



American Board of Operative Dentistry, Inc. Certification Program

Examination Instructions and Procedural Guide for the Certification Process

Introduction

The American Board of Operative Dentistry, Inc. was created in 1980 by the Academy of Operative Dentistry to elevate the science and practice of Operative Dentistry by conducting examinations to determine the proficiency of dentists who voluntarily apply to the Board for Certification.

A candidate who desires to pursue board certification may submit an application to the Secretary of the board. Current membership in the Academy of Operative Dentistry (AOD) is a prerequisite for application for board eligibility. The Secretary will transmit the application and related documents to the board's Committee on Candidate Eligibility and Credentials for evaluation. When the application is approved, the candidate becomes **board eligible** and the Secretary will inform the candidate of his/her status.

Board Eligible status begins on the date the application is approved and expires March 1st following the third anniversary of the approval. The candidate has until this expiration date to successfully complete the written examination, and an additional two (2) years (total of five [5] years) to complete all phases of the certification.

The Board Certification process consists of three examinations, or phases. Upon successfully completing all phases, the candidate achieves the status of **board certified**. This status is valid for seven (7) years, and will be maintained for subsequent seven-year periods so long as the candidate remains in good standing as a member of the American Board of Operative Dentistry, Inc. (ABOD) and the Academy of Operative Dentistry (AOD), as outlined in the ABOD by-laws. ABOD will issue a dated certificate designating the successful attainment of board certification, as well as subsequent recertifications.

Examination Information

The examination leading to certification will test the candidate's knowledge of operative dentistry and those allied supporting disciplines that make it possible to practice and teach operative dentistry with a high level of proficiency. The examination consists of three phases: written, clinical, and oral. *Successful completion of the written phase is a prerequisite to the clinical and oral phases.*

Phase I - Written Examination

General Information

The written examination is given annually in conjunction with the Academy of Operative Dentistry Annual Meeting in Chicago each February. Other regional sites and times of the year may be considered as candidates' needs warrant and examiners' schedules permit. The Chair of the Examination and Certification Committee will inform all board eligible candidates of the specific sites and dates for all examinations. The written examination contains approximately 400 multiple-choice and short answer questions. The examination is given on one day with six hours (two three-hour sessions) allocated to its completion.

Composition of the Written Examination

The written examination questions are based on operative dentistry knowledge, skills, and procedures that an operative dentist should know. The areas listed below are included in the examination; the approximate percentage of questions from each area is:

Operative Dentistry Procedures (Including approximately 3% - 5% historical in nature)	40%
Dental Materials	15%
Examination, Diagnosis, and Treatment Planning	15%
Caries Risk Assessment and Management	10%
Esthetics	10%
Other Disciplines Occlusion/TMD; Oral Pathology; Oral Medicine; Periodontics; Oral Microbiology; Oral Physiology; Pharmacology; Anatomy	10%

Scoring the Written Examination

The examination is graded on a pass or fail basis. Each question is of equal value and there is no added penalty for incorrect answers. To achieve a passing grade, candidates must answer 70% of the questions correctly. ABOD does not reveal candidates' specific scores.

Fees

The fee for the written examination is \$750.00 and is non-refundable. This fee must be paid directly to the ABOD Treasurer at least 30 days prior to the date of the examination.

Re-examination

A candidate may take the written examination a maximum of two times. A non-refundable re-examination fee of \$750.00 is required for each re-examination. If a candidate fails to pass the written examination twice, a formal request must be presented to the Chair of the Examination Committee and approved by the ABOD President before a third attempt will be considered. In no case will more than three attempts be permitted.

Phase II – Portfolio / Clinical Examination

General Information

Demonstration of clinical excellence has always been the cornerstone of the American Board of Operative Dentistry. To achieve board certification, candidates must demonstrate the ability to consistently perform clinical procedures at a level **significantly above** that which is typically required to establish “competency” for dental school graduation or state licensure.

ABOD now offers the Portfolio Examination as a substitute for the previous three-day Clinical Examination. Please keep in mind that the ABOD Examination Committee may periodically modify the procedural requirements as deemed appropriate to better assess candidate proficiency. All changes will be posted on the ABOD Facebook page and will apply immediately to all candidates, regardless of the requirements in place at the time of the candidate’s initial eligibility approval. Candidates should review the ABOD Facebook page and consult with the chair of the Examination Committee before submitting cases to ensure they have the most current information regarding the portfolio requirements.

Procedures to be Performed*

Candidates must perform each of the following restorations *and associated laboratory procedures*. Further details are provided in a separate document, available to eligible candidates upon request. Candidates are expected to complete all procedures independently without guidance or supervision (except as required by their University’s patient care parameters), just as they would for an in-person Clinical Examination.

* Candidates should expect that the ABOD Examination Committee may request additional information or documentation (including photographs and radiographs), and may require written answers to questions raised during the case evaluations, or perhaps an Oral Examination component (via Zoom) in conjunction with the Portfolio Examination, as deemed appropriate to better assess candidate proficiency. This examination will be separate from the Part III Case Presentation / Oral Examination.

1. Cast Gold MODBL Onlay or $\frac{3}{4}$ Crown Preparation and Wax Pattern

- This exercise should be completed on a dentoform.
- Cavity preparation will involve two proximal contacts and all four major cusps.
- **Specific tooth and preparation parameters will be determined by the Examination Committee and provided to individual candidates.**
- Wax-up must demonstrate restoration of appropriate proximal and occlusal contacts, contours, and anatomy.
- Wax pattern must be sprued appropriately and mounted in a casting sprue former.

2. Conservative Class II Resin Composite

- At least one proximal surface must radiographically demonstrate a virgin caries lesion.
- Tooth must be in occlusion prior to restoration.
- All restored proximal surfaces must demonstrate proper proximal contours and contacts.

3. Cuspal Coverage Amalgam

- Tooth to be restored must have occlusal contact (not with a denture).
- Restoration must restore at least one proximal contact and at least two cusps.
- All restored proximal surfaces must demonstrate proper proximal contours and contacts.
- Final restoration must exhibit appropriate occlusal contact, function, and anatomy.

4. Cuspal Coverage Indirect Restoration

- Tooth to be restored must have occlusal contact (not with a denture).
- Restoration must restore at least one proximal contact and at least two cusps.
- All restored proximal surfaces must demonstrate proper proximal contours and contacts.
- Final restoration must exhibit appropriate occlusal contact and function.
- Restorative material may be gold or ceramic.

5. Implant Restoration

- Restoration must restore at least one proximal contact and appropriate occlusal contacts with opposing teeth.
- Candidate is not required to place the implant, but must restore from implant level (i.e., implant abutment and final restoration).

6. Class IV Polychromatic Resin Composite – Maxillary Incisor

- Restoration must restore proximal and occlusal contacts and include at least $\frac{1}{2}$ of the mesial-distal dimension of the incisal edge.
- Any bleaching or restoration of adjacent teeth must be completed prior to restoration.
- At least three shades, tints, and/or color modifiers must be used.
- Candidate must submit a color map diagramming all shades and tints used.

Submission and Evaluation of Procedures

Candidates should notify the ABOD Examination Committee Chair when they are ready to submit their completed procedures for evaluation. All six procedures must be submitted together. Portfolios will be evaluated as expediently as possible. However, candidates should anticipate a minimum of three to six months, depending on availability of examiners, as well as the quality of their submissions.

Fees

The fee for the portfolio examination is \$1,000.00 and is non-refundable. This fee must be paid directly to the ABOD Treasurer prior to submission of the case documentation. The Examination Committee Chair, at his discretion, may defer the examination fee until the cases have been reviewed by the Examination Committee. Also, at the Chair's discretion, candidates may be permitted to re-submit cases (one re-submission for each failed procedure) at no additional fee.

Re-examination

Candidates who fail any procedure of the portfolio examination must re-submit that procedure. Candidates who fail more than three of the six procedures may, at the discretion of the Examination Committee, be required to repeat the entire portfolio examination. Candidates may take the portfolio examination a maximum of two times. A non-refundable re-examination fee of \$1,000.00 is required for each re-examination. If a candidate fails to pass the portfolio examination twice, a formal request must be presented to the Chair of the Examination Committee and approved by the President of the ABOD before a third attempt will be considered. In no case will more than three attempts be permitted.

Phase III - Oral Examination

General Information

The oral examination is based on cases presented to the Board. The questions will be related to the cases and any supporting information, as well as any operative dentistry-related topics deemed reasonable by the examiners. The candidate should be familiar with the current textbooks and refereed journals related to operative dentistry and supporting disciplines. The examination will be conducted and evaluated by a minimum of two (2) or three (3) examiners, all of whom will have reviewed the cases and accompanying documentation before the examination. The oral examination may be recorded for future reference; the recording becomes the property of the American Board of Operative Dentistry, Inc. All case documentation will be returned immediately to the candidate upon completion of the examination, but should be retained by the candidate for future reference. Most commonly, the oral examination is administered during the Academy of Operative Dentistry Annual Meeting in February of each year. In all cases, the oral examination must be successfully completed during the five-year board eligible time window. The oral examination will not exceed two hours in length.

General Requirements

In general, candidates must submit at least three cases. All cases must conform to the following requirements:

1. Only two of the submitted cases may have been initiated or completed during any formal residency or postgraduate program in which the candidate was ever enrolled. The third case must be initiated and completed entirely after completion of the candidate's residency or postgraduate program(s).
2. All restorative treatment must be performed by the candidate individually and independently. Supporting laboratory work may be performed by a technician.
3. All documentation required by the Board must be submitted as outlined below.
4. Each case submitted should have at least a 12-month post-treatment follow-up examination, including charting, radiographs, and photographs. Exemptions to this requirement may be petitioned in writing to the Chair of the Examination and Certification Committee, but are rarely granted.

Cases*

The cases submitted to the Board shall meet certain requirements. At least three cases must be submitted, although more may be required to demonstrate the desired level of proficiency. ABOD expects candidates to demonstrate expertise and **exceptional** clinical performance across the broad range of materials and techniques currently available. The following requirements for each case shall apply:

1. Each case should be primarily single tooth restorations, although each case may include fixed and removable prostheses involving natural teeth and/or implant fixtures.
2. Each of the first two cases should restore at least 12 teeth, not including pontics. Implant restorations will be considered, if completed by the candidate as part of the overall treatment plan.
3. One case should be restored primarily with indirect restorations (gold castings and ceramic restorations of any design), and should involve restoration of occlusion and/or anterior aesthetics.
4. One case should be restored primarily with direct restorations (amalgam and resin composite) and minor aesthetic restorations. Demonstration of multi-surface procedures, including restoration of posterior teeth incorporating appropriate proximal contacts and occlusion, as well as cuspal coverage, is expected.
5. The third case should restore maxillary anterior aesthetics (at least six teeth) using direct or indirect restorations, depending upon the composition of the two major cases. Candidates should consult with the Examination Committee Chair before embarking on the third case, as there is some latitude with its requirements. For example, if the two primary cases adequately demonstrate anterior aesthetics with both direct and indirect restorations, but lack a demonstration of cast gold, we may ask for a case with a number of cast gold restorations. Composition of the third case will be determined jointly by the candidate and the Examination Committee Chair. Failure to consult with the Examination Committee Chair may result in rejection of the third case.

* Please keep in mind that the ABOD Examination Committee may periodically modify the case requirements as deemed appropriate to better assess candidate proficiency. All changes will be posted on the ABOD Facebook page and will apply immediately to all candidates, regardless of the requirements in place at the time of the candidate's initial eligibility approval. Candidates should review the ABOD Facebook page and consult with the chair of the Examination Committee before submitting cases to ensure they have the most current information regarding the portfolio requirements.

Submission of Cases

To be eligible for the oral examination, candidates must submit all cases by a date prior to the examination that is mutually agreeable to the candidate and Chair of the Examination and Certification Committee (commonly, at least 10 – 12 weeks).

Documentation of Cases

All patient personal identification information in any documents submitted to the Board must be either removed or made illegible. The Board expects that documentation of the cases will be presented in a professional, organized, neat, and complete fashion, with all pages secured in a binder. The Board does not wish to dictate the exact forms to use or the style of presentation. It does, however, expect that, at a minimum, the following will be included in each presentation.

1. Cover Page
 - A. Candidate name and date submitted
 - B. List of restorations (by tooth number) placed by the candidate
2. Medical History
 - A. Health questionnaire or narrative
 - B. Interpretation of the findings
3. Dental History
 - A. Questionnaire or narrative of the personal and family history.
 - B. Chief complaint
 - C. Outline of previous treatment
4. Charting – pre- and post-treatment as appropriate
 - A. Missing teeth and existing restorations
 - B. Diseases and abnormalities
 - C. Complete periodontal charting
5. Diagnosis - including but not limited to the following
 - A. Occlusal analysis
 - B. Periodontal diagnosis
 - C. Missing teeth
 - D. Malocclusion
 - E. Dental caries
 - F. Erosive tooth wear
 - G. Inadequate restorations
 - H. Hypomineralizations
 - I. Esthetic concerns
 - J. Radiographic Interpretation

6. Treatment Plan - candidate's plan for treatment
 - A. Sequence of treatment - candidate's order of treatment
7. Clinical Photographs
 - A. Pre- and post-treatment color images
 - B. A minimum of five (5) views are required, which include:
 - 1) Anterior in occlusion, right in occlusion, left in occlusion
 - 2) Full maxillary occlusal, and full mandibular occlusal.
8. Radiographs - duplicates are acceptable if their quality is sufficient to depict the information recorded
 - A. Pre-treatment - complete radiographic survey
 - B. Post-treatment - complete radiographic survey, or bitewing and selected periapical radiographs, as needed to demonstrate restoration completion
9. Diagnostic Casts – with mounting rings to enable mounting on the candidate's articulator, which should be brought to the oral examination. These should be of high quality, cleanly finished, correctly trimmed, and carefully articulated.
 - A. Pre-treatment
 - B. Diagnostic wax-up if indicated
 - C. Post-treatment
10. Prognosis and Maintenance Plan – 12-month post-treatment follow-up
11. A 10- to 15-minute oral presentation of the cases in any format the candidate chooses will begin the oral defense of the cases. Excessive length of this presentation will result in penalties applied to the final score for the examination.

Acceptance of Cases

The Chair of the Examination and Certification Committee and at least one other ABOD member will evaluate the submitted cases for completeness and compliance with the requirements of the Board. Cases may be found to be "acceptable," in which no changes are required; "conditionally acceptable," in which additional information or corrections will need to be made or provided by the candidate before it is acceptable; or "unacceptable," in which case the candidate will have to submit a new case for the oral examination. There is no practical limit to the number of cases that may be submitted or required for this examination.

Evaluation Criteria and Scoring

The oral examination will consist of a brief presentation of the cases by the candidate, followed by questions related to the background and treatment of the patients presented in the required clinical cases, including factors such as clinical procedures, occlusion, materials, and techniques. In addition, the examiners may ask questions on any disciplines or topics that arise during the course of the examination. Through their responses, candidates should demonstrate a comprehensive understanding of operative dentistry and related disciplines. The oral examination will be scored as Pass or Fail. No numerical scores will be recorded or available. Candidates will be notified of their results as soon as possible after the examination.

Fees

The minimum fee for the oral examination is \$1,000.00 and is non-refundable. The fee may be adjusted due to specific examination circumstances and costs. This fee must be paid directly to the ABOD Treasurer when the cases are submitted to the Chair of the Examination and Certification Committee, but no later than 30 days prior to the date of the examination.

Re-examination

Candidates who do not pass the oral examination must repeat this phase of the examination. There is no limit as to the number of times this phase can be retaken, as long as it is successfully completed within the board eligible time window. However, candidates may be required to submit entirely new cases for re-examination of this phase. Candidates wishing to retake the oral examination should notify the Chair of the Examination and Certification Committee. A minimum re-examination fee of \$1,000.00 is required and is non-refundable.

Examination Correspondence

All correspondence related to payment of examination fees and general inquiries should be addressed to:
The American Board of Operative Dentistry Treasurer:

Dr. Kim E. Diefenderfer
k-diefen@comcast.net

Dr. Diefenderfer also serves as Chair of the Examination and Certification Committee for the American Board of Operative Dentistry. Questions relating directly to the examination process should be sent to him at the e-mail address listed above.