

# Overview of Regional and State Dental Hygiene Clinical Examinations

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American  
Dental  
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Association





Regional and state clinical dental hygiene examinations are administered to evaluate the clinical competency of candidates for dental hygiene licensure. Clinical examinations provide a reliable third party assessment of candidates' clinical skills and are used by state dental boards in making valid licensing decisions.

All exams consist of skill-specific patient treatment in a clinical setting. Additionally, some exams include a written or electronic patient-based component. Clinical licensure exams are administered at various times throughout the year at various host institutions.

This document was created by the American Dental Hygienists' Association (ADHA) to assist candidates for dental hygiene licensure by providing a general overview of regional and state clinical examinations required for licensure for the practice of dental hygiene.

Included in this Dental Hygiene Clinical Examination Summary are the regional testing agencies known as

- *Council of Interstate Testing Agencies (CITA),*
- *Central Regional Dental Testing Service (CRDTS),*
- *Commission on Dental Competency Assessments (CDCA)*
  - *Previously known as the North East Regional Board (NERB)*
- *Southern Regional Testing Agency (SRTA) and*
- *Western Regional Examining Board (WREB)*

This summary is intended for general comparison only. For specific exam protocol, procedure, requirements and forms, please refer to the complete Candidate's Manual for each examination or contact the agency responsible for the administration of the examination.



# Clinical Exams Accepted for State Licensure

## CITA

Alabama  
 Colorado  
 Illinois  
 Kansas  
**Kentucky**  
**Louisiana**  
 Maine  
 Massachusetts  
 Michigan  
 Mississippi  
 Missouri  
 Montana  
 Nebraska  
 New Hampshire  
 New Mexico  
**North Carolina**  
 North Dakota  
 Oregon  
 Pennsylvania  
**Texas**  
 Vermont  
 Virginia  
 Washington  
**West Virginia**  
 Wisconsin

## Independent

Delaware

## CRDTS

Alabama  
 Arizona  
 California  
 Colorado  
 Connecticut  
**District of Columbia**  
**Georgia**  
**Hawaii**  
**Idaho**  
**Illinois**  
 Indiana  
 Iowa  
**Kansas**  
**Kentucky**  
**Maine**  
**Maryland**  
**Massachusetts**  
 Michigan  
 Minnesota  
 Missouri  
 Montana  
 Nebraska  
 New Hampshire  
**New Jersey**  
**New Mexico**  
**North Dakota**  
 Ohio  
**Oregon**  
 Pennsylvania  
 Rhode Island  
**South Carolina**  
 South Dakota  
 Tennessee  
**Texas**  
**Utah**  
 Vermont  
 Virginia  
**Washington**  
 West Virginia  
 Wisconsin  
**Wyoming**

## CDCA

Connecticut  
 District of Columbia  
**Hawaii**  
 Illinois  
 Indiana  
 Maine  
**Maryland**  
**Massachusetts**  
**Michigan**  
**Nevada**  
**New Hampshire**  
**New Jersey**  
**New York**  
 Ohio  
**Oregon**  
**Pennsylvania**  
**Rhode Island**  
**Virginia**  
**Vermont**  
**West Virginia**  
**Wisconsin**

## SRTA

Alabama  
 Arkansas  
**Kentucky**  
**Mississippi**  
**South Carolina**  
**Tennessee**  
**Virginia**  
**West Virginia**

*The SRTA manual states that approximately 32 states recognize the SRTA dental hygiene examination results for initial licensure. Candidates should contact the state board where they wish to seek licensure to confirm.*

## WREB

**Alaska**  
**Arizona**  
 California  
 Colorado  
 Connecticut  
**Hawaii**  
**Idaho**  
**Illinois**  
 Indiana  
**Kansas**  
**Kentucky**  
**Maine**  
**Massachusetts**  
 Michigan  
 Minnesota  
**Missouri**  
**Montana**  
 Nebraska  
**Nevada**  
 New Hampshire  
**New Mexico**  
**North Dakota**  
 Ohio  
**Oklahoma**  
**Oregon**  
 Pennsylvania  
 Rhode Island  
 South Dakota  
 Tennessee  
**Texas**  
**Utah**  
 Vermont  
 Virginia  
**Washington**  
 West Virginia  
 Wisconsin  
**Wyoming**

States that are bolded indicate member states. Please note that recognizing jurisdictions and licensing requirements are subject to change. Additionally, certain examinations are only accepted within certain year periods. While this document is updated yearly, candidates are encouraged to contact the State Board where they wish to seek licensure to confirm information.

## Exam Schedules

### CITA

<http://www.citaexam.com/>

### CRDTS

<https://www.crdts.org>

### CDCA

<http://www.cdcaexams.org/>

### SRTA

<http://www.srta.org>

### WREB

<http://www.wreb.org>

## Fees

\$950.00

Plus site fees dependent  
on host institution

\$995.00

Potential site fees  
dependent on host  
institution

\$975.00 for Full Exam  
(Clinical AND Computer-  
Based Exam)

#### *Partial Exams:*

\$525 - Patient Clinical  
\$450 – Computer-Based  
Exam

\$140 - Local Anesthesia  
Computer-Based Exam

\$135 – Nitrous Oxide  
Computer-Based Exam

\$1000.00

Potential site fees  
dependent on host  
institution

\$750.00-875.00 Clinical  
Exam

#### *Local Anesthesia:*

\$285.00-350.00 - Clinical  
\$50.00 – Written Exam  
\$50.00 - Pearson VUE

\$500.00-\$530.00 –  
Restorative Exam

Plus site fees dependent  
on host institution

## Re-Examination Fees

All as indicated above

All as indicated above  
plus additional  
application fees

All as indicated above  
plus additional  
application fees

All as indicated above  
plus additional  
application fees

All as indicated above  
plus additional  
application fees

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## Liability Insurance

### CITA

Professional liability insurance coverage included in application fee.

### CRDTS

Professional liability insurance coverage included in application fee.

### CDCA

Professional liability insurance coverage included in application fee.

### SRTA

Professional liability insurance coverage included in application fee.

### WREB

Professional liability insurance coverage included in application fee.

## Application Requirements

Proof of graduation and transcripts from a Commission on Dental Accreditation (CODA) OR Commission on Dental Accreditation of Canada (CDAC) accredited dental hygiene program.

OR

Certification of Graduation Form from program director verifying candidate is sufficiently clinically competent, in good standing, and anticipated to fulfill school requirements within the school year. Candidates must also submit a Verification of Eligibility Form.

Proof of graduation from an accredited dental hygiene program.

OR

Letter of Certification completed by program director verifying anticipated graduation date within 60 days of examination

Confirmation of Training to Administer Local Anesthesia, if candidate intends to use local anesthetic.

Proof of graduation from a Commission on Dental Accreditation (CODA) OR Commission on Dental Accreditation of Canada (CDAC) accredited dental hygiene program.

OR

Written certification from Program Director verifying candidate is sufficiently prepared and expected graduation within 45 days of scheduled clinical exam.

Confirmation of Training to Administer Local Anesthesia, if candidate intends to use local anesthetic.

Proof of CPR Certification

Copy of candidate's diploma from a Commission on Dental Accreditation (CODA) accredited dental hygiene program.

OR

Letter from Program Director or Dean stating candidate is eligible, in the last semester, and anticipates graduation within 10 months of scheduled clinical exam.

Confirmation of Training to Administer Local Anesthesia, if candidate intends to use local anesthetic, included in previously described letter.

Proof of CPR Certification

An original letter (on school stationary), signed by the dean/director with the school seal affixed, indicating the candidate's projected dental hygiene graduation date or the degree earned.

OR

A copy of the candidate's Diploma or Official School Transcript indicating the dental hygiene degree earned.

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## Treatment Selection Requirements

### CITA

- Candidate must select 6-8 teeth upon which the candidate will designate twelve (12) surfaces of explorer-detectable subgingival calculus, plaque and stain for removal. No more than 4 surfaces may be on anterior teeth.
  - Three of these teeth must have a pocket of 4mm or greater.
  - Three of the teeth must be in posterior teeth; three of these posterior surfaces must be interproximal.
  - Selected teeth must have at least one approximating tooth within a 2mm distance.
- CITA prohibits:
- Ortho brackets or bonded retainers
  - Implants
  - Retained deciduous teeth

### CRDTS

- Candidate must select 6-10 teeth, including no more than 3 anteriors, with at least 12 surfaces of qualifying subgingival calculus, 6 of which must have at least 1 surface qualify.
- Of the 12 qualifying surfaces, at least 8 must be on posterior teeth, and of those, at least 3 surfaces must be on molars. No more than 4 surfaces can be on anterior teeth.

CRDTS prohibits:

- Grade III or IV furcations
- Grade III mobility
- Ortho/Invisalign brackets and/or bonded retainers
- Implants
- Partially erupted teeth
- Retained deciduous teeth

CRDTS discourages:

- Faulty restorations
- Gross caries
- Extensive veneer crowns
- Multiple probing depths >6mm

### CDCA

- Candidate must select 6-8 permanent teeth with 12 surfaces of subgingival calculus.
- 8 of the 12 must be on posteriors; 5 must be mesial or distal proximal surfaces. 3 interproximal surfaces must be on molars.
- All posterior teeth must be within 2mm distance each other.
- Selection must include three pockets of 4mm (+/- 1) in depth, each on a different tooth.

CDCA prohibits:

- Partially erupted 3<sup>rd</sup> molars
- Retained deciduous teeth
- Implants

CDCA discourages:

- Probing depths >6mm
- Class III furcations or mobility
- Advanced periodontal disease
- Ortho brackets
- Bonded retainers
- Faulty restorations
- Gross caries
- Extensive veneers

### SRTA

- Candidate must select one full quadrant and up to 4 additional teeth with a minimum of 12 surfaces of qualifying subgingival calculus.
- The selected quadrant must contain at least 6 natural teeth; at least one tooth in the quadrant must be a permanent molar with at least 1 proximal contact.
- Of the 12 surfaces, a maximum of 4 can be on anterior teeth; a minimum of 5 of the 8 required posterior deposits must be proximal and a minimum of 3 of those 5 must be on M or D molars.

SRTA discourages:

- Probing depths >6mm
- Class III furcations or mobility
- Advanced periodontal disease
- Ortho brackets
- Bonded retainers
- Faulty restorations
- Gross caries
- Extensive veneers
- Implants
- Partially erupted 3<sup>rd</sup> molars
- Retained primary teeth

### WREB

- Candidate must select one full quadrant and up to 4 additional teeth and at least 6 natural teeth.
- Selection must include a minimum of 12 surfaces of qualifying subgingival calculus.
- At least 3 of the 12 surfaces must be on molars; no more than 4 of the 12 may be on mandibular anteriors.

WREB prohibits these treatment selections:

- Probing depths >6mm
- Class III furcations; Class III mobility
- Ortho bands
- Overhanging margins; temporary or faulty subgingival restorations
- Gross caries
- Crowns with rough subgingival margins

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## Radiograph Component

<b><u>CITA</u></b>	<b><u>CRDTS</u></b>	<b><u>CDCA</u></b>	<b><u>SRTA</u></b>	<b><u>WREB</u></b>
Complete Mouth Series (exposed within 3 years)	Complete Mouth Series (exposed within 3 years)	Complete Mouth Series (exposed within 3 years)	Complete Mouth Series (exposed within 3 years)	Horizontal, vertical bite-wings, or panoramic posterior bitewings with anterior and posterior periapicals that include all teeth in treatment submission.
OR	OR	OR	OR	
A panoramic radiograph (exposed within 3 years)	A panoramic radiograph (exposed within 3 years)	A panoramic radiograph (exposed within 3 years)	A panoramic radiograph (exposed within 3 years)	Radiographs must be taken within 12 months; not necessarily exposed by candidate.
<i>IN ADDITION TO:</i>	<i>IN ADDITION TO:</i>	<i>IN ADDITION TO:</i>	<i>IN ADDITION TO:</i>	
4 bitewings (exposed within 1 year)	Horizontal or vertical bitewing survey of 2 to 4 films.	4 bitewings (exposed within 1 year)	4 bitewings (exposed within 1 year)	Radiographs are evaluated for diagnostic quality and technique.
Radiographs of poor diagnostic quality result in point deductions and could affect patient acceptability.	OR	Radiographs can result in point deductions if they are not diagnostic; furthermore, retakes of radiographs may be requested during the exam	Radiographs of the selected quadrant are reviewed for diagnostic quality.	
Radiographic technique is not being evaluated in this part of the examination.	Panoramic bitewing images (exposed within 1 year)		Radiographs of poor diagnostic quality will affect patient acceptability and can result in failure of the exam.	
	Radiographs are non-graded; however radiographs of poor diagnostic quality will affect patient acceptability.			

## Computer Component

No computer-based exam included.	No computer-based exam included.	100 multiple-choice, simulated patient questions - 2 hrs in length.	No computer-based exam included.	No computer-based exam included.
		Taken at Prometric Testing Centers by appointment.		

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## Administration of Local Anesthesia

<b><u>CITA</u></b>	<b><u>CRDTS</u></b>	<b><u>CDCA</u></b>	<b><u>SRTA</u></b>	<b><u>WREB</u></b>
<p>May use subgingival anesthetic gel or topical anesthetic only.</p>	<p>Admission of local anesthetic by candidate permitted as determined by each state practice act. Confirmation of local anesthesia training required.</p> <p>Qualified practitioner may administer local in lieu of candidate.</p> <p>A subgingival anesthetic gel may be used.</p>	<p>Admission of local anesthetic by candidate permitted as determined by each state practice act. Confirmation of local anesthesia training required.</p> <p>Not evaluated as part of the exam.</p>	<p>Admission of local anesthetic by candidates who have successfully completed a course on local anesthesia from a CODA accredited program is permitted. This should include whether the candidate has been trained in infiltration techniques only or in both block and infiltration.</p> <p>Qualified practitioner may administer local in lieu of candidate who is not qualified to administer.</p>	<p>Administration of local anesthetic by candidate is permitted. You must have one of the following: Submit original local anesthesia course certification form, provide proof of current licensure/certification, provide proof of passing WREB Clinical Local Anesthesia Exam, OR a letter from the state board where the exam is held. Qualified practitioner, as defined in candidate guide, may administer local in lieu of candidate.</p>

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## Exam Scoring

### CITA

Score of **75% or higher** each, required to pass:

Clinical Examination:

Calculus Detection: 90 pts

Subgingival  
Calculus Removal: 6 pts

Treatment  
Management: 4 pts

**TOTAL: 100 pts**

Penalty points may be assessed for:

- Treatment Selections that do not meet the described criteria
- Infection control infractions
- Patient management and treatment infractions
- Areas that do not meet the described criteria for case acceptance

### CRDTS

Score of **75% or higher** required to pass:

Clinical Examination:

Extra/Intraoral  
Assessment: 16pts

Periodontal Probing: 12pts

Scaling/Subgingival  
Calculus Removal: 60pts

Supragingival Deposit  
Removal: 12pts

**TOTAL: 100 pts**

Penalty points may be assessed for unacceptable Treatment Selections or a violation of Treatment Standards as defined in Candidates Guide.

A Critical Error of unprofessional conduct or time penalty will result in failure of the exam. Three *tissue trauma* errors will result in Critical Error.

### CDCA

Score of **75% or higher** each, required to pass:

Computer Simulated  
Clinical Examination  
(CSCE)

AND

Patient Treatment  
Clinical Examination  
(PTCE):

Calculus detection: 18pts

Calculus Removal: 54pts

Pocket Depth  
Measurement: 18pts

Hard and Soft Tissue  
Management: 10pts

**PTCE TOTAL: 100 pts**

Penalty point deductions are cumulative and may be assessed for violations of standards and behaviors as defined in Candidate's Manual.

### SRTA

Score of **75% or higher** required to pass:

Clinical Examination:  
Includes judgment and  
clinical skills

Case Presentation: 4pts

Calculus Requirements:  
5pts

Radiographs: 8pts

Calculus Detection: 18pts

Calculus Removal: 54pts

Minor tissue trauma: 3pts

Periodontal Assessment:  
6pts

Final Case Presentation:  
2pts

**TOTAL: 100 pts**

Major tissue trauma or a major infection control violation will result in automatic failure.

### WREB

Score of **75% or higher** required to pass:

Clinical Examination:

Probing Depths/  
Recession: 25 pts

Calculus Removal/  
Tissue Trauma: 75 pts

**TOTAL: 100 pts**

Penalty points may be assessed for:

- X-ray penalty
- Unacceptable patient selection
- Tissue trauma
- Calculus removal errors
- Inaccurate periodontal assessment
- Late patient check-in or check-out.

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## Contact Information

### CITA

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(919) 460-7750

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Website:  
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### CRDTS

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### CDCA

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Website:  
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### SRTA

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[www.srta.org](http://www.srta.org)

### WREB

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