

Phone: 608-266-2112 Web: http://dsps.wi.gov Email: dsps@wisconsin.gov

Tony Evers, Governor Dawn B. Crim, Secretary

TELECONFERENCE/VIRTUAL DENTISTRY EXAMINING BOARD

Virtual, 4822 Madison Yards Way, Madison Contact: Christian Albouras, (608) 266-2112 May 29, 2020

The following agenda describes the issues that the Dentistry Examining Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Dentistry Examining Board.

AGENDA

12:00 P.M.

OPEN SESSION - CALL TO ORDER - ROLL CALL

- A. Pledge of Allegiance
- B. Adoption of Agenda (1-3)
- C. Conflicts of Interest
- **D.** Administrative Matters
 - 1) Department, Staff and Board Updates
 - 2) Board Members Term Expiration Dates
- E. Licensure and Examination Matters Discussion and Consideration
 - 1) Scope Amending DE 2, Relating to Approved Testing Services (4-77)
 - 2) Scope Amending DE 2, Relating to Temporary Licenses (78-79)
- F. Information Items
 - 1) Wisconsin Society of Oral and Maxillofacial Surgeons
- G. COVID-19 Discussion and Consideration
- H. Legislative and Policy Matters Discussion and Consideration
- I. Administrative Rule Matters Discussion and Consideration
 - 1) Pending or Possible Rulemaking Projects
- J. Discussion and Consideration of Items Added After Preparation of Agenda:
 - 1) Introductions, Announcements and Recognition
 - 2) Administrative Matters
 - 3) Election of Officers
 - 4) Appointment of Liaisons and Alternates
 - 5) Delegation of Authorities

- 6) Education and Examination Matters
- 7) Credentialing Matters
- 8) Practice Matters
- 9) Legislative and Policy Matters
- 10) Administrative Rule Matters
- 11) Liaison Reports
- 12) Board Liaison Training and Appointment of Mentors
- 13) Informational Items
- 14) Division of Legal Services and Compliance (DLSC) Matters
- 15) Presentations of Petitions for Summary Suspension
- 16) Petitions for Designation of Hearing Examiner
- 17) Presentation of Stipulations, Final Decisions and Orders
- 18) Presentation of Proposed Final Decisions and Orders
- 19) Presentation of Interim Orders
- 20) Petitions for Re-Hearing
- 21) Petitions for Assessments
- 22) Petitions to Vacate Orders
- 23) Requests for Disciplinary Proceeding Presentations
- 24) Motions
- 25) Petitions
- 26) Appearances from Requests Received or Renewed
- 27) Speaking Engagements, Travel, or Public Relation Requests, and Reports

K. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

- L. Deliberation of Items Added After Preparation of the Agenda
 - 1) Education and Examination Matters
 - 2) Credentialing Matters
 - 3) DLSC Matters
 - 4) Monitoring Matters
 - 5) Professional Assistance Procedure (PAP) Matters
 - 6) Petitions for Summary Suspensions
 - 7) Petitions for Designation of Hearing Examiner
 - 8) Proposed Stipulations, Final Decisions and Order
 - 9) Proposed Interim Orders
 - 10) Administrative Warnings
 - 11) Review of Administrative Warnings
 - 12) Proposed Final Decisions and Orders
 - 13) Matters Relating to Costs/Orders Fixing Costs
 - 14) Case Closings
 - 15) Board Liaison Training
 - 16) Petitions for Assessments and Evaluations
 - 17) Petitions to Vacate Orders
 - 18) Remedial Education Cases
 - 19) Motions
 - 20) Petitions for Re-Hearing

- 21) Appearances from Requests Received or Renewed
- M. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

- N. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate
- O. Open Session Items Noticed Above Not Completed in the Initial Open Session

ADJOURNMENT

NEXT	DATE	LULY	1	. 2020
	DAIL	JULI		. 4040

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112 or Meeting Staff at 608-266-5439.

Dentists

National Exam (NBDE)

Prometric announced that testing center closures would continue until May 31, 2020 with the exception of essential testing programs which include the DAT, OAT, Part I and Part II

Part I – last date to take the Part I exam is extended to October 31, 2020

Part II – last date to take the Part II exam continues to be July 31, 2022

Integrated National Board Dental Examination will begin August 1, 2020

Clinical Exam

JCNDE (request from Marquette University to utilize)

DLOSCE

Administered at Prometric Test Centers

Assesses clinical judgment and the use of a "traditional manikin" hand skill assessment is not included.

Designed to reliably and accurately reflect the practice of clinical dentistry

Focused exclusively on the clinical tasks a dentist performs while providing direct, chair-side treatment to patients.

Testing window June 15, 2020 – July 17, 2020

CRDTS

Part II – Endodontics on manikin

Part III – Prosthodontics on manikin

Part IV – Periodontal on patient or manikin

Part V – Restorative on patient or manikin

(no Wisconsin dates)

CDCA

ADEX exam

Section 1 – DSE OSCE on computer

Section II – Endodontic on manikin

Section III – Prosthodontic on manikin

Section IV – Periodontal (optional) on live patient

Section V – Restorative on live patient

(Marquette holding exam for own students rescheduled for June 12)

SRTA

Endodontic on manikin

Prosthodontic on manikin

Restorative on live patient (during COVID on manikin)

Periodontal (optional) on live patient

(Postponing all exams in May)

CITA

ADEX exam

Section I – CSCE OSCE on computer

Section II – PTCE on live patient

(no Wisconsin sites)

WREB

Operative on live patient

Endodontics on simulated teeth

Comprehensive Treatment Planning on computer

Periodontal (optional) on live patient

Prosthodontic (optional) on simulated preparations

(no Wisconsin sites)

Dental Hygienists

National Exam (NBDHE)

Pearson VUE is opening test center in areas where there are no restrictions prohibiting operation.

Clinical Exam

CRDTS

Live Patient

(Wisconsin locations are TDB except for fall/winter dates)

CDCA

ADEX exam

Section I – CSCE OSCE on computer

Section II – PTCE on live patient

(no Wisconsin sites)

SRTA

Live patient

(postponing exams in May)

CITA

ADEX exam

Section I – CSCE OSCE on computer

Section II – PTCE on live patient

(no Wisconsin sites)

WREB

Live patient

(no Wisconsin sites)



THE COMMISSION ON DENTAL COMPETENCY ASSESSMENTS

1304 CONCOURSE DRIVE, SUITE 100 | LINTHICUM, MD 21090 TEL: 301-563-3300 | FAX: 301-563-3307 cdcaexams.org

For Immediate Release

CDCA Expands Non-Patient Clinical Examination options to Dental Hygiene, Dental Periodontal Scaling Assessments

(*Linthicum Heights, MD*| *May 18, 2020*) The Commission on Dental Competency Assessments (CDCA) will soon be able to offer dental hygiene students a manikin-based examination to demonstrate readiness for practice. The American Board of Dental Examiners (ADEX) approved the use of a typodont for clinical examinations last week after reviewing an analysis and feasibility study. Read the ADEX announcement <u>here</u>.

The ADEX Dental Hygiene Committee approved the manikin-based option for use in the Patient Clinical Treatment Exam (PTCE) is a response to the COVID-19 crisis should states wish to require a psychomotor demonstration of skills in the absence of patients. The ADEX Examination for Dental Hygiene licensure is made up of two parts, the PTCE and the Computer Simulated Clinical Examination OSCE (CSCE OSCE). Examinations using the approved typodont will be available in early July through CDCA.

Earlier this spring the ADEX Dental Examination Committee approved use of the CompeDont™, a psychometrically validated simulated tooth, for use in the Restorative Examination for dentistry.

At least 11 states already permit the use of a manikin for dental hygiene examinations and/or accept the CSCE OSCE only for licensure. States seeking support in making these decisions are encouraged to contact the CDCA as representatives will be made available to participate in conference calls and meetings. The typodont is also approved for use in Periodontal Scaling assessments for dental licensure candidates.

The Commission on Dental Competency Assessments, founded in 1969, is the largest nonprofit, third-party administrator of dental and dental hygiene assessments in the US. To reach a CDCA representative, contact Stephanie Beeler, Multimedia, Communications, and Strategic Projects Leader at sbeeler@cdcaexams.org.

6

From: Matthew Bistan

Sent: Thursday, May 21, 2020 10:59 PM

To: Albouras, Christian - DSPS < christian.albouras@wisconsin.gov Subject: Fwd: clarification from DEB on CDCA mannequin acceptance

Please add this to the Friday meeting. Matt Bistan

Begin forwarded message:

From: "Syed, Anoushka" <anoushka.syed@marquette.edu>

Date: May 21, 2020 at 9:44:43 PM CDT

To: Matthew Bistan

Cc: "Widor, Tara-Rae" < tararae.widor@marquette.edu>

Subject: clarification from DEB on CDCA mannequin acceptance

Hi Dr. Bistan,

I'm writing to request clarification on whether it is official if the WI DEB will accept CDCA's mannequin anterior and posterior restorative portions (Compedont) for licensure.

I spoke to another WDA representative and he informed me that DEB regulation 2.005 specifies that either live patient or mannequin restorative procedures will be accepted for licensure. However, CDCA and Marquette University representatives are uncertain if this acceptance is official. We are scheduled to take the exam on June 12th with CDCA, so we are hoping for your answer as soon as possible.

Thank you for your time,

Anoushka Syed DDS, Marquette University 2020



Dental Licensure Objective Structured Clinical Examination (DLOSCE) Quick Facts

Name of Examination	Dental Licensure Objective Structured Clinical Examination (DLOSCE)
Purpose	The DLOSCE assesses clinical judgment, and is intended for use in fulfilling dental board's clinical examination requirement. The DLOSCE provides dental boards with information concerning whether a candidate for licensure possesses the level of clinical skills that is necessary to safely practice.
Content Domain and Test Specifications	The DLOSCE is comprehensive in its evaluation of clinical judgment, measuring content in the following areas: Restorative 24% Prosthodontics 19% Oral Pathology, Pain Management, and Temporomandibular Dysfunction 13% Periodontics 10% Oral Surgery 9% Endodontics 8% Orthodontics 6% Medical Emergencies and Prescriptions 11% Additionally, the following applies: Diagnosis and Treatment Planning—as well as Occlusion—are covered across the topics listed above. The DLOSCE includes questions involving patients of various types and backgrounds, including pediatric, geriatric, special needs, and medically complex.
Question Format	DLOSCE questions can be accompanied by 3-D models, clinical photographs, and radiographs. While all DLOSCE questions involve a patient, it is not a "patient-based" examination (administration occurs without the need for live patients).
Practice Questions	DLOSCE practice questions can be obtained via the following link: https://www.ada.org/~/media/JCNDE/pdfs/practice_questions.pdf?la=en
First Date of Availability	On April 2, 2020, the JCNDE announced that the DLOSCE will be released on June 15, 2020. The DLOSCE will be administered in testing windows, with availability for 2020 currently as follows: • June 15 – July 17, 2020 • November 9 - 27, 2020
Eligibility	DLOSCE eligibility rules for students of US dental programs accredited by the Commission on Dental Accreditation (CODA) are determined by each program. Each program at its discretion may institute its own specific requirements pertaining to the examination.



Administration	The DLOSCE will contain 150 questions and require 1 day to administer. Administrations will occur at select Prometric testing centers located throughout the US. The DLOSCE Candidate Guide can be downloaded via the following link: https://www.ada.org/~/media/JCNDE/pdfs/dlosce_guide.pdf?la=en
Cost of Administration	The fee for 2020 administrations of the DLOSCE will be \$800. A lower fee is being charged in 2020, due to COVID-19 and the unique challenges faced by students. Beginning in 2021, the fee charged for DLOSCE administrations will be \$1,650.
General Policies and Procedures	Unless stated otherwise, DLOSCE policies and procedures are anticipated to be fully consistent with the policies and procedures of the JCNDE. This includes, for example, policies concerning examination rules of conduct and appeals.
	Candidate Results. The DLOSCE is a criterion-referenced examination, with the minimum passing score (i.e., 75) determined by subject matter experts through rigorous standard-setting activities. DLOSCE results will be reported as Pass/Fail. Candidates who Pass will simply receive notification of their status as having passed the examination. Candidates who Fail will be provided general information that permits them to understand areas where remediation would be beneficial.
Results Reporting	DLOSCE results will typically be made available approximately four to five weeks after the close of each administration window. Results can be viewed online by logging into the My Account Summary
	School Results. Candidates' Pass/Fail status will be reported through the DTS Hub. Schools will receive periodic reports that describe how their students perform on the examination, relative to students from other schools.
	Dental Board Results. Candidates' Pass/Fail status will be reported through the DTS Hub.



Retesting Policy	 The DLOSCE Retest Policy is as follows: Candidates who have not passed may apply for re-examination. Candidates will be permitted to test once per testing window. Candidates who have not passed the examination within five attempts or five years from their first attempt are limited to one examination attempt per 12-month period. Candidates who have passed may not retake the examination unless required by a state board or relevant regulatory agency.
Dental Boards	Candidates should contact the dental boards of each state to understand state requirements and the acceptability of the DLOSCE. With respect to administration timing, the JCNDE has received informal feedback suggesting a general preference for candidates to complete the examination in close proximity to when they are applying for licensure.
Governance	The governing body of the DLOSCE Program is the Joint Commission on National Dental Examinations (JCNDE). In 2017, the ADA Board of Trustees authorized the formation of a DLOSCE Steering Committee charged with developing and validating the DLOSCE. Consistent with its charge, the DLOSCE Steering Committee identified the JCNDE as the ideal governing body, due to the JCNDE's long and distinguished track record of providing valid and reliable high-stakes examinations for licensure purposes, to protect the public health. In January 2020, the Board of Trustees approved the transfer of final development and future administration oversight of the DLOSCE to the Joint Commission on National Dental Examinations (JCNDE). The DLOSCE Steering Committee now serves as an ad hoc committee of the JCNDE. A specific timeline of activity can be found at https://www.ada.org/en/jcnde/dental-licensure-objective-structured-clinical-examination/dlosce-historical-timeline .
Validity and Technical Information	The DLOSCE is supported by content validity arguments, the same type of validity evidence that is used to support the JCNDE's other examination programs—the National Board Dental Examinations Parts I and II, the National Board Dental Hygiene Examination, and the Integrated National Board Dental Examination. DLOSCE content has been developed by teams of highly qualified subject matter experts, working together to build examination questions that are capable of accurately and reliably identifying those who possess the clinical skills necessary to safely practice dentistry. A summary of DLOSCE validity evidence is provided at the following link: https://www.ada.org/en/jcnde/dental-licensure-objective-structured-clinical-examination/news-and-resources The DLOSCE Technical Report will be made available subsequent to results reporting for the first test administration window.
Additional Information	Please see the DLOSCE website: www.ada.org/jcnde/dlosce . The JCNDE can also be reached via dlosce@ada.org .



Dental Licensure Objective Structured Clinical Examination Summary of Validity Evidence

Validity is the most important consideration in developing and evaluating examinations (AERA, APA, & NCME, 2014, p. 11). Validity refers to the degree to which evidence and theory support a specific interpretation and use of examination results for a given examination purpose. This document summarizes the validity evidence supporting dental boards' use of Dental Licensure Objective Structured Clinical Examination (DLOSCE) results in licensure decision making. The Joint Commission on National Dental Examinations (JCNDE) invites dental boards to consider the information provided herein, as they consider using DLOSCE results in 2020 to inform licensure decisions.

The DLOSCE is professionally developed and validated

The DLOSCE Program is overseen by the JCNDE. The JCNDE has a long and distinguished track record of providing valid and reliable high-stakes examinations for licensure purposes, for use by dental boards as they work to protect the public health. DLOSCE development, which began in earnest in 2017 and has occurred continuously since that time, is directed by the DLOSCE Steering Committee which is composed of members of the JCNDE, general practitioners in private practice; educators with experience teaching comprehensive, general dentistry in dental school clinics; current state dental board members. The Committee is also advised by a technical consultant with extensive experience in developing a dental OSCE for licensure purposes. DLOSCE development, administration, and scoring are implemented by the ADA's Department of Testing Services (DTS), which employs professionally trained staff that includes individuals with advanced degrees in Psychometrics, Educational Psychology, Industrial/Organizational psychology, and Leadership. DTS has implemented dental high stakes testing programs for decades, including the testing programs of the JCNDE.

The DLOSCE assesses the clinical skills that entry-level general dentists must possess in order to practice safely

The purpose of the DLOSCE is to identify whether a candidate for dental licensure possesses the level of clinical skills necessary for the competent practice of dentistry. Content validity evidence strongly supports dental boards' use of the DLOSCE for that purpose. The DLOSCE focuses exclusively on the clinical tasks a dentist performs while providing direct, chair-side treatment to patients. The examination is comprehensive in its assessment of clinical judgment, including content in the following areas: Restorative Dentistry; Prosthodontics; Oral Pathology, Pain Management and TMD; Periodontics; Oral Surgery; Endodontics; Orthodontics; Medical Emergencies; and Prescriptions. Diagnosis and Treatment Planning—as well as Occlusion—are assessed across the aforementioned topic areas. The examination additionally includes questions involving each of the following patient types: pediatric, geriatric, special needs, and medically complex.

The DLOSCE content domain was established based on the recommendation of a subject matter expert panel whose members gave careful consideration to the types of clinical skills that entry-level general dentists must possess. In detailing the content domain, the panelists considered the results of a 2016 dental practice analysis survey involving over 2,500 entry-level general dentists practicing throughout the US and its jurisdictions. The practice analysis survey shed light on the frequency with which entry-level general dentists perform certain tasks, and



the criticality of those tasks to patient care. The subject matter expert panel used the information from the practice analysis, along with their own experience and judgment, to recommend test specifications for the examination. Test specifications define the topic areas the examination covers, and the number of test questions that are devoted to each topic area. Each form of the DLOSCE adheres to the established test specifications, ensuring that candidates who attempt the DLOSCE encounter an examination that is comprehensive in its coverage of the content domain.

DLOSCE content is developed by highly qualified subject matter experts through a multistep process that ensures quality

DLOSCE content is developed by teams of highly qualified subject matter experts who work in teams to build examination questions that are capable of accurately and reliably identifying those who possess the clinical skills necessary to safely practice dentistry. The teams are carefully constructed to ensure that they contain individuals with expertise in all required areas of dentistry. The DLOSCE subject matter expert pool includes more than 170 individuals—including general dentists and specialists—that the JCNDE can draw upon to develop and review DLOSCE questions and stimulus materials. Each DLOSCE question is developed by a team of specialists, and then separately reviewed by a team of general dentists to help confirm and ensure clinical relevance. The JCNDE employs window testing and delayed results reporting for the DLOSCE, so that psychometric analyses can be conducted to identify and address any potential issues with examination questions before examination results are released to candidates.

The DLOSCE includes innovative question formats that increase standardization while also promoting clinical fidelity

The DLOSCE is a computer-based examination that includes sophisticated, lifelike 3D models that candidates can interact with and manipulate to facilitate diagnosis. Utilization of 3D models in lieu of live patients provides further benefits through increased standardization of the testing experience, improving the reliability and validity of the examination with respect to its intended purpose. Extended multiple choice questions that accompany these 3D models reduce the impact of guessing and provide candidates with a clinical situation involving more clinical judgments and possessing greater fidelity. In many cases candidates can receive partial credit for their responses.

The DLOSCE is administered under highly standardized and secure conditions

The DLOSCE is administered under highly standardized testing conditions that are closely monitored. Deviations from standardized testing conditions are reported to DTS by the test administration vendor (Prometric) so they can be reviewed by the JCNDE and adjudicated appropriately. Candidates who violate rules and regulations can incur severe penalties. This includes the voiding of scores and the imposition of mandatory wait periods. DTS employs a dedicated test security and fraud prevention specialist who works diligently to prevent testing irregularities and to identify them when they occur. Psychometricians within DTS conduct forensic analyses aimed at detecting anomalous candidate behaviors and results.



The DLOSCE is designed to produce reliable results

Reliability refers to the precision and stability of examination results, and the degree to which those results are consistent across replications of a testing procedure. Reliability is reduced by the presence of random measurement error, which can result from factors such as candidate guessing or fatigue, or the presence of distractions in the testing environment. Examination results tend to be highly reliable when the examination contains a sufficient number of high quality questions, and is administered under highly standardized conditions. The DLOSCE contains 150 questions, each of which undergoes a rigorous development process involving multiple quality control hurdles that must be successfully passed for the question to proceed. The strength of these procedures—accompanied by the fact that the examination is administered under highly standardized conditions—has led the JCNDE to conclude that the DLOSCE is ready for release in 2020, and will demonstrate high levels of reliability when it is administered.

Summary

The JCNDE is confident that the DLOSCE is a strong examination that will do an excellent job in helping boards to protect the public health. The DLOSCE is ideally suited to helping boards identify those who possess—and those who do NOT possess—the level of dental clinical skills that is necessary to safely practice. The DLOSCE is well-suited for use in addressing the clinical examination licensure requirements of each board, and is particularly responsive to boards' pressing needs in these challenging times. The JCNDE looks forward to working closely with all boards interested in accepting the DLOSCE for licensure purposes in 2020 and beyond.

References

American Educational Research Association, American Psychological Association, and National Council on Measurement in Education (2014). Standards for Educational and Psychological Testing. Washington, DC: Author.

The Dental Licensure Objective Structured Clinical Examination (DLOSCE)

Dental Board Webinar April 22, 2020



Presenters



Cataldo W. Leone, DMD, DMedSc, FACD, FICD Chair, JCNDE



William F. Robinson, DDS Commissioner, JCNDE



David M. Waldschmidt, Ph.D. Director, JCNDE



Why develop the DLOSCE?

- Gives dental boards the ability to identify those who lack the skills necessary for safe practice, using a professionally developed examination backed by strong validity evidence.
- Eliminates undesirable situations and complications that can arise from the use of patients in the examination process (e.g., patient's more pressing needs not treated in lieu of pursuing the "perfect lesion").
- Helps dental boards in their mission to protect the public.



Why the JCNDE?

- The DLOSCE was originally overseen by the ADA Board of Trustees, which formed the DLOSCE Steering Committee in 2017.
- No other testing agencies expressed interest in moving this forward, and the ADA possessed the in-house expertise to develop the DLOSCE through its Department of Testing Services (DTS).
- Licensure examination programs involve a public trust that requires
 the examinations be administered, and decisions be made, in a
 consistent manner that permits due process and is as free from
 bias and conflict of interest as possible.
- The Joint Commission on National Dental Examinations (JCNDE)
 has a long and successful track record of delivering high quality,
 high stakes licensure examinations that are used by boards to help
 protect the public.



Who serves on the DLOSCE Steering Committee?

As of January 2020, the DLOSCE is governed by the Joint Commission on National Dental Examinations (JCNDE). The DLOSCE Steering Committee continues to pursue its charge, now as a Committee of the JCNDE with membership as follows:

Joint Commission on National Dental Examinations (JCNDE) members	Dr. Cataldo Leone, JCNDE Chair (MA) Dr. William Robinson (FL)
General dentist members (ADA Board of Trustees)	Dr. Roy Thompson, Committee Chair (TN) Dr. Craig Armstrong (TX)
General dentist members (formerly on CDEL)	Dr. Edward J. Hebert (LA) Dr. Prabu Raman (MO)
Educators with experience teaching comprehensive clinical dentistry	Dr. Michael Kanellis (IA) Dr. Frank Licari (UT)
State dental board members	Dr. David Carsten (WA) Dr. Mark R. Stetzel (IN)



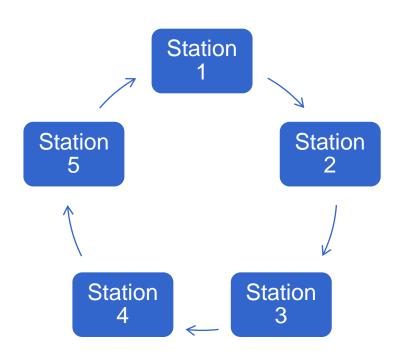
What has the Committee accomplished?

- Identified governance structure for DLOSCE administration.
- Identified and established examination content areas and test specifications.
- Established general structure for the examination and permissible item formats.
- Identified and established test construction team (TCT) structure, and selected test constructors (150+).
- Overseen content development through the DLOSCE Working Committee.
- Identified and contracted key vendors (e.g., technology, testing vendors) to support examination administration.



What is an Objective Structured Clinical Examination (OSCE)?

- A method of measurement
- Candidates rotate through short, standardized stations
- Assesses clinical competence and skills, and is widely used in health sciences
- Measures clinical skills such as communication, clinical examination, knowledge of procedures, prescriptions, etc.
- Success requires critical thinking
- OSCEs are evolving





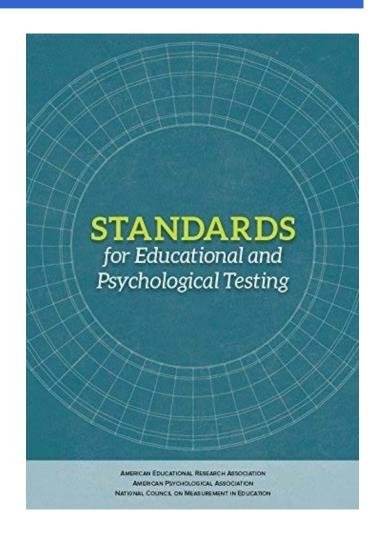
Why conduct an OSCE?

- Benefits include:
 - Assesses broad range of skills, including clinical and theoretical knowledge
 - Standardized (stations, competencies, tasks)
 - Strong validity evidence
 - Reliable
 - Fair



The Standards for Educational and Psychological Testing

- The Standards were developed by the American Educational Research Association (AERA), American Psychological Association (APA), and the National Council on Measurement in Education (NCME).
- The Standards provide considerations for developing, implementing, and evaluating tests.
- The Standards and industry best practices help guide DTS activities as examinations are designed, constructed, and implemented.
- DTS' primary focus is on validity, the evidence that supports the interpretation and use of examination results.





Validity and Test Security

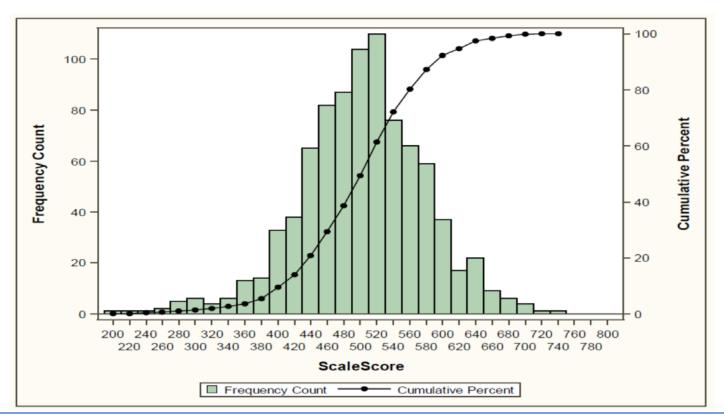
- Release of the DLOSCE in 2020 is based on content validity evidence
 - Establishment of content domain through practice analysis; reliance on subject matter experts and their judgment to determine item allocations, structure test development activities, build and review content, establish standards, etc.
- The JCNDE's National Board Examinations are all supported by content validity evidence.
- With respect to the DLOSCE, data will be collected at the time of administration, followed by subsequent scoring, standard setting, reporting, and then follow-up documentation (i.e., a technical report) to provide information on obtained psychometric properties, etc.
- The DLOSCE will be administered in a secure testing environment.
- The JCNDE is following established psychometric and test development procedures, and proceeding with appropriate deference shown to the guidelines provided in the Standards for Educational and Psychological Testing.
- Our modified approach is psychometrically defensible while also being sensitive to the great need currently present at a difficult time.



An Exam with a Similar Development Process

The Advanced Dental Admission Test (ADAT) was constructed in a similar manner in 2016. The graph below shows how results look today.

Frequency distribution for the ADAT Overall scale: 2016-2019 (1,688 administrations)





Twelve Steps for Test Development (Downing, 2006)

1. Planning	7. Test Administration
2. Content Definition	8. Test Scoring
3. Test Specifications	9. Standard Setting
4. Item Development	10. Reporting Test Results
5. Test Design and Assembly	11. Item Banking
6. Test Production	12. Technical Reports / Validation



Can OSCEs Currently be Found in Dental Licensure?

- The OSCE developed by the National Dental Examining Board (NDEB) of Canada provides an example of one possible approach.
 - Development is a critical activity undertaken by experts (mostly specialists).
 - Questions are selected by general practitioners to ensure clinical relevance.
 - Examination content is kept up to date each year through annual meetings involving careful examination of practice trends.
 - The OSCE is administered three (3) times per year (March, May, and November) in fixed testing windows.
 - Administrations include 50 physical stations with two questions each, plus rest stations.
 - Stations are focused and short (5-minutes), with a mix of station types/competencies evaluated.
 - NDEB Canada will transition to a "Virtual OSCE" in the near future.



What evidence supports Canada's OSCE?

- Gerrow, Murphy, Boyd, and Scott (2003) conducted a study to evaluate the concurrent validity of the NDEB Canada Written Examination and Objective Structured Clinical Examination (OSCE).
- Examination performance was correlated with student performance in the final year of the D.D.S./D.M.D. program.
- Research participants included 2,317 students at nine Canadian dental schools who completed both NDEB examinations between 1995 and 2000.
- Positive correlations were found between students' examination scores and final year results.
 - Written examination and final year results: (r=0.43, p<. 001)
 - OSCE and final year results: (r=0.46, p<. 001)
- Year-to-year and school-to-school variations were minimal.
- These findings supported the concurrent validity of both NDEB examinations.

Source: Gerrow, J.D., Murphy, H.J., Boyd, M.A., and Scott, D.A. (2003). Concurrent validity of written and OSCE components of the Canadian Dental Certification Examinations. Journal of Dental Education, 67 (8), 896-901.



What does the US DLOSCE cover?

- Focused exclusively on the clinical tasks a dentist performs while providing direct, chair-side treatment to patients.
- A "virtual OSCE" that assesses clinical judgment.
- Use of a "traditional manikin" hand skill assessment is not included.
- The DLOSCE is designed to reliably and accurately reflect the practice of clinical dentistry within the United States.
- The DLOSCE Working Committee has been engaged in content development activities since 2018.



What does the DLOSCE cover?

- Focal topic areas:
 - Restorative Dentistry (24%)
 - Prosthodontics (19%)
 - Oral Pathology, Pain Management, and TMD (13%)
 - Periodontics (10%)
 - Oral Surgery (9%)
 - Endodontics (8%)
 - Orthodontics (6%)
 - Medical Emergencies and Prescriptions (11%)
- Areas covered across topic areas include Diagnosis and Treatment Planning, as well as Occlusion.
- Each form of the DLOSCE must include content involving each of the following patient types: 1) pediatric, 2) geriatric, 3) special needs, 4) medically complex.



How will the JCNDE present questions?

- DLOSCE questions contain response options representing:
 - correct answers (partial credit)
 - clinical judgment errors
 - unscored choices
- Scoring contains some similarities with Situational Judgment Tests (SJTs).
- Questions require candidates to display depth and breadth of clinical judgment.

"Does the candidate think like a doctor?"

 The focus rests on what the candidate can do, emphasizing cognitive skills involving application/synthesis as opposed to simple recall.



Example DLOSCE Question Format

Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

Which describes the MO composite restoration on tooth 19?

- Acceptable
- Unacceptable interproximal contact
- Over-contoured proximal surface
- Under-contoured proximal surface
- Overhang present
- Cavosurface void present
- Hyperocclusion
- Exposed dentin present

3D Model

The candidate would be presented with a 3D model showing a MO composite restoration on tooth 19.

The candidate could manipulate the model (e.g., rotate, zoom) in order to view the restoration from multiple angles



How much will the DLOSCE cost and when will it be available?

- In light of COVID-19, the DLOSCE will be offered for a lower fee in 2020, to help students caught in a challenging circumstance.
 - In 2020: \$ 800
 - In 2021: \$1,650
- Administration will occur in testing windows as follows:
 - June 15 July 17, 2020
 - November 9 27, 2020
 - March 8 26, 2021
 - November 8 26, 2021
- Candidates may test once per window.
- Results will be reported within 4 weeks of the closing of each window.
- The JCNDE will monitor the situation and make adjustments as appropriate.



How will the DLOSCE be administered?

- The DLOSCE will be administered at select Prometric Test Centers throughout the US.
- Eligibility requirements and application procedures will mirror those in place for the NBDE.
- A DLOSCE Candidate Guide will be available in the next two weeks.
- The DLOSCE contains 150 questions and is administered in 6 hours and 45 minutes.

Examination Schedule			
Section	Minutes		
Tutorial (optional)	25		
Section 1 (37 Questions)	75		
Break (optional)	10		
Section 2 (37 Questions)	75		
Section 3 (2 Prescription Questions)	10		
Break (optional)	30		
Section 4 (37 Questions)	75		
Break (optional)	10		
Section 5 (37 Questions)	75		
Survey	20		
Total Time	6 hrs, 45 min		



How do the DLOSCE and INBDE differ?

- The DLOSCE and Integrated National Board Dental Examination (INBDE) both assess clinical skills (e.g., diagnosis and treatment planning, oral health management). However, key differences also exist:
 - The DLOSCE is focused exclusively on the clinical tasks a dentist performs while providing direct, chair-side treatment to patients.
 - Micro-judgments, errors and knowledge of success criteria, narrow focus
 - The INBDE focuses on cognitive skills.
 - The biomedical underpinnings of clinical decisions, broader focus that includes the "why"
 - Practice and profession considerations, evidence based dentistry, being good consumers of research, patient oral health care education



How do the DLOSCE and INBDE differ?

Examples of how the INBDE and DLOSCE conceptually differ:

INBDE Example	Corresponding DLOSCE Example
Understand basic principles of pharmacokinetics and pharmacodynamics for major classes of drugs and over-the-counter products to guide safe and effective treatment.	Review patient information and write an appropriate prescription.
Understand local and central mechanisms of pain modulation.	Identify the final needle position (point of insertion, angulation, and depth) immediately prior to injection that will best accomplish complete local anesthesia for a given procedure.
Understand dental material properties, biocompatibility, and performance, and the interaction among these in working with oral structures in health and disease.	Identify one or more flaws present in a metal-ceramic restoration.
Understand the principles and logic of epidemiology and the analysis of statistical data in the evaluation of oral disease risk, etiology, and prognosis.	No corresponding DLOSCE example. Epidemiology and statistics are not covered on the DLOSCE.



Official Release

- The JCNDE's DLOSCE blends elements of OSCEs and Situational Judgment Tests (SJTs) to help dental boards identify candidates who possess the sound clinical judgment that is necessary to safely begin practice.
- Ready for dental board use on June 15th (pending test center availability).
- Interested in the DLOSCE? Please let the JCNDE know!
 - Alix Katznelson (katznelsona@ada.org)



Additional Information

- The JCNDE and its DLOSCE Steering Committee will continue to provide updates to communities of interest.
- DLOSCE webinars:
 - Dental Boards Wednesday, April 22 3:00pm (CST)
 - Dental Students TBD
 - Dental Faculty TBD
 - Dental Societies TBD
- Dental board presentations upon request.
 - Alix Katznelson (katznelsona@ada.org)
- Updates are made available through the DLOSCE website:
 - ADA.org/DLOSCE



Thank you!



Q & A



Cataldo W. Leone, DMD, DMedSc, FACD, FICD Chair, JCNDE



William F. Robinson, DDS Commissioner, JCNDE



David M. Waldschmidt, Ph.D. Director, JCNDE



The Dental Licensure Objective Structured Clinical Examination (DLOSCE)

Webinar for Dental Students
May 19, 2020



Presenters



Cataldo W. Leone, DMD, DMedSc, FACD, FICD Chair, JCNDE



William F. Robinson, DDS Commissioner, JCNDE



David M. Waldschmidt, Ph.D. Director, JCNDE



Presentation Overview

- Background Information
- Examination Topic Areas
- Types of Questions
- Explanation of Scoring Rules
- Practice Questions and Exam Preparation
- Eligibility and Examination Fees
- Administration Schedule and Window Testing
- Retesting Policy
- Results Reporting
- Rules of Conduct, Irregularities, and Appeals
- Additional Information
- Q&A Session



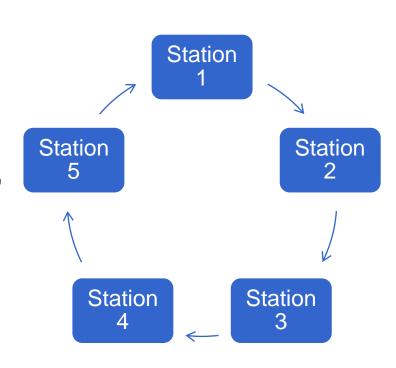
Why develop the DLOSCE?

- Gives dental boards the ability to identify those who lack the skills necessary for safe practice, using a professionally developed examination backed by strong validity evidence.
- Eliminates undesirable situations and complications that can arise from the use of patients in the examination process (e.g., patient's more pressing needs not treated in lieu of pursuing the "perfect lesion").
- Helps dental boards in their mission to protect the public.
- Allows for more objective measurement of candidate skills.



What is an Objective Structured Clinical Examination (OSCE)?

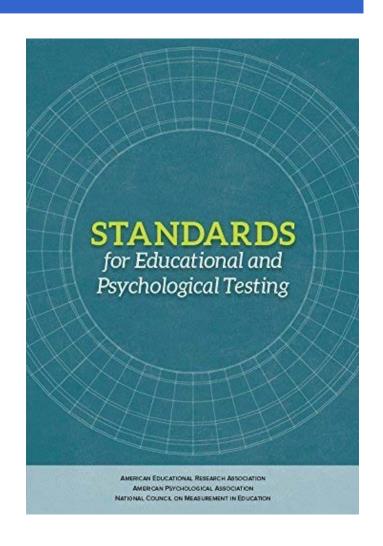
- A method of measurement
- Candidates rotate through short, standardized stations
- Assesses clinical competence, patient communication skills, knowledge of clinical procedures, prescription writing, etc.
- Widely used in the health sciences
- Success requires critical thinking
- OSCEs are evolving





The Standards for Educational and Psychological Testing

- The Standards were developed by the American Educational Research Association (AERA), American Psychological Association (APA), and the National Council on Measurement in Education (NCME).
- The Standards provide considerations for developing, implementing, and evaluating tests.
- The Standards and industry best practices help guide DTS activities as examinations are designed, constructed, and implemented.
- DTS' primary focus is on validity, the evidence that supports the interpretation and use of examination results.





What does the DLOSCE cover?

- Focused exclusively on the clinical tasks a dentist performs while providing direct, chair-side treatment to patients.
- A "virtual OSCE" that assesses clinical judgment.
- Use of a "traditional manikin" hand skill assessment is not included.
- The DLOSCE is designed to reliably and accurately reflect the practice of clinical dentistry within the United States.



What does the DLOSCE cover?

- Focal topic areas:
 - Restorative Dentistry (24%)
 - Prosthodontics (19%)
 - Oral Pathology, Pain Management, and TMD (13%)
 - Periodontics (10%)
 - Oral Surgery (9%)
 - Endodontics (8%)
 - Orthodontics (6%)
 - Medical Emergencies and Prescriptions (11%)
- Diagnosis and Treatment Planning—as well as Occlusion—are covered across the topics listed above.
- The DLOSCE includes questions involving patients of various types and backgrounds, including pediatric, geriatric, special needs, and medically complex patients.
- DLOSCE questions are modeled on dental clinical situations.



DLOSCE question presentation

- DLOSCE questions always include a patient.
- Questions are accompanied by information concerning that patient, including reference materials such as the following:

Patient Box	Provides patient demographic information (age, biological sex), the chief complaint, patient background and/or history, and the current findings.
Clinical Photographs	Photographs of patient conditions.
Radiographs	Radiographic images of patients' teeth.
3-D Models	A three-dimensional model of the patient's teeth, including restorations, lesions, etc.



Evaluation of candidate responses

- DLOSCE scoring contains similarities with Situational Judgment Tests (SJTs).
- Depending on the Question Type, each possible candidate response is evaluated as follows:
 - **Correct.** This represents a correct clinical judgment based on the available information. Depending on the question, candidates can receive either full credit (1 point) or partial credit for a given correct response, as long as they avoided choosing any incorrect responses for the question.
 - Clinical Judgment Error/Incorrect: This represents a clinical judgment error. Choosing this response causes the candidate to receive no credit (0 points) for this question, even if a Correct response was also selected.
 - **Unscored/Neutral:** This represents an indeterminate situation. These are situations—identified by dental subject matter experts—where given the available information a candidate's choice of this response is considered neither correct nor incorrect.



DLOSCE Question Types

- The DLOSCE contains three types of questions:
 - 1. Multiple-Choice, Single-Response Questions
 - 2. Multiple Choice, Multiple-Response Questions
 - 3. Prescription writing tasks

 An example of each type of question is provided in the slides that follow



Multiple-Choice, Single-Response Questions

- Multiple-Choice, Single-Response questions have only one correct answer and will only allow candidates to choose one response.
- To complete questions of this type, candidates should read the question and available responses, and choose the response that is the best answer.
- Responses other than the Correct response are considered Clinical Judgment Errors.
- Choosing the correct response gives candidates full credit (i.e., one point) for Multiple-Choice, Single-Response questions.
- The instructions provided for these questions are as follows:

Select the **ONE** correct answer.



Sample 1. Multiple-Choice, Single-Response



Select the **ONE** correct answer.

Orthodontic treatment for this 8-year-old patient should begin

- A. as soon as possible.
- B. after reassessment in 6 to 9 months.
- C. during late mixed dentition prior to the pubertal growth spurt.
- D. immediately following eruption of permanent second molars.
- E. after the patient stops growing.

Correct: A (full credit, 1 point)

Clinical Judgment Error/Incorrect: Selecting any response other than the Correct response causes the candidate to receive no credit (0 points) for this question

Content Classification: Orthodontics



Multiple-Choice, Multiple-Response Questions

Multiple-Choice, Multiple-Response questions can have one or more correct answers. For these questions, candidates may choose more than one response. To complete Multiple-Choice, Multiple-Response questions, candidates should read the question and available responses, and choose the response option(s) they believe to be correct.

Each question is worth up to one point. Each chosen response option can:

- give full credit for the question (i.e., 1 point)
- give partial credit for the question (e.g., 0.5 points)
- take away all possible credit for the question (i.e., a **Clinical Judgment Error**; no credit is given for the question, even if the candidate selected other options that were correct).
- neither give credit nor take away credit (a "neutral option")



Multiple-Choice, Multiple-Response Questions (continued)

Multiple-Choice, Multiple-Response (continued)

For questions involving responses that provide partial credit, candidates must identify all of the response options that provide partial credit in order to receive full credit (i.e., one point) for the question.

The instructions for Multiple-Choice, Multiple-Response questions are provided as follows:

Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

IMPORTANT NOTE: Candidates should think carefully when responding, so they identify the correct answer(s) while steering clear of any incorrect selection(s) that could result in the loss of all available credit for a question.



Example Scoring for Multiple Choice, Multiple Response with Partial Credit

In the hypothetical example shown below, there are two correct responses indicated in bold text: **Malignant tumor** and **Cyst or benign tumor**. There is one neutral response option indicated in italicized text: **Developmental condition**. The remaining responses are incorrect, and considered Clinical Judgment Errors. To earn full credit (i.e., 1 point), a candidate must select both of the correct responses <u>and</u> avoid selecting any of the incorrect responses. A candidate can earn partial credit—in this example a half point—by selecting only one of the correct responses (e.g., Malignant tumor) as long as they also avoid selecting any of the incorrect responses. A candidate who selects any incorrect response will automatically earn no credit for the question, even if they also select one or both of the correct responses. Candidates neither gain credit, nor lose credit for selecting the neutral response.

Clinical Image Would Appear Here

Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

What should be included in	a dit	ferential diagnosis?	Credit awarded if option chosen	Penalty: All credit lost for this question
	a.	Normal anatomical variant		X
	b.	Developmental condition		
	C.	Allergic or immune-mediated condition		X
	d.	Localized viral infection		X
	e.	Localized fungal infection		X
	f.	Localized bacterial infection		X
	g.	Traumatic lesion		X
	h.	Cyst or benign tumor	+ 0.5 pt	
	i.	Malignant tumor	+ 0.5 pt	

Total Possible Credit 1 point



Sample 2. Multiple-Choice, Multiple-Response



Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

Which tooth surfaces have carious lesions or defective restorations?

A. 8 mesial

B. 9 mesial

C. 9 distal

D. 10 mesial

Correct: A (partial credit, 0.5 points) and D (partial credit, 0.5 points)

Unscored/Neutral: None

Clinical Judgment Error/Incorrect: Selecting any response other than a "Correct" or "Unscored/Neutral" response causes the candidate to receive no credit (0 points) for this question, even if a Correct response was also selected.

Content Classification: Restorative Dentistry



Sample 3. Multiple-Choice, Multiple-Response

Patient

Female, 56 years old

Chief Complaint

"I have a bump on my gums"

Background and/or Patient History

Current Findings

Swelling in the lower right premolar area





See next slide.



Sample 3. Multiple-Choice, Multiple-Response (continued)

Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

Which should be included in a differential diagnosis?

- A. Normal anatomical variant
- B. Radiographic artifact
- C. Cyst or benign tumor
- D. Malignant tumor
- E. Odontogenic inflammatory condition
- F. Non-odontogenic inflammatory condition
- G. Reactive lesion (simple bone cyst, giant cell lesions)
- H. Fibro-osseous lesion
- I. Traumatic lesion/fracture
- J. Developmental condition
- K. Manifestation of systemic disease

Correct: C (partial credit, 0.5 points) and E (partial credit, 0.5 points)

Unscored/Neutral: G, H, and K

Clinical Judgment Error/Incorrect: Selecting any response other than a "Correct" or "Unscored/Neutral" response causes the candidate to receive no credit (0 points)

for this question, even if a Correct response was also selected. **Content Classification:** Oral Pathology, Pain Management, and

Temporomandibular Dysfunction



3-Dimensional Models

• Some DLOSCE items involve lifelike, three-dimensional (3-D) models that can be manipulated, zoomed in and out, moved, and rotated.





3-Dimensional Models, Example Format

Select **ONE OR MORE** correct answers. Any **INCORRECT** selections will result in your earning **NO CREDIT** for this question.

Which describes the MO composite restoration on tooth 19?

- Acceptable
- Unacceptable interproximal contact
- Over-contoured proximal surface
- Under-contoured proximal surface
- Overhang present
- Cavosurface void present
- Hyperocclusion
- Exposed dentin present

3-D Model

The candidate would be presented with a 3-D model showing an MO composite restoration on tooth 19.

The candidate could manipulate the model (e.g., rotate, zoom) in order to view the restoration from multiple angles



Prescription Tasks

- Each administered DLOSCE form contains two, multi-part prescription tasks:
 One pertaining to antibiotics and one pertaining to analgesics.
- For each task, patient information is presented in a Patient Box. Based on the information provided, candidates will be asked to choose an appropriate medication and its strength, and to provide any other accompanying instructions.
- Responses are evaluated against a detailed scoring key established by subject matter experts. Each prescription task is worth up to four points.
 Based on the combination of responses selected by the candidate, it is possible to receive no credit, partial credit or full credit for each prescription task.



Sample 4. Prescription Task

Patient

Male, 45 years old

Chief Complaint

"I feel terrible and my face has been swollen for a few days."

Background and/or Patient History

Has not been to a dentist for three years

Allergic to cloxacillin

Current Findings

Temperature of 101 degrees F Red, warm, diffuse swelling in the right cheek

Signs and symptoms consistent with a canine space infection

- 1. Select an appropriate medication to manage the infection.
- A. No medication
- B. acyclovir
- C. amoxicillin
- D. azithromycin
- E. cephalexin
- F. clarithromycin
- G. clindamycin
- H. cloxacillin
- I. doxycycline
- J. erythromycin
- K. fluconazole
- L. ketoconazole
- M. metronidazole
- N. nystatin
- O. penicillin VK
- P. valacyclovir

See next slide.



Sample 4. Prescription Task

Patient

Male, 45 years old

Chief Complaint

"I feel terrible and my face has been swollen for a few days."

Background and/or Patient History

Has not been to a dentist for three years
Allergic to cloxacillin

Current Findings

Temperature of 101 degrees F Red, warm, diffuse swelling in the right cheek

Signs and symptoms consistent with a canine space infection

2. Type in the strength of the tablet/capsule.

_____ mg

3. Type in the total number of tablets/capsules that should be obtained/dispensed.

.....

4a. Select the number of tablets/capsules that should be taken per administration.

- Α.
- B. 2
- C. 3
- D. 4

4b. Should the patient take a loading dose?

- A. yes
- B. no

See next slide.



Sample 4. Prescription Task

Patient

Male, 45 years old

Chief Complaint

"I feel terrible and my face has been swollen for a few days."

Background and/or Patient History

Has not been to a dentist for three years
Allergic to cloxacillin

Current Findings

Temperature of 101 degrees F Red, warm, diffuse swelling in the right cheek

Signs and symptoms consistent with a canine space infection

5. Select the frequency of administration

- A. once a day until finished
- B. once a day as needed
- C. twice a day until finished
- D. twice a day as needed
- E. three times a day until finished
- F. three time a day as needed
- G. four times a day until finished
- H. four times a day as needed

Scoring: Prescription task responses are evaluated against a scoring key established by subject matter experts. Based on the combination of responses selected by the candidate, it is possible to receive no credit, partial credit, or full credit (4 points)

Content Classification: Prescriptions



Exam Preparation and Resources

- The JCNDE recommends that candidates use clinical experience, textbooks, and lecture notes as primary sources for study.
 - The JCNDE does not endorse or recommend any specific texts or other teaching aids (e.g., review courses) that are identified as DLOSCE preparation materials.

Coming Soon

- **Practice Questions.** The JCNDE will provide practice questions to assist candidates in their preparations to challenge the DLOSCE.
- **3D Model Tutorial.** The DLOSCE contains questions involving lifelike three-dimensional (3D) models that can be manipulated, zoomed in and out, moved, and rotated. The JCNDE will make an online tutorial available, so that candidates can practice interacting with this 3D model before they arrive at the test center.
- DLOSCE Guide. The DLOSCE guide will be made available at ADA.org/DLOSCE



Who is eligible to take the DLOSCE?

- Eligibility requirements and application procedures mirror those in place for the NBDE.
 - Current Student CODA Accredited Program
 - A current student in a CODA accredited program is eligible for examination when the dean (or designee) provides confirmation that the student is prepared in all applicable disciplines.
 - Former Student CODA Accredited Program
 - A former student who has completed courses in preparation for this examination, but is
 no longer enrolled in the same program is eligible for examination only if admitted or
 conditionally admitted to another CODA-accredited program in the applicable area of
 study. Conditionally admitted is defined as admission contingent upon successful
 completion of this examination. Verification must be in the form of a letter from the dean
 of the CODA-accredited program.
 - Dentist Graduate of CODA Accredited Program
 - A dentist who is an active, life, or retired member of the American Dental Association at the time of application is eligible for examination without further documentation.
 - An affiliate member or nonmember must submit a copy of their diploma or provide other appropriate verification of their degree.



Who is eligible to take the DLOSCE?

Candidates trained in programs NOT accredited by CODA

General Provisions

 ALL candidates from non-accredited dental programs must have their educational degree confirmed through Educational Credential Evaluators Inc. (ECE). ECE prepares reports providing confirmation of candidate educational degrees earned in other countries.

Current Student – Non-CODA-Accredited Program

 A current student attending a non-CODA-accredited program must adhere to the General Provisions indicated above. Additionally, these students must have their status confirmed by their educational program, through the completion of the Certification of Eligibility form. Completed certification forms must be sent by the educational program and must include both the seal of the university and the signature of the dean or registrar.

Dentist – Graduate of a Non-CODA-Accredited Program

Candidates in this category must adhere to the General Provisions indicated above.



DLOSCE Fees

• In light of COVID-19, the JCNDE is offering the DLOSCE for a lower fee in 2020, to help students caught in a challenging circumstance.

- 2020 Fee: \$800

- 2021 Fee: \$1,650

FEE TYPE	DESCRIPTION	FEE AMOUNT
DLOSCE Fee	This fee includes official results reporting to the candidates and the dean of an accredited dental school. Reports are delivered electronically to dental schools through the DTS Hub.	\$800* * due to COVID-19, fee applies to 2020 applications only, The standard DLOSCE fee is \$1,650.
Processing Fee for International Candidates	This processing fee applies to candidates who are students or graduates of a dental school not in the United States or Canada.	\$210
Results Report Fee (optional)	This fee covers a single results report for a recipient NOT selected at the time of application.	\$45 per report
Results Audit Fee (optional)	DTS is willing to audit a candidate's results if the request is received within 30 days of the reporting date on the official results report.	\$65



DLOSCE Administration

- The DLOSCE is a computer-based test that is administered at select Prometric Test Centers throughout the US.
 - Test centers are currently limited, with preference given to states that have accepted the DLOSCE. Many students will need to travel.
 - DTS will post and update the list of available sites. Please review this list before applying.
 - Please be patient as DTS continues to work with Prometric to improve site availability.

The DLOSCE contains 150 questions and is administered in 6 hours and 45 minutes.

Examination Schedule		
Section	Minutes	
Tutorial (optional)	25	
Section 1 (37 Questions)	75	
Break (optional)	10	
Section 2 (37 Questions)	75	
Section 3 (2 Prescription Questions)	10	
Break (optional)	30	
Section 4 (37 Questions)	75	
Break (optional)	10	
Section 5 (37 Questions)	75	
Survey	20	
Total Time	6 hrs, 45 min	



DLOSCE Administration Dates and Retesting Policy

- The DLOSCE is administered in testing windows, with availability for 2020 as follows:
 - June 15 July 17, 2020
 - November 9 27, 2020
- The DLOSCE retest policy is as follows:
 - Candidates will be permitted to test once per testing window.
 - Candidates who have not passed the examination within five attempts or five years from their first attempt are limited to one examination attempt per 12-month period.
 - Candidates who have passed the DLOSCE may not retake the examination unless required by a dental board or relevant regulatory agency.



Results Reporting

- The DLOSCE is a criterion-referenced examination, with the minimum passing score determined by subject matter experts through rigorous standard-setting activities.
- DLOSCE results are reported as either "pass" or "fail." The status of "pass" is reported for candidates who achieve a scale score of 75 or higher. The status of "fail" is reported for candidates who achieve a scale score below 75. Scale scores are only reported to candidates who fail.
- DLOSCE results will be reported approximately four to five weeks after the close of the administration window. Results can be viewed online by logging into the My Account Summary page on ADA.org/JCNDE.



Rules of Conduct, Irregularities, Appeals

- The Joint Commissions' examinations inform dental board decisions that are intended to protect the public health.
- Rules of conduct govern DLOSCE administrations to ensure results accurately reflect candidates' skills. These rules mirror those in place for other examinations of the JCNDE.
- Test content (in whole or in part) is prohibited from being disclosed before, during, or after the test to anyone, including but not limited to family, friends, classmates, colleagues or test preparation organizations. This applies to any content disclosed through discussions, emails, in writing, online (e.g., blogs, social media, websites), or otherwise.
- Behavior that results in misconduct or irregularity in the examination process is a very serious matter. Violation of the rules of conduct or examination regulations may result in civil liability, voiding of examination results, or other appropriate penalties.



Additional Information

- DLOSCE webinars:
 - Dental Boards April 22, 2020
 - Dental Students May 19, 2020 4:00pm (Central)
 - Dental Educators May 21, 2020 4:00pm (Central)
 - Dental Societies TBD
- General DLOSCE questions (e.g., DLOSCE candidates)
 - dlosce@ada.org
- Updates on the DLOSCE are made available on the DLOSCE website:
 - ADA.org/DLOSCE
- The JCNDE and its DLOSCE Steering Committee will continue to provide updates to communities of interest.



Q & A



Cataldo W. Leone, DMD, DMedSc, FACD, FICD Chair, JCNDE



William F. Robinson, DDS Commissioner, JCNDE



David M. Waldschmidt, Ph.D. Director, JCNDE



Thank you!



STATEMENT OF SCOPE

Dentistry Examining Board

Rule No.:	DE 2
Relating to:	Approved testing services
Rule Type:	Both Permanent and Emergency

1. Finding/nature of emergency (Emergency Rule only):

The Joint Commission on National Dental Boards has a new clinical examination which does not utilize live patients or manikins. Marquette University has requested the Dentistry Examining Board remove the live patient or manikin requirement to allow its graduates to have a pathway to initial licensure in light of the difficulties of arranging for live patients in the current pandemic situation. A delay for new graduates receiving licensure due to lack of availability of patient-based licensure exams creates the inability for new dentists to begin practice in areas of the state experiencing a dentist shortage.

2. Detailed description of the objective of the proposed rule:

The proposed rule will remove the requirement for approval that a testing service must have all their clinical exams include a practical component utilizing live human patients or simulated patients.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Currently in order for a testing service be approved, all the exams testing clinical knowledge must include a practical component on application of the basic principles utilizing live human patients or simulated patients.

The Joint Commission on National Dental Boards has a new clinical examination which was designed to reliably and accurately reflect the practice of clinical dentistry without utilization of a live patient or manikin. This clinical exam is similar to other health profession clinical examinations which test clinical knowledge, skills and judgement without utilization of a live patient or manikin. This clinical exam assesses candidates' clinical judgement and skills using sophisticated 3-D models.

The Dentistry Examining Board is pursuing the emergency rule to allow recent graduates another option for a licensing examination. The Dentistry Examining Board will solicit comments during the public hearing process to determine whether to pursue a permanent rule to provide for this option beyond the emergency rule timeframe.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

15.08(5)(b) Each Examining Board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.

227.11 (2) (a) Each agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute, but a rule is not valid if the rule exceeds the bounds of correct interpretation...

[This rule interprets s. 447.04 (1) (a) 4. (Submits evidence satisfactory to the examining board that he or she has passed the national dental examination and the examination of a dental testing service approved Rev. 3/6/2012

by the examining board) by providing in rule the requirements for a dental testing service to meet in order to be considered approved by the Dentistry Examining Board.]

447.04 (1) (a) 6. Completes any other requirements established by the examining board by rule.

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

100 hours

6. List with description of all entities that may be affected by the proposed rule:

Dentist applicants, students and schools.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

None to minimal. This rule is not likely to have a significant economic impact on small businesses.

Contact Person:	n: Sharon Henes, Administrative Rules Coordinator, (608) 261-23		
Authorized Signature			
Date Submitted			

STATEMENT OF SCOPE

DENTISTRY EXAMINING BOARD

Rule No.:	DE 2
Relating to:	Temporary Licenses
Rule Type:	Both Permanent and Emergency

1. Finding/nature of emergency (Emergency Rule only):

Dental and dental hygiene testing services have delayed licensing exams due to the current pandemic situation. This is creating a delay for recent graduates of dental and dental hygiene programs from obtaining a license and beginning their practice. A delay for new graduates receiving licensure due to delayed licensure exams creates the inability for new dentists and dental hygienists to begin practice in areas of the state experiencing a dentistry services shortage.

2. Detailed description of the objective of the proposed rule:

The objective of the proposed rule is to create requirements for temporary licenses to practice dentistry and dental hygiene.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Current rules do not allow for temporary licenses to practice dentistry or dental hygiene.

Several health professions have temporary licenses to allow practice under supervision while waiting to take the licensure examinations. This proposed rule will create temporary dentist and dental hygiene license requirements.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

15.08(5)(b) Each Examining Board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.

447.02(1)(a) The Examining Board may promulgate rules governing the reexamination of an applicant who fails an examination specified in s. 447.04(1)(a)5. or (2)(a)5. The rules may specify additional educational requirements for those applicants and may specify the number of times an applicant may be examined.

447.02(1)(e) The Examining Board may promulgate rules providing for the granting of temporary licenses under this chapter.

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

100 hours

6. List with description of all entities that may be affected by the proposed rule:

Rev. 3/6/2012

Applicants for dentist or dental hygienist licensure.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:
None
8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):
None to minimal. This rule is not likely to have a significant economic impact on small businesses.
Contact Person: Sharon Henes, Administrative Rules Coordinator, (608) 261-2377
Authorized Signature
Date Submitted