

# CASE DEVELOPMENT GUIDE NATIONAL BOARD DENTAL HYGIENE EXAMINATIONS

January 2008

The Case Development Guide for Dental Hygiene is available on the ADA.org web site at http://www.ada.org/prof/ed/testing/construction/index.asp

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#### THE BASIC STRUCTURE OF THE NATIONAL BOARD DENTAL HYGIENE EXAM

The current National Board Dental Hygiene Examination (NBDHE) consists of 350 test questions. The discipline-based section (Component A) contains 200 items and the case-based section (Component B) includes 150 items based on 12 to 15 cases.

This *Guide* is meant to provide information to potential contributors of patient cases for the case-based component. For information concerning Component A, see the *Dental Hygiene Examination Specifications* published by the Joint Commission on National Dental Examinations.

#### THE CASE-BASED COMPONENT

Patient cases are included in the National Board Dental Hygiene Examinations because it is important to assess knowledge of the dental clinical disciplines as well as the ability to use this knowledge in solving patient problems. As such, case-based test items are interdisciplinary in nature. Hence, patient cases are designed to measure candidates' abilities to make appropriate judgments when faced with situations requiring the integration of biomedical and clinical dental sciences. Since the focus of every case scenario should be the patient, test items are centered on delivering quality care to that individual patient.

Each case should present as realistically as possible a situation that includes a patient, a set of conditions, and a complaint or problem. Conditions should model those encountered in dental offices, and problems should represent an area of dental hygiene practice taught in accredited dental hygiene schools. Cases should test knowledge of the more important concepts required to deliver competent dental hygiene care.

Each case is presented with a patient history, dental charts, radiographs, and clinical photographs, and photographs of casts, when appropriate. These materials are accompanied by 8 to 15 test items addressing one or more of the following procedures of dental hygiene care delivery:

- 1. Assessing patient characteristics
- 2. Obtaining and interpreting radiographs
- 3. Planning and managing dental hygiene care
- 4. Performing periodontal procedures
- 5. Using preventive agents
- 6. Providing supportive treatment services
- 7. Professional responsibility

Each case should be developed according to these major subdivisions of Section II of the traditional content outline; i.e., Provision of Clinical Dental Hygiene Services. The proportions allocated to each subdivision represent guidelines and are not specific requirements

It should be noted that test items on Community Dental Health (Section III of the Dental Hygiene Test Specifications are excluded in the case-based section because of the independent nature of such items. They are, however, included in the first section (Component A) of the examination.

#### **CATEGORIES OF PATIENTS**

Case-based questions are designed to address two categories of patients:

- 1. Adult 80 percent of cases
- 2. Child 20 percent of cases

Of the 150 test items included in the dental hygiene examination, at least 15 percent (2 cases) must address the medical management of compromised patients. A compromised patient is one whose health status may require modification of standard treatment or special consideration.

Each examination should contain at least one case for each of the following patient types:

- \* Geriatric
- \* Adult-Periodontal
- \* Pediatric
- \* Special needs
- \* Medically compromised

#### **COMPONENTS OF A CASE-BASED PROBLEM**

#### Patient Information

Patient information should include age, gender, relevant physical characteristics, vital signs, medical and dental histories, relevant social history, and chief complaint. The case must contain a dental chart including intra- and extraoral examination, hard tissue charting and a periodontal examination. Case materials should include radiographs that must be of diagnostic quality and free of technical errors, unless such errors serve an analytic purpose. Cases also contain intra and/or extraoral photographs (see next section for detailed requirements).

Cases may pertain to a patient's first visit, to a patient in the midst of treatment, or to a patient for whom treatment has been completed but who has returned with a possible complaint or for a maintenance visit. "Current Oral Hygiene Status" and "Supplemental Oral Examination Findings" may also be included. All information should be clear and concise. Cases should exclude irrelevant information.

#### Test Items

Test items should be developed for a case based on a treatment plan, which encompasses multiple disciplines. Each item must address the case and require candidates to select and use information from the case to answer it. Test construction committees strive to eliminate any case-independent items. The answer to one test item should not depend on knowing the correct answer to another question. At the same time, items should be presented in a sequence appropriate for the delivery of care to the patient described in the case. Thus, as treatment in the case proceeds, new information might be given in subsequent items to guide candidates in making decisions.

There may be more than one acceptable treatment plan for a specific case. However, there still should be only one correct answer to each item. This is done by stating in the item's stem what has been done in the treatment to precipitate the next step or by sequencing the items according to treatment plan procedures.

#### STANDARD ELEMENTS OF PATIENT CASE

All cases submitted to the Joint Commission for inclusion in the National Board Dental Hygiene Examinations must include the following:

- 1. A treatment plan that draws upon multiple disciplines
- 2. The potential for generating at least 8 multiple-choice items
- 3. Patient history (p8)
- 4. Dental chart (p9)
- 5. Radiographs\* (digitized files tiff format, 300-600 dpi preferred p10)
  - A. Complete series of good diagnostic quality, including:
    - \* 2 or preferably 4 bitewings
    - \* molar views of all quadrants
    - \* premolar/bicuspid views of all quadrants
    - \* canine/cuspid views for all quadrants
    - \* lateral incisor views for all quadrants
    - \* upper and lower central incisor views
  - B. Panoramic film, if available

- 6. Color slides or photographs\* (p11)
  - A. Intraoral and/or extraoral views, or specific oral structures
  - B. Slides of lesions or specific oral structures (for cases including oral pathology)
  - C. Photos of study models, if available

Photos should be clear with natural color and contrast, and free of extraneous elements, such as mirrors, retractors, instruments, and fingers.

#### Preferred views include:

- \* a full frontal view of both arches in centric occlusion
- \* right and left lateral views in centric occlusion
- \* a full occlusal view of the upper arch
- \* a full occlusal view of the lower arch
- \* other views, including close-ups of segments of a dental arch or quadrant, may be provided as long as appropriate views listed above are provided for orientation.
- \* The orientation (Left-Right) of radiographs and photographs must be clearly labeled.
- 7. Case tracking form (p13)
- 8. Confidentiality statement and Patient Release Form (p 17-18)

#### Standard Forms

Forms used by the Joint Commission on National Dental Examinations to record a patient history, adult clinical examination chart, and pediatric clinical examination chart are appended. More extensive descriptions of appropriate test items are included in the *Test Item Development Guide*, published by the Joint Commission on National Dental Examinations. These materials are available at www.ada.org.

Please submit all case materials to:

American Dental Association
Department of Testing Services - Test Development
211 East Chicago Avenue
Chicago, Illinois 60611-2678

Case materials may be sent in an electronic or hard copy format. For electronic files of radiographs and color photographs we request tiff or jpeg file format at 600 dpi. The patient history and dental chart should be done in MS Word. All radiographs and photographs must be oriented properly by marking them as Left Side, Right Side, or L to R or R to L.

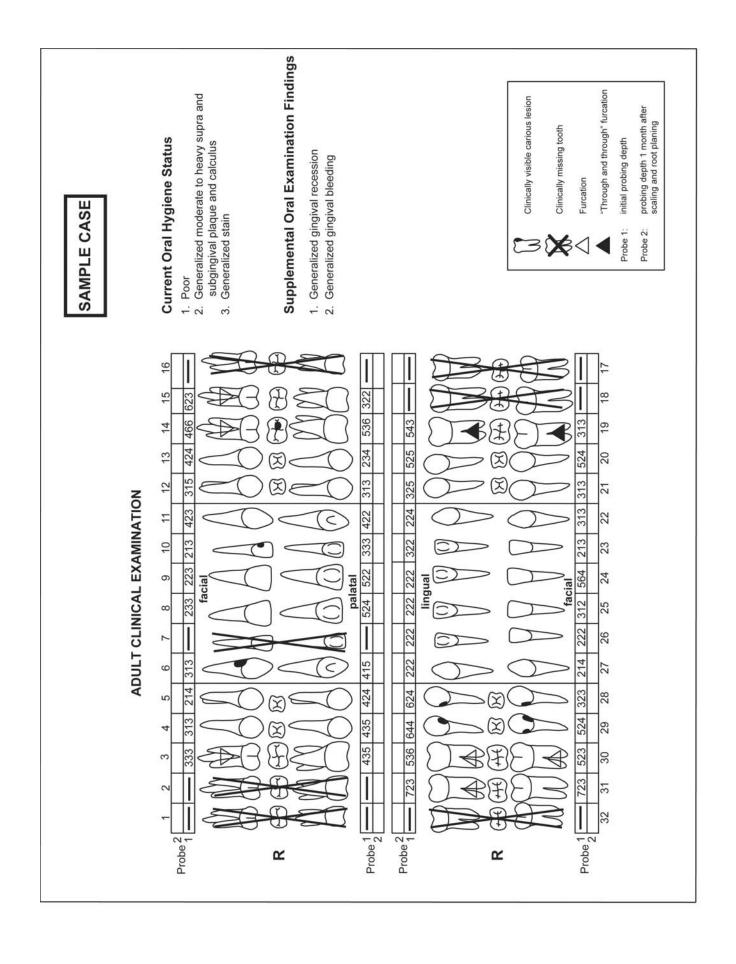
All submitted case materials are reviewed by the Case Selection Committee. If the committee determines that a case is suitable for use on the National Boards, an honorarium of \$500 will be sent to the case contributor. All original materials (photographs and radiographs) will be returned upon request.

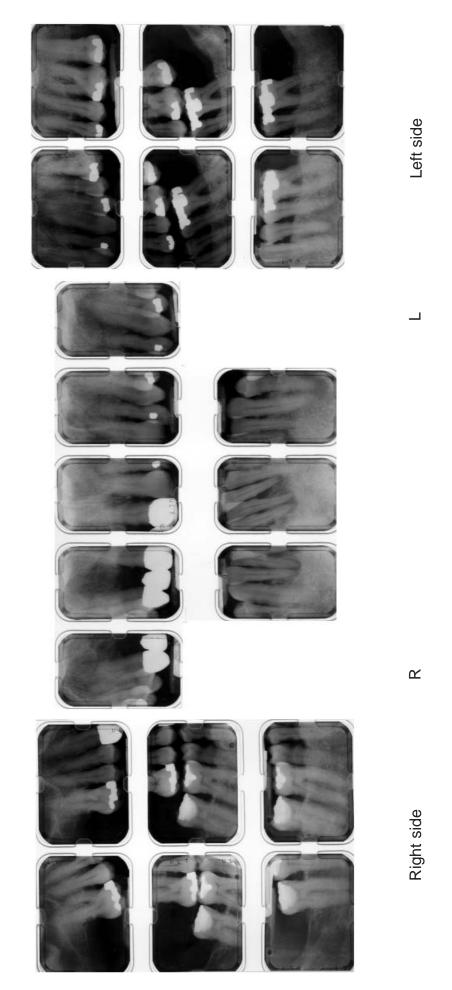
#### RESPONSIBILITY FOR TEST SECURITY

Any participation in examination development carries with it serious responsibilities relative to test security. This is especially true regarding high-stakes national examinations. The Department of Testing Services, American Dental Association, emphasizes its expectations of each case contributor in safeguarding the security and confidentially of the materials.

Each case contributor must be careful not to breach the security of test content through any activities associated with the case materials. A case contributor also may not contribute to a publisher's test review book regarding a case he/she has helped to develop, nor may he/she use these case materials in his/her own teaching or review sessions.

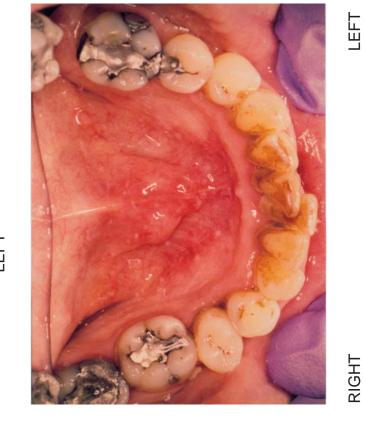
Age         63           Sex         K Mal           Height         6' 2"           Weight         215           B/P         136/8	VBS	The netion does not sook routing dental care visits
ght	2	His last visit was 2 years ago for an abcessed tooth.
ght	X Male ☐ Female	
ght	E.	
	215 <b>LBS</b>	
	136/80	
Chief "I hav	"I haven't been to the dentist for several years and I was encouraged to make an	
appo	appointment today. I have a loose tooth."	
Medical History		
The patient reports 6 years. In addition	The patient reports a history of diabetes for the past 6 years. In addition, his left carotid artery was blocked	Social History
requiring surgery 2 wasp stings.	requiring surgery 2 years ago. He is allergic to bee and wasp stings.	The patient is married and works as a truck driver, who is on the road for several days at a time. He smokes 5-10 cigars
		a day and does not exercise regularly. He admits ne has poor dietary habits.
Current Medications		
glyburide (DiaBeta®) 20 mg qd metformin HCI (Glucophage®) 500 mg atorvastin calcium (Lipitor®) 10mg qd aspirin 81 mg qd	glyburide (DiaBeta®) 20 mg qd metformin HCI (Glucophage®) 500 mg bid atorvastin calcium (Lipitor®) 10mg qd aspirin 81 mg qd	







LEFT RIGHT

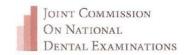


**MAXILLARY VIEW** 

RIGHT

LEFT

11



To: Potential Case Contributor for National Board Dental Examinations

From: Dr. Carol A. Vanek,

Manager, Test Development Department of Testing Services

Thank you for your interest in providing case materials for use in our National Board Dental Examinations. The document, *Case Development Guide*, is designed to assist you in the preparation of case materials. All forms and charts mentioned below are found in the *Case Development Guide* at <a href="www.ada.org/prof/ed/testing/construction/index.asp">www.ada.org/prof/ed/testing/construction/index.asp</a>. If you elect to submit case materials, the following components are required for each case:

- A complete series of radiographs, including bitewings, and a panoramic view, if possible
- Color photographs or slides, including intraoral and extraoral views, and photos of study models or other relevant case materials
- Patient history
- Dental chart
- Patient release form, if you do not have one; otherwise please send the signed patient release form used in your institution or office.
- Copyright statement
- Case tracking form

Our main objective is to secure complete case materials of good diagnostic quality representing typical patients. As much as possible we prefer pretreatment case materials. When we receive the case materials, our Case Selection Committee will evaluate their appropriateness and value for our National Board examinations. After a determination is made, remuneration will be processed at \$500/case, and upon request, original case materials will be returned.

Though we prefer original digitized images, the radiographs and photographs can be submitted either as hard copies or tiff files respectively at 300 - 600 dpi. The dental chart and patient history can be sent as MS Word files.

We thank you for your interest and time to assist us in our examination development. If you have any additional questions, please contact Jonathan Sprague, Coordinator of Test Development, at 800-621-8099, ext. 2706.

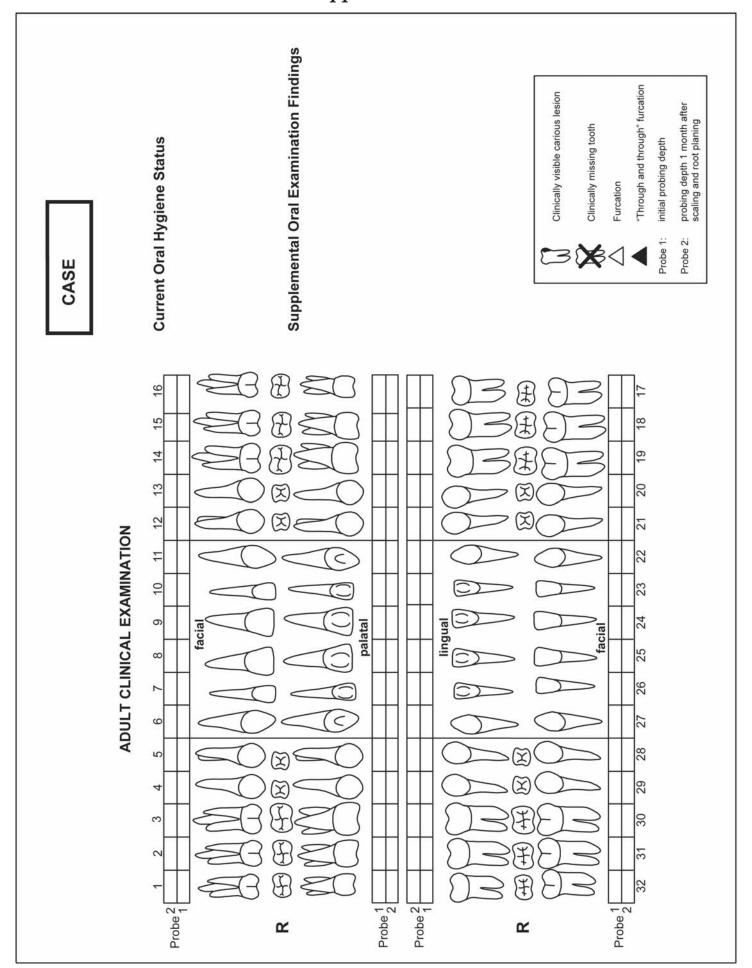
### Appendix A

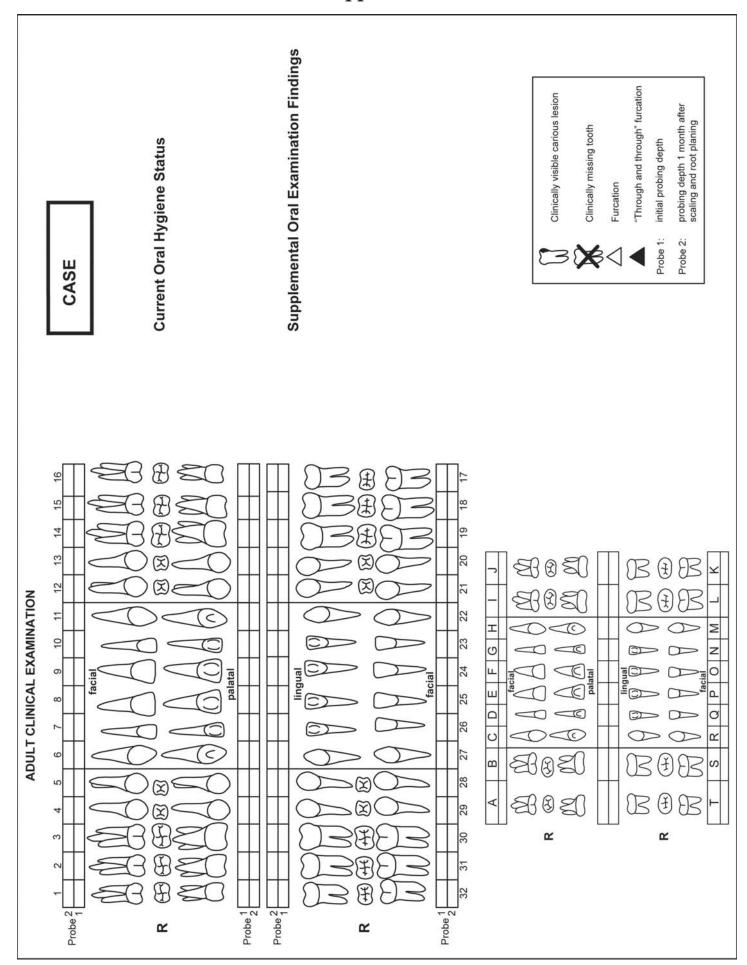
### NATIONAL BOARD DENTAL HYGIENE CASE MATERIALS TRACKING SHEET

Name:						
Date:			SSN#:			
Office Address:						
E-Mail:			Phone:_			
Directions: Plea medically comple endodontics, pe	romised case. riodontics, ora	If an adult ca al maxillofacial,	se, please ind	icate if the case Please indicat	e primarily foo	
Case Categories	Type of Case	No. of Radiographs	Panorex	No. of Photographs	Patient History	Dental Chart
Adult Periodontal						
Geriatric						
Medically Compromised						
Pediatric						
Special Needs						
Please return th	ese case mat	erials to me.	Yes 🔲 No 🔲			

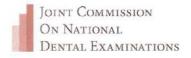
PLEASE RETURN THIS FORM WITH SUBMITTED CASE MATERIALS.
THANK YOU FOR YOUR CONTRIBUTION!

# Appendix B





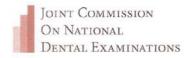
## Appendix D



# Copyright Assignment

The undersigned,	, whose address is
	is involved in a special project for the American Dental
individually and collectively Joint Commission on National to obtain and retain owner represents that any and all copies in whole or in partagrees that the American ship rights whatsoever in smaterials, and such materials, and such materials, and any and a	copyrighted or copyrightable materials. S/he acknowledges and agrees, y, that all such materials belong solely to the American Dental Association, onal Dental Examinations, and that the Association holds any and all rights ship of copyrights for such materials in its own name. The undersigned II contributions s/he makes to such materials will be original works, not of works of third parties. The undersigned hereby acknowledges and Dental Association is the sole owner of such materials, s/he has no owner-such materials, the Association has all rights to obtain copyrights for such itals constitute "work made for hire" under copyright laws. The undersigned II ownership rights s/he may have to the American Dental Association, and execute any additional documents necessary to effect this assignment to est.
Name (print clearly)	
Signed: Witness:	Date:

### Appendix E



### **AUTHORIZATION FOR THE RELEASE OF DENTAL RECORDS**

Signature	 Date
of this authorization will be received upon my r	request.
understand that this authorization is effective o	on the date signed below and that a copy
and personal identification information will not	be included with these records. I
These records will be used for purposes of edu	ucational assessment only. My name
relevant dental materials or appliances, dental	chart, and a brief medical/dental history.
radiographs, intraoral and extraoral photograph	ns - photos of dental casts and any
Association, Department of Testing Services.	The records will include copies of current
dental records of(patient's name)	to the American Dental
I hereby authorize (dentist/dental hygienist's	to release the information in the name)