Post-Operative bitewing radiographs -- patient number and "post-op" must be written on the mount; no candidate names, candidate numbers, or patient names should be written on mount

4. **Post-Operative Patient Instructions**

When the patient returns to the candidate's operatory, the duplicate set of post-operative bitewing radiographs should be placed in a coin envelope and given to the patient. The candidate should instruct the patient as to any post-operative care needed and dismiss the patient.

5. **Ultrasonic Scalers**

Ultrasonic scalers may be used and must be compatible with University of Mississippi Medical Center School of Dentistry specifications. **EACH CANDIDATE MUST PROVIDE HIS/HER OWN ULTRASONIC SCALER AND TIPS.**

6. **Infection Control**

The Mississippi State Board of Dental Examiners mandates that candidates follow the current recommended infection control procedures as published by the Centers for Disease Control and Prevention. It is required, for example, that all patient care activities be performed with gloves, masks, protective eyewear, and scrub gowns. It is suggested that protective eyewear also be used for patients.

7. **Fluoride Treatment**

When applicable, fluoride treatment will be administered prior to escorting the patient to the grading clinic door.

8. **Examination Irregularities**

It is the candidate's responsibility to bring irregularities to the attention of the clinical floor examiner. If the candidate feels that an error has been made in any aspect of the examination, the candidate should **IMMEDIATELY** confer with the clinical floor examiner. The clinical floor examiner will obtain a second Board member to witness and document the conference.

9. **Completion of Board Survey**

After completing the clinical portion of the examination and prior to leaving the clinic, the candidate must complete the Board examination survey form and deliver the completed survey answer sheet, along with the yellow candidate packet, candidate number, patient number, and Board examination survey form to the clinical floor examiner. Failure to do so could preclude the candidate from receiving his/her Mississippi dental hygiene license.

CONCLUSION

1. **Candidate Address and License Information Forms**

Candidate address and license information forms completed during orientation will determine the way the candidate's license is styled. Please print legibly and list full mailing address with zip code; if the candidate is moving in the next month, the license may be mailed to the candidate's parents, etc. Write the candidate number in the appropriate blank. It is important that all information be given; please do not write "not applicable," as all the information is applicable. Also, check the birth year to ensure that the current year has not been listed.

2. **Examination Results**

The candidate will be notified by mail of the examination results within three (3) working days from the conclusion of this examination. Results will not be released by telephone. Please do not call members of the Board or the Board office for examination results. The candidate will be mailed his/her license by United States Postal Service certified mail, return receipt, within two (2) weeks from the conclusion of the examination. The candidate must receive his/her license and record it in the Circuit Clerk's office before the candidate begins practicing dentistry in the State of Mississippi. This should be done in the county wherein the candidate resides.

3. **Annual Registration**

Annual registration notices covering the period **SEPTEMBER 1, 1998 - AUGUST 31, 1999** will be mailed the last week in June. The candidate will be required to complete the registration sheet and pay the annual fee for the upcoming year. Unless the Board is notified of a change of address, the annual registration notice will be mailed to the same address as appears on the candidate address and license information form.

4. **Documentation Checklist**

Required documentation must be submitted to the Board in the following manner:

- a. To be submitted by the candidate with his/her application packet:
 - (1) Completed application
 - (2) Application and clinic fees
 - (3) Proof of certification in Cardiopulmonary Resuscitation
 - (4) Proof of liability insurance coverage
 - (5) Formal declaration of intent to become a citizen of the United States (if applicable)
 - (6) Self-query from National Practitioner Data Bank (if applicable)
 - (7) Additional information as required by specific questions on the application
- b. To be mailed by outside sources directly to the Board office:
 - (1) College transcript(s) (for all colleges/universities attended prior to attending dental hygiene school)

- (2) Dental hygiene school transcript(s) (complete or partial for all dental hygiene schools attended)
 - (3) Affidavit from dental hygiene school dean (for candidates who are still in dental hygiene school at the time their application is submitted to the Board)
 - (4) National Board Dental Hygiene Examination grade card
 - (5) Testimonials of moral character (only in cases where character references are unable to sign the application)
 - (6) Certifications from the secretaries of dental or dental hygiene boards in all states where the candidate is currently or has ever been licensed
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COMMON QUESTIONS ABOUT THE EXAMINATION



Q. How soon will I find out if I passed or failed the dental hygiene examination?

A. You will be notified by mail of your examination results within three (3) working days of the conclusion of the examination. Results will not be released by telephone; therefore, do not call Board members or the Board office for examination results.

Q. How long does it take for me to get a license?

A. Your license will be mailed by certified mail, return receipt, within two (2) weeks after conclusion of the examination.

Q. When can I begin practicing?

A. You may begin practicing as soon as you receive your license; however, if you will be practicing in Mississippi, you must first record your license with

the circuit clerk for the county in which you reside before beginning your practice.

Q. If I am not going to be practicing in Mississippi, do I need to file my dental hygiene license with the circuit clerk of the county/parish wherein I reside?

A. No, unless that state's law requires it. You should contact that state's dental or dental hygiene licensure board to determine whether your Mississippi license should be filed with the circuit clerk of the county/parish wherein you reside.

Q. If I practice in Mississippi, why do I have to file my license with the circuit clerk of the county wherein I reside?

A. Miss. Code Ann. § 73-9-33 dictates that all licenses be recorded within thirty (30) days of issuance with the circuit clerk of the county wherein you

- reside. Also, should you move from one county to another, you must re-file your license in your new county of residence. This is the law.
- Q.** If I have a personal emergency during the dental examination, how may I be contacted?
- A.** You may be contacted through the University of Mississippi Medical Center School of Dentistry central reception at 601-984-6155. Please have the caller indicate that you are taking the Board licensure examination.
- Q.** Does the University of Mississippi Medical Center School of Dentistry provide scrubs for the dental hygiene examination?
- A.** No. Please refer to the "blue pages" of this manual for instructions regarding the University of Mississippi Medical Center School of Dentistry.
- Q.** What type of connection does the University of Mississippi Medical Center School of Dentistry require for ultrasonic scalers?
- A.** Adec quick-disconnect. Please refer to the "blue pages" of this manual for instructions regarding the University of Mississippi Medical Center School of Dentistry.
- Q.** Do dental hygiene patients HAVE to have radiographically evident calculus?
- A.** Yes. The purpose of the dental hygiene licensure examination is to test the candidate's ability as a dental hygienist. This includes, but is not limited to, the successful removal of stain and supra and subgingival calculus, the ability to take diagnostic radiographs, periodontal and restorative dentistry, and patient education. These types of patients will be encountered regularly during your career as a licensed dental hygienist.
- Q.** I am an out-of-state candidate and will be unable to screen my patient; therefore, is there someone at the University of Mississippi Medical Center School of Dentistry who can do this for me, since I may not arrive until the day before the dental hygiene examination begins?
- A.** No. You are responsible for obtaining patients and ensuring your patients are properly screened. Please refer to the "blue pages" of this manual for instructions regarding the University of Mississippi Medical Center School of Dentistry.
- Q.** I am an out-of-state candidate and do not know anyone; therefore, is there someone who can assist me with my patient?
- A.** As stated previously, you are responsible for securing your patients.
- Q.** I am an out-of-state candidate, have my patient, and was unable to use the University of Mississippi Medical Center School of Dentistry when I was in Jackson; therefore, is there anyone who can handle my pre-operative radiographs?
- A.** No. You must make your own arrangements for pre-operative radiographs. Please refer to the "blue

- pages" of this manual for instructions regarding the University of Mississippi Medical Center School of Dentistry.
- Q.** Where can I get additional medical history forms?
- A.** Two medical history forms are provided with your examination manual; however, you can get additional medical history forms from the Board by calling 601-944-9622.
- Q.** What type of chart and charting system will be used?
- A.** The universal chart system numbering teeth 1-32 will be used. An example of charting symbols has been provided in your examination manual. Periodontal charting assignments will be given at the starting check. This assigned area will be marked on your Assignment Sheet. Be sure you VERY CAREFULLY read your Assignment Sheet.
- Q.** When do I receive my candidate number, and do I receive a number for my patient?
- A.** You will receive your candidate number and patient number during registration.
- Q.** When do I complete the health history form, and when do I update the information?
- A.** You should complete the health history form prior to the examination, and you should update the health history form with the patient immediately before asking for a starting check.
- Q.** What does the Board consider as "identifying information" which may not be left in the clinics during the prophylaxis and periodontal charting assignments?
- A.** Identifying information includes, but is not limited to, purses, nametags, monograms, manuals or books denoting your name or school, scrubs denoting the name of your dental school, radiographs with your name or the name of your school, etc.
- Q.** What is the best way to find patients for the dental hygiene examination?
- A.** Candidates are responsible for finding and selecting their own patient for the examination. Make sure that the patient meets the qualifications for the procedure, and if your patient is rejected, you must obtain another patient immediately. It is best to have a backup patient available.
- Q.** Why do I need a backup patient?
- A.** In the event that a patient is determined unacceptable (does not meet the selection criteria), that patient will be rejected. It will then be the responsibility of the candidate to provide another patient. If no patient can be provided, the candidate will not be allowed to proceed with the examination.
- Q.** What happens if I do not pass the dental hygiene examination?
- A.** You have the right to make a written request for a review of your results within forty-five (45) days from the date of the notice of your failure.

- Adhere to all requirements in Board Regulation 27 in making your written request.
- Q.** How many times may I take the dental hygiene examination?
- A.** You may take the dental hygiene examination only three times. If you are unsuccessful after two attempts, you must complete six (6) months of clinical training in an ADA-accredited dental hygiene school before being allowed to take the dental hygiene examination for a third, and final, time.
- Q.** Some of my equipment has my dental hygiene school name on it. Can I use it?
- A.** Nothing that would denote the identity of the candidate or his/her dental hygiene school may be used. If an instrument box has your dental hygiene school's name or logo on it, cover it up so that it is not visible to the grading or clinical floor examiners.
- Q.** What if, after the examination has begun, I experience an equipment failure or an unforeseen delay over which I have no control?
- A.** In the event of such an unforeseen delay, immediately notify the clinical floor examiner so that the problem may be identified and a solution determined. If it is determined that the delay was unavoidable or not the candidate's fault, the appropriate adjustment will be made to your time assignment by either a Board member or Board staff person only.
- Q.** Is the jurisprudence examination the same each year?
- A.** No. Every year it is a different examination. You must make a minimum score of 75 to pass. If you do not pass the jurisprudence examination, you will not be allowed to continue with the clinical portion of the examination.
- Q.** Does it help to be a Mississippi resident to pass the dental hygiene examination?
- A.** No. Although the majority of candidates who pass the examination are from Mississippi, candidates from other state dental hygiene schools have been equally as successful. To ensure fairness, the dental hygiene examination is administered on a "double-blind" basis so that the candidates and the grading examiners never have direct contact. Grading examiners do not know whose work they are grading; they have no access to any information about which candidate performed a particular procedure. In this manner, candidates are graded fairly without regard to their backgrounds.
- Q.** How do I know that all of the grading examiners are grading by the same set of standards?
- A.** All of the examiners, including the clinical floor examiners, go through a very intense calibration exercise prior to the dental hygiene examination to ensure that all examiners grade as reliably as possible.
- Q.** Who are these examiners?

- A.** The examiners are current and former members of the Mississippi State Board of Dental Examiners.
- Q.** What is the pass rate for the Mississippi licensure examination?
- A.** Between 1993 and 1997, the pass rate is 98% of the approximately 272 candidates who have taken the dental hygiene examination, and 266 have become licensed dental hygienists.
- Q.** Do I need malpractice insurance?
- A.** Yes. If you choose to do so, you may select the insurance carrier whose brochure is included with your examination manual for insurance coverage during the dental hygiene examination.
- Q.** Once I am licensed in Mississippi, do I have to practice in that state to maintain my dental hygiene license?
- A.** No. However, you must maintain licensure by paying appropriate annual renewal fees and complying with Mississippi Board regulations concerning mandatory continuing education, Cardiopulmonary Resuscitation, etc.
- Q.** What instruments are required for the dental hygiene examination?
- A.** You are required to bring your own sterile instruments. Refer to the information provided by the University of Mississippi Medical Center School of Dentistry in the "blue pages" of your examination manuals for a list of all instruments and supplies required and those provided by the School.
- Q.** If I am left-handed, what do I need to do?
- A.** Indicate such on your examination application so that a left-handed operator can be reserved for you.

GENERAL/PERIODONTAL CHART INSTRUCTIONS AND SYMBOLS

CODES FOR CHARTING AS NOTED BELOW MUST BE USED FOR THIS EXERCISE.

1. Draw a line in **RED PENCIL** indicating the location of the gingival margin.
2. Record missing teeth with a **BLUE X**.
3. Record pocket depths at six (6) points on each tooth indicating the depth in millimeters (mm) on the chart. Pocket depths of 1.3mm shall be recorded in **BLUE PENCIL**. Pocket depths of 4mm and above shall be recorded in **RED PENCIL**. Measure and record distofacial, facial, mesiofacial, mesiolingual, lingual, and distolingual.
4. Indicate teeth with pathological mobility by placing the appropriate Roman numeral on the crown of the involved tooth.
5. Identify abnormal radiographic findings (e.g., carious lesions, defective restorations, overhangs, and periapical pathology) in **RED PENCIL**.
6. Identify endodontically treated teeth by placing a vertical line within the root of the tooth.
7. Indicate furcation involvement by placing the appropriate mark in the involved area (e.g., I∨, II ∇, or III ▼) in **RED PENCIL**.
8. Indicate an amalgam restoration by drawing the shape and filling in with **BLUE PENCIL**.
9. Indicate tooth colored restoration by outlining restoration as it appears.
10. Indicate crown fracture as it appears in **RED PENCIL**.

THE FOLLOWING ARE ONLY SOME OF THE SYMBOLS THAT WILL BE USED. THOSE NOT INCLUDED ARE MORE UNIVERSAL TO THE CANDIDATE.

Printed from the Internet

CANDIDATES ARE EXPECTED TO COMPLETE A FULL GENERAL CHART AND PROBE THE ASSIGNED TEETH. EVERYTHING MUST BE CHARTED.



Gold



Open Contact



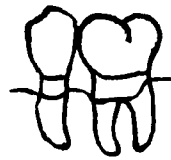
✓ I
▽ II
▼ III
Furcation



Implant



Rotation



Gingival Margin



Mobility



Drifting
Missing Tooth



Endodontic



Fracture



Overhang
Existing Restoration



Marginal Ridge Discrepancy

UNIVERSITY OF MISSISSIPPI MEDICAL CENTER SCHOOL OF DENTISTRY
INFORMATION FOR CANDIDATES FOR
DENTAL HYGIENE LICENSURE

The intent of the information contained within this document is to assist the candidate with taking the Mississippi State Board of Dental Examiners dental hygiene licensure examination. Questions related to the information in this document or to the facilities and policies of the School of Dentistry may be directed to the office of the Associate Dean for Clinical Programs at (601) 984-6025.

PARKING:

Patient parking is available in the lot across the street from the School of Dentistry. The parking fee is \$.50 per hour or \$5.00 per day. Candidates may park in the Mississippi Veterans Memorial Stadium parking lot directly across North State Street from the Medical Center.

USAGE FEE:

The fee that is submitted by the candidate to the School of Dentistry pays for the direct costs of the school's hosting the examination. This fee includes the use of the facilities, equipment, instruments, and supplies.

Equipment and Instruments:

1. All dental operatory units are chair-mounted Adec Continental units and can be adjusted to accommodate left-handed operators.
2. Ultrasonic scalers supplied by the candidate must have an Adec quick-disconnect.
3. Arrangements may be made for sterilization of a candidate's own instruments at least one day prior to the examination by contacting the chief dental assistant in Restorative Dentistry at (601) 984-6030.
4. A clinical slow speed handpiece (Midwest Shorty two speed) will be issued in the clinic where candidate is assigned. Immediately following the use of the handpiece, it must be returned to the supply area from which it was obtained. Candidates are free to use their own handpieces. All handpiece tubing is of the four-hole Midwest type.

5. The State Board of Dental Examiners will be notified by the school if all requisitioned handpieces and instruments are not returned, and all patient records are not completed or returned.
6. The contents of the available dental hygiene instrument patient care kit and off-tray instruments and supplies are as follows.

Patient Care Kit:

Toothbrush and paste
Prophy cup, brush, and paste
Finger ring
Floss (waxed and unwaxed)
Air/water syringe tip
Napkin chain
Pencils (#2 and red/blue)
Disposal fluoride trays (medium and large)

Off-Tray Instruments and Supplies:

Prophy angle
Disclosing solution
Fluoride

Supplies:

The School of Dentistry supplies radiographic film and mounts; paper, cotton, and plastic disposables; and gloves, masks, and face shields.

USE OF FACILITIES:

Limited reception room seating is available on the fourth floor for patients during the examination. Because fourth floor accommodations are limited, additional seating is available in the first floor lounge for patients and their guests. No eating or drinking is permitted in the building except for the first floor lounge. Smoking is not permitted anywhere in the building.

PATIENTS:

The University of Mississippi Medical Center School of Dentistry does not assume responsibility for supplying patients for the licensure examination.

RADIOGRAPHS:

Radiographs needed during the examination may be made in the fourth floor clinics.