Before paying for your examination registration, be sure you understand the contents of this bulletin. Please retain and use it as a reference when contacting PSI.

PSI licensure:certification
3210 E Tropicana
Las Vegas, NV 89121
www.psiexams.com

COMMONWEALTH of VIRGINIA
DEPARTMENT OF HEALTH PROFESSIONS
BOARD OF DENTISTRY

CANDIDATE INFORMATION BULLETIN

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Please refer to our website to check for the most updated information at www.psiexams.com

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EXAMINATIONS BY PSI

This candidate information bulletin provides you with general information about the testing procedure. The Board of Dentistry (The Board) offers this competency examination to assist its applicants and licensees in evaluating their understanding of the applicable laws and regulations.

The Board requires applicants to *attest* to having read, understood and to remain current with the laws and regulations governing the practice of dentistry and dental hygiene in the Commonwealth of Virginia. This attestation is required for licensure pursuant to the *Regulations Governing the Practice of Dentistry and Dental Hygiene* at 18 VAC 60-20-80.9. The Board also requires all dentists and dental hygienists to attest annually at the time of license renewal of having a current understanding of the laws and regulations governing the practice of dentistry and dental hygiene.

The Board has contracted with PSI to conduct its examination program. PSI works closely with the State to be certain that examinations meet local as well as national requirements in basic principles and examination development standards.

All questions and requests for information about the examination should be directed to PSI.

PSI licensure:certification
3210 E Tropicana * Las Vegas, NV * 89121
Examination Registration Number (800) 620-5802
Technical Support Number (702) 939 6780
Fax Number (702) 932-2666
www.psiexams.com

Both licensed and unlicensed candidates are eligible to take the examination.

If you are licensed in Virginia, you will need to provide your license number during registration.

VERY IMPORTANT: You must have read the Laws and Regulations before testing.

EXAMINATION REGISTRATION

FEE

The following table lists the applicable fee for the examination. The fee is for each registration, whether you are taking the examination for the first time or repeating.

You may take the examination as many times as necessary to obtain a passing score.

Upon valid registration, each test taker will receive an email granting on-line access to the examination. This access is valid for one year after which the test taker is required to re-register.

EXAMINATION FEE	
Examination Fee	$52

NOTE: REGISTRATION FEES ARE NEITHER REFUNDABLE OR TRANSFERABLE

TELEPHONE REGISTRATION

PSI registrars are available by phone, (800) 620-5802, Monday through Friday, between 7:00 am and 8:00 pm and Saturday, between 11:00 am and 5:00 pm, Eastern Time to handle your registration. For telephone registration, you will need a valid VISA or MasterCard.

1. Complete the Examination Registration Form, including your credit card number, expiration date, and card verification number, so that you will be prepared with all of the information needed to register by telephone.

You will receive an email with the link and PIN number to access the examination within 2 hours from the telephone registration.

FAX REGISTRATION

For Fax registration, you will need a valid VISA or MasterCard.

Complete the Examination Registration Form, including your credit card number and expiration date.

1. Fax the completed form to PSI (702) 932-2666. Fax registrations are accepted 24 hours a day.

2. If your information is incomplete or incorrect, it will be returned for correction.

You will receive an email with the link and PIN number to access the examination within 4 business days from the receipt of the fax.

STANDARD MAIL REGISTRATION

For mail registration, please follow the steps below.

1. Complete the Examination Registration Form. Mail the Registration Form and $52.00 to PSI. Payment of fees can be made by VISA, MasterCard, Money Order, or Cashier's Check only (made payable to PSI). **CASH, COMPANY CHECKS and PERSONAL CHECKS ARE NOT ACCEPTED.**

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BE SURE TO READ ALL DIRECTIONS CAREFULLY BEFORE COMPLETING THE EXAMINATION REGISTRATION FORMS. IMPROPERLY COMPLETED FORMS WILL BE RETURNED TO YOU UNPROCESSED.

If your application or fees are not correct, PSI will return them to you immediately with instructions on correct application procedures.

You will receive an email with the link and PIN number to access the examination within 2 weeks from the receipt of the mailed Registration Form.

REREGISTERING FOR AN EXAMINATION

If you need to reregister for another exam due to a failing score, you must complete and submit a new Examination Registration Form with the appropriate fee to PSI. You may pay with VISA, MasterCard, Cashier's Check, or Money Order (made payable to PSI). Cash and Personal and company checks are not accepted.

SOCIAL SECURITY NUMBER CONFIDENTIALITY

PSI will use your social security number only as an identification number in maintaining its records and reporting your examination scores to the state. A Federal law requires state agencies to collect and record the social security numbers of all professional licensees licensed by the state.

TECHNICAL ISSUES

You will be receiving an email with the link and key (PIN number) to access the examination.

After you have completed your examination, a score report will be mailed to you the following business day. You should receive your results within 7 days.

You can write to PSI to request a duplicate of your score report. The fee for a duplicate score report is $10. *Money Order, certified check, or cashier's check ONLY.*

If you encounter problems taking the Virginia Dental Examination, you may contact the PSI help desk at 1-702-939-6780, Monday through Friday, between 7:00 am and 8:00 pm and Saturday, between 11:00 am and 5:00 pm, Eastern Time. Alternatively, you may email PSI at techsupport@psionline.com. Please include your telephone number in the email. PSI will respond to your technical support email within 6 hours of receipt (during PSI help desk hours stated above).

EXAMINATION CONTENT OUTLINE

Effective December 14, 2007: When you voluntarily take and pass the Law examination, the Virginia Board of Dentistry will grant 3 hours of continuing education credit towards the continuing education requirement for renewal of a dental or dental hygiene license.

DENTAL EXAMINATION

VERY IMPORTANT: You must have read the Laws and Regulations before testing.

# of Questions	Minimum Passing Score	Time Allowed
50	40 (80%) Correct Answers	75 minutes

CONTENT OUTLINE

Topic	# of Items
Dentistry Chapter of the Code of Virginia (§54.1-2700 et seq	7
Public Participation Guidelines (18VAC60-11-10 et seq) and Regulations Governing the Practice of Dentistry and Dental Hygiene (18VAC60-20-10 et seq)	25
Virginia Drug Control Act (§54.1-3408 through 3411)	10
Additional Statutes Pertaining to Dentistry Patient Health Records (§32.1-127.1:03) Health Practitioner Intervention Program (§ 54.1-2515 et seq) General Powers & Duties of Health Regulatory Boards (§54.1-2400 et seq)	8

REFERENCE LIST

The following is a list of possible study materials for the Virginia Dental examination. These materials are available online at http://www.dhp.virginia.gov.

- Entire Dentistry Chapter §54.1-2700 et seq
- Entire Public Participation Guidelines 18VAC60-10-10 et seq
- Entire Regulations Governing the Practice of Dentistry and Dental Hygiene 18VAC60-20-10 et seq
- §54.1-3408 through §54.1-3411 of the Virginia Drug Control Act
- Entire Law on Patient Health Records §32.1-127.1:03
- Entire Health Practitioner Intervention Program Chapter §54.1-2515 et seq
- Entire General Provisions Chapter §54.1-2400 et seq

VIRGINIA DENTAL EXAMINATION
MAIL-IN OR FAX REGISTRATION FORM

Read the Candidate Information Bulletin before filling out this registration form. You must provide all information requested and submit the appropriate fee. PLEASE TYPE OR PRINT LEGIBLY. Registration forms that are incomplete, illegible, or not accompanied by the proper fee will be returned unprocessed. Registration fees are not refundable or transferable.

1. **Legal Name:** Last Name _____ First Name _____ M.I. ____

2. **Social Security:** ___ - __ - ____ *(FOR IDENTIFICATION PURPOSES ONLY)*

3. **License Number:** _____ *(REQUIRED FOR LICENSED CANDIDATES)*

4. **Mailing Address:** Number, Street _____ Apt/Ste ____

   City _____ State ____ Zip Code _____ - ____

5. **Telephone:** Home ___ ___ - ____ Office ___ ___ - ____

6. **Email (MANDATORY):** _____@_____

7. **Examination:** (Check One)

   ☐ Dental Examination $52

   ☐ FIRST TIME ☐ RETAKE

8. **Total Fee Included: $**_____ (VISA, MasterCard, Cashier's Check, or Money Order (made payable to PSI) only. Cash and Personal and company checks are not accepted.)

   Credit card (MasterCard or VISA) payment accepted for phone or fax registrations only. (Check One): MC VISA

   Card No:_____ Exp. Date:_____

   Card Verification No:_____ *For your security, PSI requires you to enter the card identification number located on your credit card. The card identification number is located on the back of the card and consists of the last three digits on the signature strip.*

   Cardholder Name (Print):_____ Signature:_____

9. **Affidavit:** *I certify that the information provided on this registration form (and/or telephonically to PSI) is correct. I have read and understand the examination information bulletin.*

Signature:_____ **Date:**_____

IF YOU ARE REGISTERING BY MAIL OR FAX, SIGN AND DATE THIS REGISTRATION FORM ON THE LINES PROVIDED.

Complete and forward this registration form with the applicable examination fee to:
PSI licensure:certification * ATTN: Examination Registration VA DENT
3210 E Tropicana Ave * Las Vegas * NV * 89121
Fax (702) 932-2666 * (800) 620-5802 * TTY (800) 735-2929
www.psiexams.com

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FIRST CLASS MAIL