REGISTERED DENTAL ASSISTANT EXAMINATION BROCHURE

For Administration of Examinations BEGINNING

August 2017
GENERAL INFORMATION

The examination to become a Registered Dental Assistant is designed to test basic knowledge and skills. Only graduates of dental assisting accredited programs approved by the Michigan Board of Dentistry (program must be ADA approved) are eligible to take this examination.

SPECIAL ACCOMMODATIONS

If you require special testing accommodations because of a disability, you must submit a letter that indicates what your disability is and what type of accommodations you are requesting. In addition, we require that you send us a letter from a licensed health care provider that clearly states your diagnosis and includes copies of all supporting test findings and/or evaluations. In addition, you should send us documentation from your dental assisting program that describes what types of accommodations were provided to you during your education. These documents need to be submitted at the same time you send in this license application, if not earlier, to: LARA, Bureau of Professional Licensing, Attn: RDA Examination-ADA Request, P.O. Box 30670, Lansing, MI 48909.

EXAMINATION INFORMATION

The examination will be given in two parts. The Clinical portion of the exam will take no more than 2 hours to complete, with an additional 30 minutes for the Clinical orientation and exam set-up. You will have exactly 2 hours to complete the Clinical Examination once it begins. The Written portion of the exam will be given on the same day. You will have 2 hours to complete the Written Examination. Exact reporting times for each part of the examination the candidate is scheduled to take will appear on the examination admission letter.

In accordance with Departmental refund rules and policy, if you wish to withdraw from an examination for which you are scheduled, you must inform the Department IN WRITING. In order to receive a PARTIAL refund of the examination fee, your written request to withdraw from the examination must be received by the Department AT LEAST SEVEN (7) DAYS prior to your scheduled examination. After this time, the entire examination fee may be non-refundable if you fail to appear or are denied admission to the examination.
ADMISSION TO CLINICAL EXAMINATION

All candidates are required to appear at the designated site on time and in appropriate clinical attire. This includes scrubs, safety glasses, clinic appropriate shoes, gloves, and mask. The site coordinator has the authority to dismiss a candidate if the appropriate clinic attire is not worn.

Each candidate must present at the examination site:

1. one piece of official identification with the candidate's picture and signature,
2. the Examination Admission Letter sent to the candidate by the Michigan Board of Dentistry, and
3. Each candidate must bring his or her own required equipment and supplies.

ADMISSION TO WRITTEN EXAMINATION

Before admission to the Written Examination, each candidate must present:

1. one piece of Official Identification with the candidate's picture and signature, AND
2. the Examination Admission Letter sent to the candidate by the Michigan Board of Dentistry.
3. several sharpened #2 pencils to use for the written exam.

SCORING

The passing score on the Written Examination is 75%. Candidates who pass the examination will only receive a notice of “PASS”. A numeric score will not be provided. Candidates who fail the Written Exam will receive a numeric score and a breakdown of their performance to aid in preparing for re-examination.

Candidates taking the Clinical Examination will receive a score of either PASS or FAIL for each of the required skills (temporary crown, amalgam restoration). Each skill will be scored using the Evaluation Criteria listed in this brochure. If a candidate satisfactorily performs the required tasks for each skill, the candidate will pass the skill. If the required number of skills is satisfactorily performed, the candidate will pass the Clinical Examination.
**IRREGULARITIES**

No reference materials may be utilized during the Written Examination. A container for equipment and supplies may be brought to the Clinical Examination. Candidates may refer to this brochure during the clinical examination. In the case of cheating, observation of direct exchange of materials between candidates, the use of prohibited materials by the candidate, or proof that the person appearing is not the applicant, the person will be removed from the examination site, and the applicant may be denied licensure.

**RE-EXAMINATION**

In the case of failure or disqualification on any part or section of the examination, the candidate may re-apply to take the failed part or section at the next regularly scheduled Written or Clinical Examination. A re-examination application will be sent to the candidate. This application must be returned to the Board of Dentistry with the appropriate fee made payable to the “State of Michigan.”

Time allotments on re-exams for the Clinical Examination are as follows:

- Placement of Temporary Crown: 60 minutes
- Amalgam Restoration: 60 minutes

If you did not pass either the Temporary Crown or the Amalgam Restoration, a model will be available for you at your re-examination. However, the teeth that were used at the first examination will be removed and **you will be required to bring new teeth with you**. Please contact Viade for teeth. Please be sure to bring all teeth needed to evaluate proximal contact with adjacent teeth, the marginal ridge, and occlusion, if applicable.
MICHIGAN BOARD OF DENTISTRY RULES

R338.11241 - Registered dental assisting licensure candidate who fails the clinical or comprehensive examination twice; requirements before re-examination.

**Rule 1241**

1. Before being permitted to retake the clinical examination, a registered dental assisting licensure candidate who sustains two (2) successive failures in the clinical examination shall be required to meet both of the following requirements subsequent to the last examination failed:

   a. The candidate shall present evidence of additional education consisting of a minimum of twenty (20) hours of board-approved instruction, which shall be both didactic and clinical, in a school approved by the board.

   b. The course shall be satisfactorily completed as evidenced by certification by the dean or his or her appointee.

2. Before being permitted to retake the written examination, a registered dental assisting licensure candidate who sustains two (2) successive failures in the written section of the examination shall be required to meet both of the following requirements subsequent to the last examination failed:

   a. The candidate shall present evidence of additional education consisting of a minimum of twenty (20) hours of board-approved instruction in a school approved by the board.

   b. The course shall be satisfactorily completed as evidenced by certification by the dean or his or her appointee.

R338.11245 Registered dental assisting licensure candidate who fails the examination three (3) times; requirements before re-examination.

**Rule 1245** Before being permitted to retake the examination, a registered dental assisting licensure candidate who fails any part of the examination three (3) times, shall be required by the board to return to an accredited school for one (1) academic semester or term. The course of the one (1) academic semester or term shall be satisfactorily completed as evidenced by certification by the dean or his or her appointee.
CLINICAL EXAMINATION

The clinical part of the licensing examination is designed to test the competency of the candidate through performance criteria in basic skills. Candidates may refer to this brochure as needed during the clinical examination.

MODELS/CASTS

1. The candidate must use Model #3296 purchased from Viade Products for the clinical examination. It is also recommended that candidates purchase 1-2 extra prep teeth with the model.

2. The models must be ordered through Viade Products, 354 Dawson Drive, Camarillo, CA 93012. The phone number is 805-484-2114 or 805-484-4617; FAX number is 805-484-9285; and e-mail address is viade@aol.com.

   It is recommended that you contact your school program to purchase the specified model (#3296) in bulk. This will reduce the cost significantly. If ordered separately, the price per model will be around $100. If ordered in bulk, the price per model will be closer to $80. Additional prep teeth will cost about $2 each. Please contact Viade Products for exact ordering and price information. You must let them know that you need Model #3296.

3. The casts may be used pre-exam for practice purposes. However, the casts should be in their box in an unaltered condition when brought to the examination site or the candidate may be disqualified on this section of the examination.

4. Casts submitted for grading become the property of the State of Michigan and cannot be returned to candidates. If you do not pass the Temporary Crown or the Amalgam Restoration, a model will be available for you at your re-examination. However, the prepped teeth that were used at the first examination will be removed and you will be required to bring new teeth with you.
ADDITIONAL INFORMATION

1. Candidates are responsible for bringing their own supplies and materials. These may **NOT** be shared with any other candidate.

2. The candidate is to have the following ready and in view before the examiner checks the supplies and materials:
   a. Candidate Photo Identification (driver's license, etc.)
   b. Examination Admission Letter
   c. Models/Casts (out of box)
   d. Crowns - minimum of four (4) crowns suggested

3. Materials **MUST** be checked and initialed by the examiner prior to starting the exam (e.g., casts, crowns). Do **NOT** begin any procedure until the examiner has initialed the materials. Noncompliance with the above will result in a failure for the procedure. Both the maxillary and mandibular casts (as well as their storage box) must be marked with the candidate’s identification number. **Make sure your name is **NOT** written on the model or the box.**

4. Candidates may **NOT** wear nametags. Please cover any name that may appear on your clothing.

5. The candidate is not to carry on conversations with any other candidates.

6. The candidate is to remain in their assigned seat and may not walk around the testing site.

7. The candidate must leave the completed test materials at their assigned seat. Maxillary and mandibular casts should be wrapped and replaced in their box.
   
   Please mark the casts and box with your candidate identification number. Do not write your name on the casts or box.

8. The candidate must leave the cubicle or unit neat and clean. All products must be removed and properly disposed.
CRITERIA FOR PLACEMENT OF TEMPORARY CROWN

1. INSTRUMENTS AND SUPPLIES (each candidate must bring their own)
   a) mouth mirror
   b) explorer
   c) cotton forceps
   d) scissors - crown and collar
   e) spatula(s)
   f) temporary cements, acrylic resins
   g) glass slab and/or waxed pads
   h) gloves, masks, and glasses
   i) appropriate instruments for placing temporary crown
   j) acceptable selection of temporary crowns for prepared teeth
   k) Viade Products Model #3296
   l) If preparing an acrylic custom temporary crown, the candidate must bring the un-prepped #30 tooth and a Dremel® or similar battery operated rotary instrument.

2. SET-UP PROCEDURES
   a) The candidate identification number must be placed on the outside of the box and on both the mandibular and maxillary casts. A permanent marker will work on the casts.
   b) Casts and crowns must be out and available for the examiner's review before the candidate begins the procedure.
   c) The candidate will construct and place a temporary crown on the prepared tooth. The tooth must remain in the model during the fabrication. The correct size crown must be chosen or fabricated and the crown must be cemented onto the tooth with temporary cement.

   If the candidate chooses to construct an acrylic custom temporary crown, all aspects of the crown, including the preliminary impression, must be fabricated during the allotted examination time. The candidate must provide all necessary armamentarium.
   d) After the exam, the candidate will secure both casts in their box. The examiner will collect the casts.
3. EVALUATION CRITERIA

1) Proximal Contacts. There must be visual contact with the adjacent teeth. (Please note: The use of dental floss may cause an open contact that will be unacceptable.)

2) Crown Selection. Must fit mesiodistally. It is acceptable if the crown is too wide bucco-lingually. (Please note: The crown does not necessarily have to be a five-cusp crown, but must be a mandibular right molar crown with the buccal surface facing the cheek. Preformed, preformed with acrylic lining, and acrylic temporary crowns are all acceptable.)

3) Length of Margins. The crown margin must be at or no more than 1 mm occlusal to the margin of the preparation. Crowns extending apical to the margin are unacceptable.

4) Adaptation of Margins. The surface of the temporary crown and margin must be smooth and well adapted to the contour of the tooth. Contour must be established to approximate the original contour of the tooth.

5) Cement Line. Cement must be removed from the crown, the gingival area and the adjacent teeth. A cement line of no more than 1 mm is acceptable as long as it is free of voids.

6) Occlusion. The cast must be hand articulated in centric occlusion with the opposing arch.

The candidate must satisfactorily complete four (4) of the six (6) criteria listed above. Proximal Contacts, criterion 1, MUST be acceptable to pass the temporary crown section of the examination.

NOTE: FAILURE TO FOLLOW THE SET-UP PROCEDURES AND CRITERIA CAN RESULT IN AN AUTOMATIC FAILURE
CRITERIA FOR PLACEMENT OF CLASS II AMALGAM RESTORATION

1. INSTRUMENTS AND SUPPLIES (each candidate must bring their own)
   a) mouth mirror
   b) explorer
   c) cotton forceps
   d) gloves, masks, and glasses
   e) appropriate instruments and armamentarium for placing an amalgam restoration for a Class II cavity preparation
   f) Unidose amalgam capsules
   g) Viade Products Model #3296 Tooth #14 MO. Amalgamators will be provided and shared with other candidates at the exam

2. SET-UP PROCEDURES
   a) Make sure the casts and box are identified and available as specified in the other procedures.
   b) The candidate will place an amalgam restoration for a Class II cavity preparation.
   c) The candidate must secure both casts in their box. The examiner will collect the casts.

3. EVALUATION CRITERIA
   1) Contact. There must be visual contact with the adjacent tooth.
   2) Marginal Ridge. The marginal ridge must be the same height as the adjacent tooth and must be undamaged.
   3) Margins. There is no void or over-extension at the cavosurface margin between the restoration and the tooth.
   4) Contour. Contour must be established to approximate the original contour of the tooth.
   5) Surface. The surface of the restoration must be smooth.
   6) Occlusion. When models are articulated, the restoration must be carved to normal centric occlusion (detailed anatomy not required).

The candidate must satisfactorily perform four (4) out of the six (6) criteria listed above to pass this section of the examination. Contact, criterion 1, and Marginal Ridge, criterion 2 MUST be acceptable to pass the amalgam section of the examination.

NOTE: FAILURE TO FOLLOW THE SET-UP PROCEDURES AND CRITERIA CAN RESULT IN AN AUTOMATIC FAILURE
WRITTEN EXAMINATION

The Written Examination consists of approximately one hundred and twenty-four (124) test items/questions. You will be given two (2) hours to complete the exam. The test items evaluate the candidate’s knowledge in eight (8) categories. The candidate will be expected to have a basic knowledge of normal vs. abnormal conditions present in the oral cavity. This may include naming a condition from a description.

The following chart identifies the eight (8) categories, and the number of test questions assigned to each category. A more detailed description of the categories is available in the format of a task list. One may obtain this task list by making a written request to the following address: RDA Exam Information, Michigan Board of Dentistry, Attn: Testing Unit, P.O. Box 30670, Lansing, MI 48909. The request may also be faxed to 517-335-2044 or e-mailed to BPLHelp. The task list is also available on-line at www.michigan.gov/healthlicense under “Dentistry” and “Licensing Information”.

August 2017
### TEST SPECIFICATIONS FOR RDA WRITTEN EXAMINATION

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<tr>
<th>CATEGORY</th>
<th># OF QUESTIONS</th>
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<tbody>
<tr>
<td><strong>DATA COLLECTION &amp; RECORDING:</strong> Obtain &amp; record medical/dental history; Identify, describe &amp; chart soft tissue, teeth and related conditions; Diagnostic aids; Vital signs</td>
<td>15</td>
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<tr>
<td><strong>PATIENT MANAGEMENT, EDUCATION, &amp; COMMUNICATION:</strong> Pre/post treatment instructions; Oral health instructions; Answer patient questions</td>
<td>5</td>
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<tr>
<td><strong>PREVENTION OF DISEASE TRANSMISSION:</strong> Sterilization; Disinfection; Implement procedures to prevent disease transmission</td>
<td>6</td>
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<tr>
<td><strong>PREVENTION &amp; MANAGEMENT OF EMERGENCIES:</strong> Recognize patient signs, symptoms, &amp; conditions; Perform office emergency procedures; Assist in management of office emergencies</td>
<td>5</td>
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<tr>
<td><strong>OCCUPATIONAL SAFETY:</strong> Use safety measures when handling emergencies</td>
<td>5</td>
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<tr>
<td><strong>LEGAL ASPECTS OF DENTISTRY:</strong> Obtain &amp; document records; Maintain legal responsibilities; Prevent lawsuits; Maintain right to privacy; Recognize state dental law</td>
<td>9</td>
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<tr>
<td><strong>DENTAL RADIOGRAPHY:</strong> Expose &amp; evaluate films/radiographs; Process (both manual &amp; automatic); Mount &amp; label; Identify and chart anatomical structures &amp; questionable conditions; Principles of radiation protection &amp; safety for patient and operator</td>
<td>20</td>
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<tr>
<td><strong>INTRAORAL FUNCTION &amp; PROCEDURES:</strong> Dental dam - Select, place, &amp; remove; Topical fluoride - Select, prepare, apply, patient safety; Pit &amp; fissure sealant - Select, prepare, apply; Temporary intracoronal restorations - Select, prepare, place, finish, remove; Temporary crown restoration - Select, prepare, place, remove; Topical anesthetics - Select, prepare, apply, patient safety; Suture removal - Select, prepare, removal, tissue status; Periodontal dressing - Select, prepare, adapt, remove, tissue status; Orthodontic procedures; Chair-side dental procedures; Placing/packing non-epinephrine retraction cords; Taking final impressions for indirect restorations; tooth desensitization; Placing dental liners/cements/varnishes; Drying endodontic canals with absorbent points; Placing &amp; removing matrices &amp; wedges; Pulp vitality testing; Place, pack &amp; carve amalgam restorations</td>
<td>59</td>
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<tr>
<td><strong>TOTAL EXAM</strong></td>
<td>124</td>
</tr>
</tbody>
</table>
REFERENCES

The following suggested references are NOT intended to be all-inclusive.

Administrative Rules of the Board of Dentistry, promulgated under the authority of Act 368, P.A. 1978.

Ash, Major M. "Wheeler's Dental Anatomy, Physiology and Occlusion". Philadelphia; W.B. Saunders.


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Woodall, I. "Legal, Ethical and Management Aspects of the Dental Care System". C. V. Mosby Co.