THE EXAMINATION WILL BE ADMINISTERED AT THE UNIVERSITY OF DETROIT MERCY SCHOOL OF DENTISTRY

Be sure that you have submitted your examination application and appropriate fee to the Health Professions Licensing Division, Bureau of Health Care Services, Department of Licensing and Regulatory Affairs, prior to the deadline date of April 30, 2015 in order to be scheduled for the examination. If you have questions regarding the application process, you may call the Bureau at (517) 335-0918 or send an e-mail to BHCSHELP@michigan.gov.

If you have not received an application, you can obtain one at the following web site: www.michigan.gov/healthlicense.
INTRODUCTION:
The licensing examination for Periodontics is designed to measure the knowledge, skills and abilities deemed essential to protect the public’s health, safety and welfare.

EXAMINATION SITE:
The Periodontics examination will be given on June 1-2, 2015. After the Bureau has approved you to take the examination, an Admission Letter will be sent to you approximately two weeks prior to the examination. This document will specify the room to which you must report for the examination. You must be in the examination room prior to 8:15 a.m. on the first day.

The test center is located at the University of Detroit Mercy, School of Dentistry, Detroit, MI. Information regarding the location of the site as well as parking can be found at the back of this brochure. You should enter through the door that is immediately in front of you when you enter the visitor’s parking lot off Martin Luther King Jr Blvd (a sign will be posted on the door). When you enter the building, please let the receptionist know that you are attending the dental specialty examination and you will be directed to the Public Safety Command Center.

Please arrive at the site by no later than 8:00 AM as you will need to obtain a Visitor’s Badge that will permit you to enter the examination area as well as the elevators. You will need to leave your official school identification or some other piece of identification other than the identification you need to be admitted to the examination (see Admission Requirements) with Public Safety. IF you are a student at the school of dentistry and already have an ID badge, you do not need to sign in with Public Safety.

THE VISITOR’S BADGE MUST BE TURNED IN BEFORE YOU LEAVE THE FACILITY FOR THE DAY.

Once you have received your Visitor’s Badge, follow the signs to the examination area.
**EXAMINATION SCHEDULE:**

<table>
<thead>
<tr>
<th>DATE</th>
<th>TIME</th>
<th>PROCEDURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 1</td>
<td>8:15 A.M.</td>
<td>Candidates scheduled for oral examinations turn in cases for review</td>
</tr>
<tr>
<td></td>
<td>9:00 A.M.</td>
<td>Written Examination (2 ½ hours)</td>
</tr>
<tr>
<td></td>
<td>1:00 P.M.</td>
<td>Preparation for the Case Diagnosis section (3 ½ hours)</td>
</tr>
<tr>
<td>Day 2</td>
<td>8:30 A.M.</td>
<td>Individually scheduled Oral Examinations (2 ½ hours) You should be at the site ½ hour prior to your scheduled oral.</td>
</tr>
</tbody>
</table>

**NOTE:** This time frame may be modified depending upon the number of candidates scheduled for the examination. However, since any modification to the time schedule cannot be made until all candidates have arrived, you should plan on being at the examination site for both days.

**SPECIAL ACCOMMODATIONS:**
If you require special accommodations because of a disability, a letter that specifies the disability and requested accommodation(s) must be submitted to the Bureau of Health Care Services. A physician or other licensed professional qualified to diagnose and treat the disability must provide detailed documentation of the disability. Requests for accommodations must be received no later than April 30, 2015. Because of the time required to review documentation and the possible need for additional information, your request should be mailed as early as possible. A letter approving or denying your request will be sent following the review of the information submitted.

Submit your request and relevant documentation to:

Lucinda Clark  
Health Professions Licensing Division  
Bureau of Health Care Services  
MI Department of Licensing and Regulatory Affairs  
PO Box 30670  
Lansing, MI 48909
ADMISSION REQUIREMENTS:
In order to be admitted to the examination on each day, you MUST:

1. **BE ON TIME.** You will NOT be admitted to the examination after it has begun.

2. **PRESENT THE ADMISSION LETTER** that will be sent to you approximately two weeks prior to the examination. If you have not received an Admission Letter one week prior to the exam, call the Bureau of Health Care Services, Department of Licensing and Regulatory Affairs, at (517) 335-0918 or send an e-mail to bhcshelp@michigan.gov. If you do not have your Admission Letter, you may still be admitted to the examination provided that your name is included on the examination roster. If admitted, a substitute Admission Letter will be prepared for you at the time of check-in.

At the conclusion of the examination, your Admission Letter will be collected and retained. This letter serves as verification of your attendance at the examination. It is your responsibility to turn in your Admission Letter to the testing staff at the conclusion of the examination.

3. **PRESENT OFFICIAL SIGNED PHOTOGRAPHIC IDENTIFICATION.** Acceptable identification includes a valid Michigan driver license or another state issued driver license, Secretary of State Identification, passport, or government-issued identification. The identification presented MUST be an official document and include BOTH a photograph and signature. Without the required identification, you will not be permitted to take the examination.

If you do not present the required signed photographic identification or you are late to the scheduled examination section, you will NOT be allowed to take the examination/section and you will forfeit your examination fee. You will be required to submit a new examination application and fee for the next regularly scheduled administration.

**CANDIDATE ANONYMITY**
You will be assigned a unique candidate identification number that will be included on your Admission Letter. With the exception of the written examination, you should record **ONLY** your number on all examination materials to be scored. To maintain confidentiality, you should NOT introduce yourself by name to the examiners nor should you include your name, academic program, or hospital on the cases submitted.

**EXAMINATION CONDUCT**
No reference materials may be utilized during any part of this examination. Textbooks, notebooks, briefcases, large purses, pagers, cell phones, and beepers should NOT be brought to your seat. Neither the State nor the University will be responsible for any loss of items brought to the examination site.
Cheating is defined as any activity, behavior or procedure a candidate employs that would enable him/her to pass an examination by dishonest, fraudulent, or deceitful means. Examples of cheating would be, but are not limited to, obtaining answers from another candidate, copying from another person's answer sheet, using prepared notes during the examination, discussing the examination with others prior to completing the examination, referring to textbooks, informing other candidates of oral questions prior to their taking that section of the exam, or having someone take the examination for another individual.

Absolutely no copying of examination items is permitted. Anyone found removing, or attempting to remove, test materials or notes from the examination room may be denied licensure.

You will be required to sign a statement, at the time of the examination, agreeing to not divulge the contents of the examination.

MATERIALS TO BE BROUGHT TO THE EXAMINATION

You will need to supply the following items at the time of the examination:

1. A tape recorder and two (2) 90 minute cassette tapes OR a digital recorder with 180 minutes recording capability.
   - If you bring a tape recorder, the tapes will be retained at the conclusion of the oral examination.
   - If you bring a digital recorder with a removable SD card or other memory card, the card will be retained.
   - If you bring a digital recorder without removable memory, your recorder will be retained and returned to you with the recording erased from its memory when results are released. **You should provide a self-addressed, stamped box for returning the recorder.**
   - For all devices, you are encouraged to bring an external microphone to enhance recording quality.

   **Make certain that the recorder works properly.** You are responsible for the quality and clarity of the recording. If you fail the oral examination, you will not be permitted to review or appeal the results of your oral examination if
   - You fail to bring a recorder;
   - Your recorder does not operate properly;
   - You do not record the entire oral interview; or
   - Your responses are not audible.

2. Case Histories as described

3. Two #2 lead pencils for the written examination
CASE HISTORIES:

You must submit two (2) patient case histories that meet the specifications listed below. There are no exceptions to this requirement.

1. Generalized chronic or aggressive moderate to severe periodontitis as defined by Armitage GC, Ann Periodontal 1999; 4:1 -6.. Cases must be of sufficient complexity to test the diagnostic and therapeutic competence in periodontics. Patient selection must be based upon the extent of periodontal disease. Failure to meet these criteria of periodontal involvement cannot be compensated for by non-periodontal therapy.

2. Dental Implants: The use of dental implants in the treatment of cases submitted to the Board cannot replace the periodontal requirements for natural teeth. Dental implants may be used in addition to, but not in place of, other periodontal treatment of each patient. Dental implants in totally edentulous arches will not be accepted.

3. Inclusion of cases with extensive restorative dentistry, other orthodontic therapy, or other non-periodontal care is permissible, but is not necessary. Proper patient selection must be based upon the extent and severity of periodontal disease and not influenced by non-periodontal treatment, regardless of complexity.

4. Reports must be original periodontal cases diagnosed, treated and compiled by the candidate.

5. All periodontal treatment must be completed. In addition, hopeless teeth must have been extracted, periapical pathology resolved, and caries restored or temporized.

6. Pretreatment, presurgical and post-treatment charting must be neat, complete and follow the instructions supplied with the American Board of Periodontology Case Report Records. Records must show all charting. The charting must be presented in digital format (e.g., CD/flash drive) or paper.

7. Complete traditional or digital dental radiographs, including posterior "bite wings" using periapical sized films, are required for treatment. Following treatment, vertical bite wings (if posterior teeth are present) and other supplemental films to verify treatment results are required. Vertical bite wings enhance the diagnostic qualities of the radiographic survey.

All radiographs must be of diagnostic quality reproducing with proper contrast and densities the teeth and alveolar bone in anatomically correct relationships. All teeth, including third molars, must be shown in their entirety in at least one radiograph. All radiographs must be placed in suitable mounts. Radiographs taken during treatment may be included.
Original radiographs or duplicate radiographs (including those from digital) of a quality equal to those of good originals must be presented for review. All radiographs and photographs must be suitably mounted and/or displayed in an organized fashion for easy interpretation. The radiographs should be clearly labeled with the candidate’s identification number (provided on your admission letter) and the initials of the patient being presented.

Radiographs may be presented in one of the following manners:
- Memory stick or CD
- Slides
- Printed on proper glossy paper and of good diagnostic quality
- Mounted originals or duplicates of high quality analog

8. Pre- and Post-treatment photographs are required as follows:
   A. Three facial views, one showing anterior teeth and tissues and one each showing right and left posterior teeth and tissues.
   B. One palatal view showing teeth and tissues. If tissues cannot be represented adequately in one photograph, two or more photographs (either direct or mirror views) may be necessary.
   C. One mandibular occlusal view showing teeth and tissues. If tissues cannot be represented adequately in one photograph, two or more photographs (either direct or mirror views) may be necessary.
   D. A minimum of five (5) pre-treatment, five (5) post-treatment and five (5) surgical images are required.
   E. Teeth and tissues should be dried before taking photographs so that areas of importance are not obscured by saliva, blood or other matter. Photographs must be in sharp focus and of accurate color and density.

9. Color photographs illustrating at least one surgical operation must be included in each case. The surgical procedures should record:
   A. Flap design
   B. Flap elevation
   C. Bony architecture before and after surgical management
   D. Flaps sutured
   E. Post-operative images taken one to four weeks post-operatively

Photographs may be presented in one of the following manners:
- Digital format (memory stick or CD)
- Slides
- Printed on proper glossy paper and of good diagnostic quality

Each written case report should consist of a maximum of two 8½ x 11 inch typewritten, single-spaced pages.
For each of the case reports, summarize the following:

1. Pertinent medical history and findings relating to the patient. Include only the patient’s first name and last initial.
2. Pertinent extra- and intra-oral history and findings: clinical and radiographic
3. Diagnoses of extra- and intra-oral pathoses
4. Etiology of periodontal findings
5. Prognosis, short- and long-term for individual teeth and overall prognosis
6. Treatment plan and therapy performed
7. Evaluation of results
8. Maintenance program

Please number the cases for ease of reference during the examination.

The presentation should encompass all items required for the case report summaries in addition to photographs and radiographs. A preferred method of presentation is one binder containing both written case summaries and a digital device containing the presentation material (e.g., power point presentation) with all the data requested.

Your name and institutional identification must be deleted from all of the cases. Four (4) copies of the written summaries must be turned in on the first day of the examination at 8:15 A.M. If a digital device is used to present the required data, two (2) devices should be provided.

The examiners will initially review the cases for compliance with the previously listed requirements. If it is deemed that your cases do NOT comply with these requirements, you will NOT be allowed to proceed with Section II of the examination and will be scored as a failure for Section II of the examination.

NOTE: A report of a thesis project will NOT be accepted in lieu of a sufficient number of Patient Presentations.

EXAMINATION FORMAT
The examination is divided into two sections: Written Examination and Oral Examination.

I. Written Examination (2 ½ hours)

This portion of the examination will consist of 100 multiple-choice items and will include the following topics and approximate percentage of items per topic.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Periodontal Therapy</td>
<td>20 – 25%</td>
</tr>
<tr>
<td>Oral Pathology</td>
<td>3 – 5%</td>
</tr>
<tr>
<td>Pharmacology</td>
<td>8 – 10%</td>
</tr>
<tr>
<td>Physiology/Anatomy</td>
<td>3 – 5%</td>
</tr>
<tr>
<td>Pathology &amp; Radiology of Periodontal Disease</td>
<td>5 – 10%</td>
</tr>
</tbody>
</table>
Periosystemic Connection  
5 – 10%

Microbiology of Periodontal Disease  
3 – 5%

Implants  
15 – 20%

Periodontics/Endodontics  
3 – 5%

Periodontics/Orthodontics  
1 – 2%

Medically Compromised Patients  
5 – 10%

Occlusion/Tooth Mobility  
1 – 2%

Classification of Periodontal Disease  
1 – 2%

Your answers to the multiple-choice items MUST be given on the answer sheet that will be provided. All marks must be entered with a #2 lead pencil and must be DARK. Be sure that no stray marks appear on the answer sheet as they may be misread as answers. If you change an answer, make sure to erase the incorrect answer completely. It is best to answer all items, even if you are not sure of the answer. There is NO PENALTY for guessing. There is ONE BEST answer for each item.

The total number of points for the written examination section is 100.

NOTE: If you have passed the American Board of Periodontology written examination, you can waive the written portion of the Michigan examination. The American Board must submit a letter verifying passage of the American Board written examination to:

Health Professions Licensing Division, Application Unit  
Bureau of Health Care Services  
MI Department of Licensing and Regulatory Affairs  
PO Box 30670  
Lansing, MI 48909

II. ORAL EXAMINATIONS

This section of the examination must be recorded by you.

The oral examination consists of three parts: Case Histories, Case Analyses, and Oral Questions. You will be examined on an individual basis.

Case Histories
The examiners may select either or both of your cases for the questions they will ask during the orals. Both of your Case Histories will have been rated prior to the orals according to the following categories:

1. Medical history and findings (10 points)
2. Clinical and radiographic findings (10 points)
3. Diagnoses of oral pathoses (10 points)
4. Etiology of periodontal findings (10 points)
5. Prognosis (10 points)
6. Treatment plan and therapy performed (30 points)
7. Evaluation of results (10 points)
8. Maintenance program (10 points)

Each case will be evaluated in terms of documentation of the above categories.

Each case will be worth 100 possible points. Since there are two cases, a total of 200 possible points can be obtained for this portion of the examination per examiner. The scores of each of the examiners participating in the evaluation will be calculated and all of the examiners’ scores will be added together and averaged.

Case Analyses Oral
You will be presented with THREE CASES that you must evaluate and summarize. Records of the patients’ examinations will be supplied as part of the case materials. You will have three and one-half (3 ½) hours to review the cases and briefly record your analyses on a separate form. Some cases may not have complete information and in such situations you should use your best clinical judgment in evaluating the cases. You will be asked to develop “talking points” in the areas shown in the next paragraph. At the conclusion of the 3½ hours, your written analyses will be collected and then returned to you prior to the orals. During the orals, you will use your written analyses to discuss each of the three cases. The examiners will retain your written analyses at the conclusion of the interview.

Each of the analyzed cases will be worth 100 points. You will be evaluated on your discussion of:

1. Radiographic findings (10 points)
2. Diagnoses of oral pathoses (20 points)
3. Etiology of periodontal findings (10 points)
4. Prognosis for individual teeth and overall (10 points)
5. Treatment plan and alternatives (50 points)

Oral Questions
The examiners will have several prepared questions that will be asked of all candidates. Your responses to these questions, along with responses to questions relating to your Case Histories and Case Analyses, will be evaluated by the examiners.

The oral examination is scheduled for approximately two and one-half (2 ½) hours. You will be given 30 minutes to present each of the cases that you were required to analyze and 15 minutes to answer questions from the examiners regarding each presentation.

The remaining time will be used to discuss your case histories and for you to respond to general questions regarding Periodontics.

The scores of each of the examiners on each of the three parts (Case Histories, Case Analysis and Oral Questions) will be calculated and all of the examiners’ scores will be added together and averaged.
SCORING OF THE EXAMINATION
In order to pass the examination, you must receive a score of 75% in EACH of the two sections of the examination. Those sections in which you receive a score of LESS than 75% may be repeated once within an 18-month period. Should you not receive a 75% in each section during the second attempt, you will need to retake the entire examination.

The two sections are:

Section I - Written Examination
Section II - Case Histories, Case Analyses, and Oral Examination

The written examination will be machine scored. All other sections of the examination will be evaluated by at least two examiners. Each examiner will evaluate the sections independently and the final score for each section will be the average of all examiners' scores.

Your score(s) will be released in approximately six weeks following the last day of your examination. Results will NOT be provided over the phone nor will they be released to a third party unless you provide a signed written request to have the results submitted to a specific third party.

If you receive a score of PASS, this will be the only information available as to your success on the examination. Actual numeric scores are NOT available.

If you FAIL the examination, your numeric score will be shown and a breakdown of your performance on each section failed will be included to assist you in preparing for re-examination.

REVIEW OF FAILED EXAMINATION
Should you fail an examination section, you may request a personal review of the examination documents.

1. Complete the Request for Review form that will be included with your Notice of Failure and include a cashier’s check or money order in the amount of $50.00 made payable to the “State of Michigan.” Send the form and payment within thirty (30) calendar days of the date of the Notice of Failure to:

   Kate Shannon, MS
   4320 44th Street SW
   Suite 101
   Grandville, MI 49418
2. The review will be conducted in the Lansing area. The date of the review will be included with your Notice of Failure. The specific time and location will be provided following receipt of your Request for Review form.

3. The review will be limited to a sight review ONLY. You will have one-half the amount of time as originally provided for the administration of the failed section (i.e., if two hours were allocated for the administration of a section, you would have one hour for the review of that section). Notes made by you during the review may neither be removed from the room nor copied. Reference material may be brought to the review.

4. The review will be limited to the area(s) of failure ONLY.

5. At the conclusion of the review, you must decide whether or not you wish to appeal your results. If you decide to appeal, you may submit for consideration any information or documentation that pertains to the failed section(s) of the examination.

6. All questions, comments, and documentation made by you will be submitted to the Periodontics Examination Committee for review. The committee’s decision will be forwarded to the Michigan Board of Dentistry.

7. The Michigan Board of Dentistry will take action on the recommendation(s) presented.

8. Following the Board's decision, the Bureau of Health Care Services will notify you of the results of the appeal.
SUGGESTED REFERENCES

The following books, most recent journals and articles are presented to assist you in your preparation for the examination. An effort is made to use the most current edition of a textbook. The following list of references is suggestive and NOT ALL INCLUSIVE.

Ramfjord and Ash, Periodontology and Periodontics, W.B. Saunders Co.

Ramfjord and Ash, Occlusion, W. B. Saunders Co., Philadelphia

Lindhe, Textbook of Clinical Periodontology, Munksgard, Copenhagen

Goldman and Cohen, Periodontal Therapy, C. V. Mosby, Co., St. Louis

Prichard, Advanced Periodontal Disease, W. B. Saunders Co., Philadelphia

Carranza, Glickman's Clinical Periodontology, W. B. Saunders Co., Philadelphia

Grant, Stern and Everett, Orban's Periodontics, C. V. Mosby Co., St. Louis

Rose, Mealey and Genco. Periodontics: Medicine, surgery and Implants, Elsevier/Mosby Publishers

Baer and Benjamin, Periodontal Disease in Children and Adolescents, J. B. Lippencott, Co., Philadelphia

American Academy of Periodontology Position Papers

International Journal of Periodontics and Restorative Dentistry

Journal of Periodontology

Journal of Clinical Periodontics

Journal of the American Dental Association

Journal of Periodontal Research

Journal of Dental Research

Journal of Oral Microbiology and Immunology

Proceedings of the World Workshop in Clinical Periodontics, American Academy of Periodontology
Directions to
UNIVERSITY OF DETROIT MERCY
SCHOOL OF DENTISTRY
2700 Martin Luther King Jr. Boulevard
Detroit, MI 48208-2576

The School of Dentistry is located near downtown Detroit, one block east of I-96 Jeffries Freeway and within minutes of I-94, I-75, and the Lodge Freeway.

Driving Directions

- **From the Northwest, East and West:**
  From I-96 East/Jeffries Freeway, take exit 191 (US-12/ML King Jr. Blvd/Michigan Avenue). Turn left onto ML King Jr. Blvd/Myrtle St. Go one block; school is on your left.

- **From Downriver:**
  From I-96/Jeffries Freeway, take Michigan Ave/US-12 exit. Turn left onto Michigan Ave. Turn right onto Tillman St. Turn right onto ML King Jr. Blvd/Myrtle St. Make a U-turn onto ML King Jr. Blvd/Myrtle St.

Parking is available on the Dental School campus. You MUST park in the area labeled Patient Parking (shown on the next page). The entrance for the examination is in the building where the word “Dental” is shown on the next page (in the phrase Dental Clinic Building).
Anyone experiencing problems accessing their assigned parking area should contact Ms. Dana Hart at (313) 494-6621 or dana.hart@udmercy.edu as soon as possible. Parking assignments will be strictly enforced. Your cooperation helps to ensure adequate parking for patients and is greatly appreciated.