

## MISSISSIPPI STATE BOARD OF DENTAL EXAMINERS

### Information for Applicants for Dental Examinations

1. Applicants are required to be at least 21 years of age, of good moral character, a citizen of the United States of America and hold a diploma from a recognized school of Dentistry in the United States at the time of the examination. Applicants must present the following credentials with application: High school and college transcripts from each college attended including transcript of dental school record.
2. Applicant must have notarized signatures of two citizens of the State of which he is a legal resident and of two legal residents of the State of Mississippi, one of whom must be a member of the American Dental Association. Signatures must not be those of anyone connected in any way with any institution of learning. ALL APPLICANTS ARE REQUIRED TO ASK THE DENTISTS WHO SIGN HIS APPLICATION TO WRITE A LETTER OF RECOMMENDATION DIRECTLY TO THE SECRETARY OF THE BOARD.
3. Application must be accompanied by a fee of \$75.00 remitted by check or money order payable to the Board. No fee will be returned after examination has been entered upon. Applicants who fail the examinations will not be issued a license, but may take the examinations again at the next regular meeting of the Board, at which time they will be considered as a new applicant. No temporary licenses are issued nor are any special examinations given.
4. Certification by the National Board of Dental Examiners is accepted in lieu of the written examinations. Written examinations are given in all subjects not passed on the National Board. All applicants are required to take the examination in Jurisprudence based on Mississippi Law, which is enclosed with this information sheet.
5. Each dental student will pay a clinic fee in the amount of \$5.00, in cash or check, to the University of Tennessee, School of Dentistry, for materials, anesthetics, etc., with the exception of gold, which may be purchased from the school. Applicants must furnish handpieces, either Midwest True Jorque Low Speed Air Driven handpiece or Star Futura Contra Angle Air Driven handpiece.
6. CLINICAL REQUIREMENTS are as follows:
  - A. CROWN AND BRIDGE CLINICAL REQUIREMENTS: Prepare a posterior tooth for a full or 3/4 crown, complete and insert the crown. There must be at least one approximating tooth in contact and one opposing tooth in occlusion. Also prepare an ivory upper central or lateral incisor for a porcelain jacket crown. This tooth is to be mounted in a stone model with adjacent stone teeth. Applicants are responsible for furnishing their own patients and models. Restoration may be done on teeth with existing decay or teeth requiring replacement restoration.
  - B. OPERATIVE AND PREVENTIVE DENTISTRY CLINICAL REQUIREMENTS: Prepare a cavity and insert a Class II, or equivalent, gold inlay in a bicuspid or molar, or a Class II or Class III gold foil in lieu thereof; prepare a cavity and insert a Class II, or equivalent, alloy restoration in a bicuspid or molar. For each restoration there must be at least one approximating tooth in contact and one opposing tooth in occlusion. Restorations may be done on teeth with existing decay or teeth requiring replacement restorations.

Evaluate the oral hygiene and dietary status of a patient and prescribe, as needed, a personal oral hygiene, dietary, and fluoride program for this patient. This patient should be one who has not had previous preventive dentistry counseling.

- C. PROSTHETIC CLINICAL REQUIREMENTS: (1) The taking of upper and lower final impressions of an edentulous mouth for the construction of full upper and lower dentures. The starting check will be given when trays are adapted to primary casts before they are muscle trimmed. (2) The pouring of master casts of upper and lower arches with adaptation of trays and bite blocks. (3) The registration of vertical and centric by any technique of your choice. (4) The preparation of master casts, trays and bite blocks for a commercial laboratory for the purpose of fabricating full upper and lower acrylic dentures as per your written work authorization. (5) Prepare a written work authorization to a commercial laboratory for the construction of full upper and lower acrylic dentures to include selection of teeth, giving make of teeth, mold number and shade. Your work authorization should be complete, concise and clear to the laboratory technician in order for him to prepare your case for your next appointment; That of a wax try-in. This work authorization must be prepared by each candidate without help. Work authorization forms will be furnished by the Board. (6) Note that this examination consists of seven (7) grades, vertical and centric each receiving a grade. Each of these grades will reflect your ability to accomplish these steps with accuracy and neatness. Each candidate must furnish his or her patient and each patient must understand that he or she will not receive a set of dentures as a result of this examination.
- D. Any of the above requirements and regulations are subject to change at any time at the will of the Board.
7. Completed applications, including all credentials must be received by the Secretary not later than thirty days prior to the examinations.

PLEASE SIGN YOUR APPLICATION