## **Dental Licensure Requirements by State**

The American Dental Association (ADA)

March 2019

This document contains the requirements for each state for initial licensure as a dentist. The following professions may require additional requirements for licensure:

Dental Hygienist Specialty Areas of Dentistry: *Endodontics Pediatrics Restorative Oral medicine Surgery* 

## Alabama

Board of Dental Examiners 5346 Stadium Trace Parkway, Ste. 112 Hoover, AL 35244

Phone: (205) 985-7267

#### Alabama Requirements

#### **Initial Licensure:**

Alabama "only accept[s] regional dental examinations for initial dental licensure by regional exam that include a periodontal examination section conducted on a live patient and a prosthodontic examination section that includes preparation of abutment teeth on a manikin for a fixed prosthesis wherein the bridge draw is evaluated. The Board will make an exception to this requirement for any examination taken and passed before August 1, 2012, as long as no more than five (5) years has passed since the taking of said examination."

Please visit **Board of Dental Examiners** for more information.

## Alaska

Alaska Board of Dental Examiners

Licensing Department

550 W 7<sup>th</sup> AVE, STE 1500

Anchorage, AK 99501-3567

Phone: (907) 465-2542

Contact: BoardofDentalExaminers@Alaska.Gov

#### Alaska Requirements

#### Sec. 08.32.014. Qualifications for license.

An applicant for a license to practice dental hygiene shall

- provide evidence to the board that the applicant
  - has successfully completed an academic program in dental hygiene of at least two years duration that, at the time of graduation, is accredited by the Commission on Dental Accreditation of the American Dental Association and is approved by the board;
  - has passed a written theory examination of the American Dental Association Joint Commission on National Dental Examinations or an equivalent examination approved by the board;
  - has successfully passed a state or regional dental hygiene clinical examination approved by the board;
  - has not had a license to practice dental hygiene revoked, suspended, or voluntarily surrendered in this state or another state;
  - is not the subject of an adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding within the five years immediately preceding application or of an unresolved complaint, investigation, review procedure, or other disciplinary proceeding undertaken by a state, territorial, local, or federal dental licensing jurisdiction;
  - is not the subject of an unresolved or adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding undertaken by a state, territorial, local, or federal dental licensing jurisdiction or law enforcement agency that relates to criminal or fraudulent activity, dental malpractice, or negligent dental care and that adversely reflects on the applicant's ability or

competence to practice as a dental hygienist or on the safety or well-being of patients;

- is not the subject of an adverse report from the National Practitioner Data Bank or the American Association of Dental Boards Clearinghouse for Board Actions that relates to criminal or fraudulent activity or dental malpractice;
- is not impaired to an extent that affects the applicant's ability to practice as a dental hygienist;
- has not been convicted of a crime that adversely reflects on the applicant's ability or competency to practice as a dental hygienist or that jeopardizes the safety or well-being of a patient; and
- meet the other qualifications for a license established by the board by regulation.
  - An applicant for a license to practice dental hygiene may be interviewed in person by the board or a designee of the board. The interview must be recorded. If the application is denied on the basis of the interview, the denial shall be stated in writing, with the reasons for it, and the record shall be preserved.

Please visit **Board of Dental Examiners** for more information.

## Arizona

Arizona State Board of Dental Examiners

1740 W Adams Suite 2470

Phoenix, AZ 85007

Phone: (602) 242-1492

#### Arizona Requirements

32-1232. Qualifications of applicant; application; fee; fingerprint clearance card

- An applicant for licensure shall be of good moral character, shall meet the requirements of section 32-1233 and shall hold a diploma conferring a degree of doctor of dental medicine or doctor of dental surgery from a recognized dental school.
- Each candidate shall submit a written application to the board accompanied by a nonrefundable Arizona dental jurisprudence examination fee of three hundred dollars. The board shall waive this fee for candidates who are holders of valid restricted permits. Each candidate shall also obtain a valid fingerprint clearance card issued pursuant to section 41-1758.03.

An applicant for licensure shall have passed all of the following:

- The written national dental board examinations.
- The western regional examining board examination or a clinical examination administered by another state or regional testing agency in the United States within five years preceding filing the application.
- The Arizona dental jurisprudence examination.

Please visit Arizona State Board of Dental for more information.

## Arkansas

Arkansas State Board of Dental Examiners

101 East Capitol Avenue, Suite 111

Little Rock, AR 72201

Phone (501) 682-2085

#### Arkansas Requirements

#### Licensure by Examination

A dentist who has been licensed and practicing for less than five (5) years, and desires to practice dentistry in the State of Arkansas, may apply to the Arkansas State Board of Dental Examiners for a license to practice pursuant to the following requirements:

- Completion of a Board application with photograph taken within the last six months, signed on the last page. A fee of \$150 (check or money order) must accompany the application.
- Be a graduate of a school for the education and training of dentists approved by the Board and accredited by the American Dental Association's Commission on Dental Accreditation.

**TRANSCRIPT**: You must request and authorize the school to provide the Board with an official transcript with the school's seal and awarding of a degree from the school of dentistry which issued the DDS/DMD degree. The transcript must be sent directly from the school to the Board office.

- Successful completion of the National Board Examination for Dentistry, administered by the Joint Commission on National Dental Examinations (JCNDE).
- Satisfactory completion of a clinical dental examination administered by one of the following: Southern Regional Testing Agency (SRTA), Western Regional Examining Board (WREB), the Commission on Dental Competency Assessments (CDCA), the Council of Interstate Testing Agencies (CITA) or the Central Regional Dental Testing Service (CRDTS). For licensure by examination, clinical examination scores are good for five (5) years from the date of successful passage. Note: A clinical patient based component of the examination must be administered by the testing agency and successfully completed by the candidate in order to be accepted.
- Passage of the Arkansas Jurisprudence Examination: The jurisprudence examination is an open-book exam that covers the Dental Practice Act/Dental Corporation Act/Rules and Regulations of the Board. The exam will be emailed to you upon receipt of your dental license application and fee.

- A copy of a certificate showing current Healthcare Provider level cardiopulmonary resuscitation (CPR) certification must accompany the application.
- Effective July 1, 2011, every person applying for a license must authorize the Arkansas State Board of Dental Examiners to conduct a complete criminal background check. Information on the background check will be mailed to the applicant when the Board office receives the dental license application.
- Official verification from every state where licensed (whether license is current or not) must be sent directly from the state board(s) to the Board office.

Please visit Arkansas State Board of Dental Examiners for more information.

## California

Dental Board of California

2005 Evergreen Street, Suite 1550

Sacramento, CA 95815

Phone: (916) 263-2140

Contact: dentalboard@dca.ca.gov

#### California Requirements

# APPLICATION FOR LICENSURE BASED ON PASSING THE WREB EXAMINATION - GENERAL INFORMATION AND UPDATES

#### Licensure Eligibility

Prior to applying to the Dental Board (Board) of California for a dental license, all applicants must:

- Be at least 18 years of age
- Submit a completed <u>application</u> to the Dental Board of California
- Pay a non-refundable application fee of \$400.00
- Provide satisfactory evidence of having graduated from a dental school approved by the Board.
- Provide satisfactory evidence of having passed Parts I and II of the National Board Written Examinations. Original score card is required; photocopies are not acceptable.
- Provide satisfactory evidence of having passed the WREB examination after January 1, 2005; original or duplicate success card is required. Photocopies are not acceptable.
- Provide classifiable sets of <u>fingerprints</u> on fingerprint cards provided by the Board or on Standard FBI fingerprint cards.
- Provide satisfactory evidence of having passed the California <u>Restorative Technique</u> (RT) examination if graduated from a recognized non-accredited dental school.
- Submit a completed <u>Out of State/Country Licensure</u> Certification Form (only for those who are licensed in another state or country)
- Successfully complete the <u>Law and Ethics</u> examination.

In the state of California, the only persons legally entitled to operate dental radiographic equipment are:

• Persons who passed the Board's Radiation Safety examination prior to January 1, 1985.

- Persons who graduated after January 1, 1980, from a dental school which is accredited by the Commission on Dental Accreditation.
- Persons who have passed any other Board approved course in Radiation Safety.

Dentists need to complete a Radiation Safety course if they:

- Graduated from a dental school not accredited by the Commission on Dental Accreditation,
- Graduated from a dental school prior to January 1, 1980, or
- Do not hold a Radiation Safety Certificate.

Please visit Dental Board of California for more information.

## Colorado

Colorado Dental Board 1560 Broadway, Suite 1350

Denver, CO 80202

Phone: (303) 894-7800

Contact: dora\_dentalboard@state.co.us

#### Colorado Requirements

General Requirements for Licensees and Applicants

- Any person who practices or offers or attempts to practice dentistry or dental hygiene without an active license issued under the Dental Practice Act and in accordance with Board rules commits a class 2 misdemeanor for the first offense and a class 6 felony for the second or any subsequent offense. Physical or mental illness requirements. These requirements apply to a dentist or dental hygienist who holds an active license issued by the Board, including a dentist issued an academic license.
  - Licensees shall provide the Board with written notice of the following:
    - A long-term (more than 90 days) physical illness/condition that renders the licensee unable, or limits the licensee's ability, to practice dentistry or dental hygiene with reasonable skill and safety to patients, or
    - A debilitating mental illness/condition that renders the licensee unable, or limits the licensee's ability, to practice dentistry or dental hygiene with reasonable skill and safety to patients.
  - The licensee shall notify the Board of the illness or condition within 30 days and submit, within 60 days, a letter from his/her treating medical or mental health provider describing:
    - The condition(s);
    - The impact on the licensee's ability to practice safely; and
    - Any applicable limitation(s) to the licensee's practice.
  - If a licensee has entered into a voluntary rehabilitation contract with the Board's peer health assistance program, and if the illness or condition is being managed and treated, then the licensee is not required to provide notice to the Board.
  - The Board may require the licensee to submit to an examination to evaluate the extent of the illness or condition and its impact on the licensee's ability to practice with reasonable skill and safety to patients.

- Pursuant to section 12-35-129.6(2), C.R.S., the Board may enter into a nondisciplinary confidential agreement with the licensee in which he/she agrees to limit his/her practice based on any restriction(s) imposed by the illness or condition, as determined by the Board. A licensee subject to discipline for habitually abusing or excessively using alcohol, a habit-forming drug, or a controlled substance is not eligible to enter into a confidential agreement.
- If a dentist who holds an active license, including an academic license, is arrested for a drug or alcohol related offense, the dentist shall refer himself/herself to the Board's peer health assistance program within 30 days after the arrest for an evaluation and referral for treatment as necessary. If the dentist self refers, the evaluation by the program is confidential and cannot be used as evidence in any proceedings other than before the Board.

Please visit Colorado Dental Board for more information.

## Connecticut

Connecticut Department of Public Health Dental Licensing 410 Capitol Ave, MS# 12 APP P.O. Box 340308 Hartford, CT 06134

Phone: (860) 509-7603

Contact: dph.dentalteam@ct.gov

Connecticut Requirements

- Graduate from a dental school accredited or recognized by the American Dental Association (ADA);
- Successfully complete the National Board of Dental Examiners (NBDE) examinations; and
- Successfully complete an acceptable Regional Board Examination approved by the Connecticut State Dental Commission and Department of Public Health. The following regional examinations are approved:
  - The Commission on Dental Competency Assessments (formerly NERB)
  - Council of Interstate Testing Agencies
  - Southern Regional Testing Agency
  - Central Regional Dental Testing Service
  - Western Regional Examining Board
    - Candidates must successfully complete all components of a regional board examination; an overall passing score is not acceptable. Candidates who have successfully completed a clinical performance examination offered by the Central Regional Testing Service, the Southern Regional Testing Agency or the Western Regional Examining Board must also pass the diagnostics component of the clinical performance test offered by the Commission on Dental Competency Assessments (formerly NERB) or the Council of Interstate Testing Agencies.
    - Applicants who earned the dental degree from an <u>ADA</u> accredited or recognized program who have not completed a regional examination as outlined above, may be exempt from the regional examination provided the applicant completed not less than one year of graduate dental training as a resident dentist in a program accredited by the Commission on Dental Accreditation (CDA), provided that the supervising dentist attests to the resident dentist's competency in all areas tested on the Commission on Dental Competency Assessments (formerly NERB). This exemption does not apply to <u>foreign educated dentists.</u>

Documentation Requirements

- The following documents shall be forwarded directly to this office from the source:
- An official transcript of dental education verifying the award of a degree in dentistry sent directly from the school to this office;
- An official report of **National Board** scores sent directly to this office;
- An official report of successful completion of an acceptable clinical performance examination as outlined above. (The Commission on Dental Competency Assessments (formerly NERB) scores are sent to this office routinely. If the applicant's involvement with this documentation requirement is necessary, he or she will be contacted);

Please visit Connucicut Dental Licensing for more information.

## Delaware

Board of Dentistry and Dental Hygiene Cannon Building, Suite 203 861 Silver Lake Blvd. Dover, DE 19904

Phone: (302) 744-4500

Contact: customerservice.dpr@delaware.gov

#### **Delaware Requirements**

You must submit the documentation in this section in order to be approved to sit for the practical examination. Additional documentation listed in the next section is required to be considered for licensure when you have passed the exam.

- Submit completed, signed and notarized <u>Application for Dentist Licensure</u> by the exam <u>deadline</u>.
- Enclose the following non-refundable fees by check or money order made payable to "State of Delaware." You may combine the fees in one payment.
  - processing fee
  - <u>examination fee</u> If you fail to sit for the examination in the month you select on the application, *you will forfeit this fee*. You cannot transfer it to the next examination date.
- Enclose a copy of your current cardiopulmonary resuscitation (CPR) certification card. The Board office must receive this document by the exam deadline.
- Arrange for the Board office to receive an official transcript from Board-recognized undergraduate college or university, sent directly from the school to the Board office. The Board office must receive this document directly from the school by the exam deadline.
- Arrange for the Board office to receive an official transcript from your dental college or university, sent *directly* from the school to the Board office. The transcript must show your degree and date of graduation.
  - The dental college/university must be accredited by the Commission on Dental Accreditation of the American Dental Association (CODA).
  - The Board office must receive this document directly from the school by the exam deadline.

You must submit the additional documentation listed below in order to be considered for licensure when you've passed the practical examination. However, you may submit the

documents at any time, before or after taking the exam. When you have passed the practical exam *and* all required documentation listed below has been received, the credentialing committee will review your application. If approved, your license will be issued.

- Arrange for the Board office to receive *one* of the following:
  - Proof (such as a letter from the sponsoring institution) that you have one year of experience as a dental intern in a CODA-accredited general practice residency sent directly from the sponsoring institution to the Board office.
  - Tax form W-2s or other proof that you have practiced actively for three years in another jurisdiction (state, U.S. territory or District of Columbia).
  - Proof (such as a letter from the sponsoring institution) that you have completed four or more years in a CODA-approved specialty residency, sent *directly* from the sponsoring institution to the Board office.
- If you have been in a CODA-approved specialty residency of *less than four years*, submit proof (such as a letter from the sponsoring institution) that the program you're in
  - meets the goals, objectives, proficiencies and competencies set forth in Standard 2.4 of the CODA Accreditation Standards for Advanced Education Programs in General Practice Residency, ©2007 (Section 4.3 of the Board's <u>Rules and</u> <u>Regulations</u>), and
  - includes a rotation of at least 70 hours in anesthesia and a rotation of at least 70 hours in medicine.
- Arrange for the Board office to receive your National Board Examination score report, sent *directly* from the Joint Commission on National Dental Examinations to the Board office. See <u>Score Report Request</u>.
- Arrange for the Board office to receive license verification letters from *each* jurisdiction (state, U.S. territory or District of Columbia) where you are now, or have ever been, licensed, sent *directly* from the jurisdiction to the Board office.
- If you have ever been licensed in another jurisdiction, request a self-query from the **National Practitioner Data Bank**. When you receive the report, send the original to the Board office.
- Submit your completed, signed and notarized <u>Jurisprudence Examination for Dentist</u> <u>Candidates</u>.
- Complete the *Criminal History Record Check Authorization* form to request State of Delaware and Federal Bureau of Investigation criminal background checks. Follow the instructions on the authorization form to arrange to be fingerprinted.

Please visit **Division of Professional Regulation** for more information.

## Florida

Florida Board of Dentistry 4052 Bald Cypress Way Bin C-08 Tallahassee, FL 32399-3258

Phone: (850) 245-4474

## Florida Requirements

An applicant must be:

- Is at least 18 years of age
- A graduate of a dental school accredited by the American Dental Association Commission on Dental Accreditation or its successor entity, if any, or any other dental accrediting entity recognized by the United States Department of Education; orA dental student in the final year of a program at such an accredited dental school who has completed all the coursework necessary to prepare the student to perform the clinical and diagnostic procedures required to pass the examinations. With respect to a dental student in the final year of a program at a dental school, a passing score on the examinations is valid for 365 days after the date the examinations were completed. A dental school student who takes the licensure examinations during the student's final year of an approved dental school must have graduated before being certified for licensure pursuant to s. 466.011; orIf an applicant is a graduate of a dental college or school not accredited in accordance with paragraph (2)(b) or of a dental college or school not approved by the board, the applicant is not entitled to take the examinations required in this section to practice dentistry until she or he satisfies one of the following:
- Completes a program of study, as defined by the board by rule, at an accredited American dental school and demonstrates receipt of a D.D.S. or D.M.D. from said school; or
- Submits proof of having successfully completed at least 2 consecutive academic years at a full-time supplemental general dentistry program accredited by the American Dental Association Commission on Dental Accreditation. This program must provide didactic and clinical education at the level of a D.D.S. or D.M.D. program accredited by the American Dental Association Commission on Dental Accreditation.
- Successfully complete the following examinations:
  - o Dental National Board Examination
  - Florida Laws and Rules Examination
  - o ADEX Dental Licensing Examination
  - Scores from ADEX Dental Licensing examinations administered in Florida are valid for 365 days after the date the official examination results are published.

Scores from ADEX Dental Licensing Examinations administered in a jurisdiction other than Florida must be completed on or after October 2, 2011.

Please visit Florida Board of Dentistry for more information.

## Georgia

Georgia Board of Dentistry 2 Peachtree Street, NW Atlanta, GA 30303

Phone: (404) 651-8000

#### Georgia Requirements

- Each candidate submitting an application for a dental license must have passed all sections of the National Board Theory Examinations Part I and Part II with a score of 75 or higher. The President of the Georgia Board of Dentistry may appoint one or more members of the Board to proctor the National Dental Board Examinations held in Georgia.
- Each candidate for a license to practice dentistry must pass with a score of 75 or higher a jurisprudence examination on the laws and rules governing the practice of dentistry in the State of Georgia. Such examination shall be in the English language. The score will be valid for one year.
- Each candidate for a license to practice dentistry must pass all sections with a score of 75 or higher on any clinical examination administered by the Georgia Board of Dentistry, or a testing agency designated and approved by the Board. Such examination shall be in the English language.
- Any candidate who fails one or two sections of any clinical examination or any combination of one, two, or three sections of the clinical examination, three times must take a remedial course of study designated and pre-approved by the board.
  - Once the candidate shows written proof of successful completion of the approved course of study, the Board will grant the candidate one additional attempt at successful passage of a clinical licensing examination approved by the board.
  - After a fourth failure of one or more sections of any clinical examination, no further attempts will be authorized or scores recognized by the board for licensure in Georgia.
- Any candidate who fails three or more sections of any clinical examination three times must successfully complete a one-year American Dental Association-accredited course of study pre-approved by the board.
  - Once the candidate provides written proof of successful completion of this oneyear course of study, the board will grant the candidate one additional attempt at successful passage of a clinical licensing examination approved by the Georgia Board.
  - After a fourth failure of one or more sections of any clinical examination, no further attempts will be authorized or scores recognized by the board for licensure in Georgia.

- For purposes of this rule, failure of the completed curriculum integrated format type examination shall only be counted as one (1) examination failure. The final section/sections failed with the curriculum integrated format type examination will be applicable to sections (4) and (5) of this rule
- In determining whether an applicant has met the requirements for licensure, the board will only consider:
  - The examination given by the Georgia Board of Dentistry prior to February 22, 1993.
  - Results from the Southern Regional Testing Agency (SRTA) that were attained between February 22, 1993 and December 31, 2005; to include SRTA retake examination results until December 31, 2006.
  - Results from the American Board of Dental Examiners (ADEX) examination as uniformly administered by the Central Regional Dental Testing Service (CRDTS) and the Northeast Regional Board of Dental Examiners (NERB) that were attained between January 1, 2006 and June 30, 2009.
  - Results from the Central Regional Dental Testing Service (CRDTS) examination or any other testing agency designated and approved by the Board attained subsequent to June 30, 2009. Results from the retake examinations administered by the Northeast Regional Board of Dental Examiners (NERB) or the Central Regional Dental Testing Service (CRDTS) are accepted through June 30, 2010. Such retakes must be from initial examinations taken prior to June 30, 2009 and must include at least one successful score from Parts II, III, IV or V. Examination scores from slot preparations of restorative dentistry shall neither be accepted nor recognized by the Board.
  - Each candidate for Georgia licensure must furnish a background check. The applicant shall be responsible for all fees associated with the performance of a background check.
  - The Board may hold other examinations as may be required and necessary.

Please visit Georgia Rules and Regulations for more information.

## Hawaii

Department of Commerce and Consumer Affairs Professional & Vocational Licensing Board of Dentistry P.O. Box 3469 Honolulu, HI 96801

Phone: (808) 586-2700

Contact: dental@dcca.hawaii.gov

#### Hawaii Requirements

#### §16-79-11 Documentation and credentials required for dental applicants.

- All dental licensure applicants shall arrange to have sent directly to the board:
  - An official verification of having successfully passed the National Board Dental Examination;
  - An official verification of having successfully passed the ADEX dental examination; and
  - A certified copy of a dental degree, a certificate of graduation or an official transcript from a dental school accredited by CODA.
- Applicants licensed as a dentist in another state shall also submit an official verification of licensure and licensure status from the board of dental examiners of that state and submit a self-query report from the NPDB.
- The board may require additional background checks of dental applicants from an independent background check service as approved by the board, provided that the applicant shall pay the cost of the background check. [Eff 7/2/64; am and ren §16-79-11, 2/13/81; am and comp 2/9/89; am and comp 8/20/90; am and comp 2/9/01; comp 2/9/02; am and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§448-6, 448-9, 448-9.4)

#### §16-79-11.5 Documentation and credentials required for dental hygiene applicants.

- All dental hygiene licensure applicants shall arrange to have sent directly to the board:
  - An official verification of having successfully passed the National Board Dental Hygiene Examination;
  - An official verification of having successfully passed any one of the regional clinical examinations authorized by section 447-1(b), HRS, or pursuant to section 447-1(c), HRS, an official verification of having passed a national clinical examination;
  - A certified copy of a dental hygiene degree, certificate of graduation or an official transcript from a dental hygiene school accredited by CODA; and

- Documentary proof of being certified in the administration of intra-oral infiltration local anesthesia and intra-oral block anesthesia from an accredited dental hygiene school or by a certification program approved by the board.
- Applicants licensed as a dental hygienist in another state shall also submit an official verification of licensure and licensure status from the board of dental examiners of that state and submit a self-query report from the NPDB.
- The board may require additional background checks of dental hygiene applicants from an independent background check service as approved by the board, provided that the applicant shall pay the cost of the background check. [Eff and comp 1/27/14; comp 8/22/16] (Auth: HRS §448-6) (Imp: HRS §§447-1, 448-6)

Please visit Professional and Vocational Licensing for more information.

## Idaho

Idaho Board of Dentistry P.O. Box 83720 Boise, Idaho 83720-0021

Phone: (208) 334-2369

Contact: <a href="mailto:sbd.idaho.gov">sbdinfo@isbd.idaho.gov</a>

Idaho Requirements

- In order to be eligible for licensure by examination, you must have taken and passed a Board approved examination within 5 years immediately preceding the date of application.
- Completed application with the non-refundable application fee
- Copy of current CPR Certification
- National Board scores
- Original or notarized copy of clinical examination results
- Official transcripts
- Jurisprudence Exam
- Clinical Examinations accepted after January 2019:
  - Patient-based operative section
  - Patient-based periodontal section
  - Simulated endodontic section
  - Simulated prosthodontic section
  - A written competency examination

Please visit **Board of Dentistry** for more information.

## Illinois

Illinois Department of Financial & Professional Regulation 100 West Randolph, 9<sup>th</sup> Floor Chicago, IL 60601

Phone: (888) 473-4858

#### Illinois Requirements

#### Section 1220.100 Application for Licensure

An applicant for a license to practice dentistry in Illinois shall file an application on forms supplied by the Division that shall include:

- For graduates from a dental college or school in the United States or Canada, certification of successful completion of 60 semester hours or its equivalent of college pre-dental education, and graduation from a dental program specified in Section 1220.140.
- For graduates from a dental college or school outside of the United States or Canada:
  - Certification of graduation from a dental college or school; and
  - Clinical Training
    - Certification from an approved dental college or school in the United States or Canada that the applicant has completed a minimum of 2 years of clinical training at the school in which the applicant met the same level of scientific knowledge and clinical competence as all graduates from that school or college. The 2 years of clinical training shall consist of:
- o 2850 clock hours completed in 2 academic years for full-time applicants; or
- 2850 clock hours completed in 4 years with a minimum of 700 hours per year for part-time applicants; or
  - In the alternative, certification, from the program director of an accredited advanced dental education program approved by the Division, of completion of no less than 2 academic years may be substituted for the 2 academic years of general dental clinical training.
- The required fee set forth in Section 1220.415(a)(1).
- Proof of successful completion of the Theoretical examination given by JCNDE. The passing score shall be determined by JCNDE. The National Board Certificate must be mailed to the Division by JCNDE.
- Proof of successful completion of an examination set forth in Section 1220.120(a).
- Certification, on forms provided by the Division, from the state in which an applicant was originally licensed and is currently licensed, if applicable, stating:
  - The time during which the applicant was licensed in that state, including the date of the original issuance of the license; and

• Whether the file on the applicant contains any record of disciplinary actions taken or pending.

Please visit <u>Illinois Dental Professions</u> for more information.

## Indiana

Indiana State Board of Dentistry 402 W. Washington Street, Room W072 Indianapolis, Indiana 46204

Phone: (317) 233-4236

Contact: <a href="mailto:pla8@pla.in.gov">pla8@pla.in.gov</a>

Indiana Requirements

#### 828 IAC 1-1-1 Qualifications of applicants; approved dental schools

Sec. 1. All applicants for licensure to practice dentistry must:

(1) have graduated from a dental school accredited by the Commission on Accreditation of the American Dental Association; and

(2) submit certification of having completed, within the prior year, an American Red Cross or American Heart Association cardiopulmonary resuscitation course or another course approved by the board

**Sec. 2.** The applicant for licensure must complete the application on forms prescribed and provided by the board. All statements contained in the application must be verified by the applicant. The verified application, fees, and other documents that the board may require must be submitted to the board.

- The following proof that the applicant is a graduate of a dental school that is recognized by the board must be submitted:
- An official transcript showing the date the degree was conferred.
- An official diploma or a certificate of completion signed by the:
  - dean of the applicant's professional school; and
  - registrar of the university or college.
- Additional documents to be submitted by the applicant for a license include the following:
- Where the name on any document differs from the applicant's name, one (1) of the following:
  - A notarized or certified copy of a marriage certificate.
  - Legal proof of a name change.
- Two (2) recent passport-type photographs of the applicant, taken within eight (8) weeks before filing of the application.
- If the applicant has been convicted of a criminal offense, excluding minor traffic violations, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations, for which the applicant has been convicted. This notarized statement must include the following:
  - The offense of which the applicant was convicted.

- The court in which the applicant was convicted.
- The cause number under which the applicant was convicted.
- The penalty imposed by the court.
- An applicant who is now, or has been, licensed to practice any health profession in another state or Canadian province must submit verification of license status. This information must be sent by the state or province that issued the license directly to the Indiana board.
- An applicant who is now, or has been, licensed to practice any health profession in another state shall submit a self-query form completed by the following:
  - The National Practitioner Data Bank (NPDB).
  - The Healthcare Integrity and Protection Data Bank (HIPDB) data bank.
- All applicants must submit the applicant's United States Social Security number in order to be eligible for licensure

**Sec. 3.** In order to obtain an Indiana license to practice dentistry, each applicant must pass an examination that includes the following:

- All sections of the national dental board examination.
- A clinical examination.
- A written examination covering Indiana law relating to the practice of dentistry and dental hygiene.

**Sec. 6.** A passing score on a national board dental examination, as approved by the board, must be achieved by the applicant before the applicant will be permitted to take the written examination covering Indiana law relating to the practice of dentistry and dental hygiene.

• Passage of the Indiana dental and dental hygiene law examination with a score of at least seventy-five (75) is mandatory before the applicant may be licensed. Applicants failing the law examination may retake the law examination at a time, date, and place to be set by the board not sooner than thirty (30) days from the time the law examination was last taken.

**Sec. 7.** To be eligible for licensure by examination, an applicant must meet any one (1) of the following clinical examination

- Have passed all parts of one (1) of the following examinations within the five (5) year period immediately before the date of the board's receipt of the applicant's application:
  - The Central Regional Dental Testing Service (CRDTS) examination.
  - The North East Regional Board (NERB) examination.
  - The Southern Regional Testing Agency (SRTA) examination.
  - The Western Regional Examining Board (WREB) examination. (2) Have taken an examination administered by the board and received a passing score as established by the board

Please visit Licensure of Dentist and Dental Hygienists for more information.

## Iowa

Iowa Dental Board 400 SW 8<sup>th</sup> Street, Suite D Des Moines, IA 50309

Phone: (515) 281-5157

Contact: IDB@iowa.gov

#### Iowa Requirements

#### 650—11.2(147,153) Dental licensure by examination.

11.2(1) Applications for licensure by examination to practice dentistry in this state shall be made on the form provided by the board and must be completely answered, including required credentials and documents. An applicant who has held a dental license issued in another state for one year or longer must apply for licensure by credentials pursuant to rule 650—11.3(153).

11.2(2) Applications for licensure must be filed with the board along with:

- Documentation of graduation from dental college. Satisfactory evidence of graduation with a DDS or DMD from an accredited dental college approved by the board or satisfactory evidence of meeting the requirements specified in rule 650—11.4(153).
- Certification of good standing from dean or designee. Certification by the dean or other authorized representative of the dental school that the applicant has been a student in good standing while attending that dental school.
- Documentation of passage of national dental examination. Evidence of attaining a grade of at least 75 percent on the examination administered by the Joint Commission on National Dental Examinations.
- Documentation of passage of a clinical examination.
  - Successful passage of a board-approved clinical examination within the previous five-year period with a grade of at least 75 percent.
  - The following regional clinical examinations are approved by the board for purposes of licensure by examination: the Central Regional Dental Testing Service, Inc. examination as administered by the Central Regional Dental Testing Service, Inc. (CRDTS), the Western Regional Examining Board examination as administered by the Western Regional Examining Board (WREB), the Southern Regional Testing Agency, Inc. examination as administered by the Southern Regional Testing Agency, Inc. (SRTA), and the American Board of Dental Examiners, Inc. examination as administered by the Commission on Dental Competency Assessments (CDCA) and the Council of Interstate Testing Agencies, Inc. (CITA)

Please visit Licensure to Practice Dentistry for more information.

## Kansas

Kansas Dental Board 900 SW Jackson, Suite 455-S Topeka, KS 66612

Phone: (785) 296-6400

#### Kansas Requirements

- Have graduated from an ADA approved school in the United States, Canada, or Puerto Rico.
- Recent photograph, wallet or passport size. The photo must be attached to application with tape or glue. No staples please
- National Board passing scores (copy). The National Board exam results are now only available online. It is the responsibility of the applicant to ensure the Dental Board is provided a copy of the results. The results can be mailed, e-mailed or faxed.
- Clinical Board passing scores (copy). Accept CRDTS, SRTA, NERB, WREB, CITA, ADEX and State Boards. 5) Original Transcript with dental/dental hygiene degree awarded must be sent directly to Kansas Dental Board office from the Registrar's Office in a sealed envelope or sent electronically from the University or College.
- Current CPR card
- Verification of all state licenses held (Current or Expired). The verification must be received by the Board in a sealed envelope with an embossed seal. Exception: If states online verification is "Prime Source" verification a printed verification from website may be submitted. A copy of a license is NOT a verification of license.
- Provide a self-query from the National Practitioner Data Bank. This is one report. Instructions to acquire the report are on the second page.
- Completed Application, signed and notarized with photograph attached.
- **KS Jurisprudence Exam.** Application must be received with payment prior to scheduling the exam. You will be notified by e-mail to schedule the exam. The exam can be taken at any State Dental Board, Dental/Hygiene School, testing center or library. The exam is offered at the Board office by appointment only. To schedule the exam at the Kansas Dental Board, call 785-296-6400 or e-mail at vanda.collins@ks.gov at least a week in advance. The exam is offered Monday through Friday between the hours of 9 a.m. 11 am and 1 p.m. 3 p.m.
  - Proctoring the exam. You must make the arrangements. Contact the facility where you wish to be tested; ask if someone is willing to proctor the exam for you. Schedule a date and time with the proctor at least a week prior to the exam. E-mail the following information using the above email address: 1. Place where the examination will be given 2. Date and location 3. Proctor's name and e-mail address
- Hygienist Only

Local Anesthesia Certificate and/or Nitrous Oxide Certificate (if applicable)
 Dentist Only

- One recommendation letter from a licensed dentist. The letter must be presented on letterhead with signed signature.
- Print completed application and submit by mail to the address in the header of this document. The application cannot be received electronically. If application is hand written, any non-legible information can result in the application being returned. DO NOT sign the application until in the presence of a notary.
- Fees. There are two fees. The Application Fee shown at the top of the page and a Prorated License Fee - Determined at the time of licensure. You will be notified by email when your application is complete and provided the amount of the licensing fee. Both fees are payable to the Kansas Dental Board with a personal check or money order ONLY.

Please visit Kansas Dental Board for more information.

## Kentucky

Kentucky Board of Dentistry 312 Whittington Parkway, Suite 101 Louisville, Kentucky 40222

Phone: (502) 429-7280

#### Kentucky Requirements

#### Licensure by Examination

To be eligible to apply for licensure by examination, you must meet the following requirements with no exceptions:

- Graduated of a CODA accredited dental school, college, or department of a university
- Successfully completed Part I and Part II of the National Board Dental Examination
- Successfully passed within the five (5) years preceding the filing of your application one of the following regional clinical examinations: CITA, CRDTS, CDCA/NERB, SRTA, or WREB\*

Due to the fact that there is currently no nationalized clinical exam, the Board interprets 201 KAR 8:532, Section 2(b) as carrying no effect. Until further notice and at such time a nationalized clinical exam is available, the Board will continue to accept the five regional clinical examinations from individuals desiring licensure by examination after July 15, 2013.

Additionally, you must prove that you meet the requirements of Sections 1 and 2 of 201 KAR 8:530E by submitting the documentation described in the following instruction checklist. This includes a Criminal Background Check. The requirements are at the bottom of this page.

#### Jurisprudence Examination

On July 15, 2010, the statutes and regulations governing the practice of dentistry in the Commonwealth of Kentucky changed.

The following jurisprudence examination must be completed by all new applicants for dental or dental hygiene licensure.

Please visit Kentucky Board of Dentistry for more information.

## Louisiana

Louisiana State Board of Dentistry P.O. Box 5256 Baton Rouge, Louisiana 70821-5256

Phone: (225) 219-7330

#### Louisiana Requirements

#### **REQUIREMENTS FOR LICENSURE**

Each applicant applying for a Louisiana dental license by examination must

- Have graduated from a dental school that was accredited at the time of the applicant's graduation by the Commission on Dental Accreditation of the American Dental Association
- Have successfully completed a Louisiana State Board of Dentistry approved clinical licensing examination within the 3 years immediately prior to applying for a dental license
- Successfully complete Part I and Part II of the National Board Dental Examination
- Possess a current certificate in cardiopulmonary resuscitation basic life support for healthcare providers.
- Be a United States citizen or permanent resident or be legally authorized to reside and work in the U.S.
- Successfully complete the Louisiana State Board of Dentistry jurisprudence examination
- Submit to a fingerprint background check
- Complete and submit the entire notarized dental license by examination application
- Complete an acceptable opioid management course and submit the completion certificate along with the application. (New as of 1/1/2019, see details below)
- Pay all applicable fees

Please visit Louisiana State Board of Dentistry for more information.

## Maine

Maine Board of Dental Practice 143 State House Station 161 Capitol Street Augusta, Maine 04333-0143

Phone: (207) 287-3333

Contact: <u>dental.board@maine.gov</u>

#### Maine Requirements

#### I. LICENSURE BY ORIGINAL APPLICATION

To be eligible for licensure, applicants for a license to practice denturism in this category shall meet the following requirements:

- A. **Examination.** In order to qualify to take the denturist examination pursuant to 32 M.R.S.A. §1100-D, an applicant must:
  - 1. Be a high school graduate or have obtained high school equivalency;
  - 2. Have a diploma from a post-secondary denturism educational institution which meets all of the following criteria:
    - i. It meets or exceeds the International Federation of Denturists baseline competencies;
    - ii. It has been reviewed and recommended for approval by the denturist subcommittee; and
    - iii. It has been approved by the Maine Board of Dental Examiners.
  - 3. Denturist examinations will be available at least yearly by a reputable testing body approved and recommended by the denturist subcommittee. The Maine Board of Dental Examiners may change the examining body from time to time as necessary with the approval and recommendation of the denturist subcommittee.
  - 3. Have successfully completed with a passing grade of 90 percent, the jurisprudence examination given by the Board; and
  - 5. Provide the Board or Subcommittee with documentary proof of current certification in CPR.
  - 6. For any applicant who graduated from an approved post-secondary denturism educational institution more than one year prior to application for licensure in Maine, have successfully completed a personal interview before the Subcommittee. The personal interview may be waived at the Subcommittee's

discretion; however, the applicant shall still submit to an interview by other means as determined by the Subcommittee or the Board.

- B. **Board-Approved Upgrade Curriculum.** Pursuant to 32 M.R.S.A. §1100-E(2) (PL 2009, c. 227 as amended) denturists licensed in this State prior to October 1, 2009, who do not have a diploma from a Board-approved denturism post-secondary institution shall, within two (2) years following the adoption of this specific provision:
  - 1. Provide documented proof to the satisfaction of the Board of successful completion of a comprehensive course or training (i.e. a semester-long course or its equivalent) that was completed prior to October 1, 2009, in each of the following areas: Radiographic Pattern Recognition; Periodontology; and Partial Denture Design and Application; and
  - 2. Provide the Board with documentary proof of successful completion of an upgrade course in each of the following areas from a Board-approved institution, entity, or individual:
    - a. An eight (8) hour review course in Radiographic Pattern Recognition;
    - b. An eight (8) hour review course in Periodontology; and
    - c. A twenty-four (24) hour review course in Partial Denture Design and Application.

Please visit Maine Board of Dental Practice for more information.

## Maryland

Maryland State Board of Dental Examiners Spring Grove Hospital Center Benjamin Rush Building 55 Wade Avenue/Tulip Drive Catonsville, MD 21228

Phone: (410) 402-8501

Contact: <a href="mailto:mdh.mddentalboard@maryland.gov">mdh.mddentalboard@maryland.gov</a>

#### <u>Maryland Requirements</u> .05 Requirements — General License for a Limited Licensee Granted a Waiver.

A limited licensee granted a waiver under Health Occupations Article, §4-303.1, Annotated Code of Maryland, may be granted a general license if the limited licensee fulfills the requirements of Health Occupations Article, §4-303.1, Annotated Code of Maryland, and submits the following credentials to the Board:

- A completed application on a form provided by the Board;
- A photograph of the applicant 3 inches by 3 inches accompanied by a notarized statement stating that "the photograph is a true photograph of me";
- A copy of the degree or diploma issued to the applicant by the foreign dental school conferring it, properly authenticated by an official of that foreign dental school authorized to make the authentication;
- A copy of the subjects taken and the credits earned by the applicant at the foreign dental school, properly authenticated by an official authorized to make the authentication;
- If issued in a language other than English, a translation into English of a degree, diploma, or subjects taken which are required to be submitted to the Board, certified by an individual acceptable to the Board;
- A certified letter with a raised embossed seal from the dental licensing authority of each state in which the applicant holds an active dental license or ever held an active dental license, indicating that the license is or was in good standing and whether the applicant:
  - Is being investigated;
  - Has charges pending against the applicant's license;
  - Has been disciplined;
  - Has been convicted or disciplined by a court of any state or country for an act that would be grounds for disciplinary action under Health Occupations Article, §4-315, Annotated Code of Maryland;
- A copy of the applicant's National Practitioners Data Bank file;
- Proof satisfactory to the Board that the applicant has passed the written and clinical examinations of the North East Regional Board
- Proof satisfactory to the Board that the applicant has passed parts one and two of the National Board Examinations conducted by the Council of National Boards of the American Dental Association;

- Proof satisfactory to the Board that the applicant has successfully completed at least a 2year pediatric dentistry residency program at a dental school or a hospital authorized by any state and which is recognized by the Board;
- Proof satisfactory to the Board that the applicant has successfully completed a pediatric dental fellowship at the University of Maryland Dental School;
- Proof satisfactory to the Board that the applicant has successfully completed the applicant's contractual obligation to provide pediatric dental services for at least 2 years in a:
  - Public health dental clinic operated by the State or a county or municipality of the State;
  - Federally qualified health center; or
  - Maryland qualified health center;
- Two letters of recommendation written by persons acceptable to the Board, which certify to the Board the applicant's:
  - Good moral character;
  - Age;
  - Qualifications;
  - Background; and
  - Experience, if any;
- Proof of passing the Maryland Dental Jurisprudence Examination on the Maryland State Dental Law;
- Documentation of changes of name if the name on any of the documents submitted to the Board differs from the applicant's name; and
- Any other documents or information pertinent to licensure required by the Board.

The applicant shall be 18 years old or older.

Please visit **Division of State Documents** for more information.

## Massachusetts

Board of registration in Dentistry 239 Causeway Street, Suite 500 Boston, MA 02114

Phone: (800) 414-0168

Contact: <u>dentistry.admin@state.ma.us</u>

#### Massachusetts Requirements

You must submit all required documents before we can process your application and issue your license.

#### Proof of Graduation from a CODA-accredited dental school

- Either of the following:
  - Original transcript with school seal indicating your date of graduation and degree awarded
  - Original signed letter from the Dean or registrar indicating your date of graduation and degree awarded
- Photocopies are not accepted

#### National Board Certification Part I and II

• A photocopy of your National Board certificate indicating your passing score on all sections of the exam

#### **Proof of Regional or State Clinical Examination**

- Proof of successful completion of an approved exam
  - **Regional and State Clinical Exam Requirements (PDF)** | (DOC)
- Proof of your CDCA/NERB scores is not necessary, as those scores are sent directly to the Board

#### Physician's Statement

• Examination and signed statement from your primary care physician, physician's assistant or nurse practitioner that you are medically cleared to practice dentistry. The exam must have been completed within 12 months of application.

#### **Documentation of certifications**

Either one of the following documents:

- Current certification in American Red Cross Cardiopulmonary Resuscitation/Automated External Defibrillation (CPR/AED) for the Professional Rescuer
- Current certification in American Heart Association Basic Life Support for Healthcare Providers (BLS)

#### Massachusetts Dental Ethics and Jurisprudence Exam

Please visit **Board of Registration in Dentistry** for more information.

### Michigan

Department of Licensing and Regulatory Affairs Professional Licensing Ottawa Building 611 W. Ottawa P.O. Box 30004 Lansing, MI 48909

Phone: (517) 241-0199

Contact: <u>bplhelp@michigan.gov</u>

### Michigan Requirements

### ELIGIBILITY FOR DENTIST LICENSE BY EXAMINATION (first license)

- Graduate from a dental school accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association (ADA) OR graduate from a foreign dentistry school and complete a minimum two-year program in a CODA/ADAaccredited program that leads to either the awarding of a DDS or DMD degree or a master's degree or certificate in a dental specialty program recognized in R 338.11501.
- Pass Parts I and II of the National Board Dental Examinations (NBDE) administered by the Joint Commission on National Dental Examinations.
- Pass the ADEX Dental Examination (including the periodontal section) administered by the Commission on Dental Competency Assessments (CDCA). If you have passed another regional examination, arrange for the examination scores to be submitted to the Michigan Board. You may still be required to pass the ADEX Diagnostic Skills Examination (DSE).
- Arrange for submission of verification of licensure in any state where licensed, even I the license is no longer active.
- Submit the Dentist by Examination license application found at http://www.michigan.gov/lara/0,4601,7-154-27417\_27529\_27533---,00.html along with appropriate application fee. If also applying for a controlled substance license, controlled substance application fee must also be submitted.
- A fingerprint report and criminal background check are required. Fingerprints must be taken using the instructions and ID numbers that are sent to the applicant after the license application and fee are received

Please visit <u>Bureau of Professional Licensing</u> for more information.

### Minnesota

Board of Dentistry 2829 University Avenue SE Suite 450 Minneapolis, MN 55414-3249

Phone: (612) 617-2250

Contact: <u>dental.board@state.mn.us</u>

### Minnesota Requirements

### Licensure by Exam Requirements

- 1. Graduate from a dental school that is accredited by the Commission on Dental Accreditation.
- 2. Pass the Minnesota Jurisprudence Examination covering the statutes and rules of the Minnesota Board of Dentistry within 5 years prior to application for licensure.
- 3. Pass the American National Dental Board Examination, parts I and II within 5 years prior to application for licensure,
- 4. Pass, within 5 years prior to application for licensure one of the following clinical exams:
  - a. Central Regional Dental Testing Service (CRDTS).
  - b. Board accepts SRTA, CITA, WREB, NERB.
  - c. National Dental Examining Board (NDEB) of Canada, if
  - d. a graduate of an Accredited Canadian Dental school, or
  - e. a graduate University of Minnesota, on or after 5/2010
- 5. Undergo a criminal background check

You must meet all of the above requirements to be eligible to apply for licensure by exam in Minnesota.

Please visit Minnesota Board of Dentistry for more information.

### Mississippi

Mississippi State Board of Dental Examiners 600 East Amite Street, Suite 100 Jackson, MS 39201-2801

Phone: (601) 944-9622

### Mississippi Requirements

- Your fee for licensure by examination is \$250.00, and this fee is non-refundable. Payment must be in the form of a certified check or money order. Applicant will immediately owe a renewal fee upon issuance.
- All Applications must be typed and mailed by certified mail, return receipt requested, to the above address. Incomplete Applications will be returned to the applicant.
- It is at the sole discretion of this Board to grant licensure, and the filing of this Application, along with the payment of the \$250.00, in no way guarantees approval of licensure.
- A dentist licensed by this Board must practice a minimum of three (3) months per year in Mississippi to remain on active status, and the three (3) months do not need to be consecutive. Board Regulation 49 defines three (3) months as being one (1) day per month for any three (3) months of the preceding license renewal period.
- All questions must be answered fully, truthfully, and accurately; if, however, a question does not pertain to you, so indicate by typing "N/A" in the space provided. If additional space is needed to respond to certain questions, please put your response on plain white paper and number your response to correspond with the question on the Application. The Board encourages you to provide as much detail as possible. All requested supporting data must be received by the Director of this Board.
- You must provide a brief history of all activities within the past ten (10) years including times as a fulltime student, service in the Armed Forces of the United States of America, the practice of dentistry, or other occupations.
- You are required to have all colleges/universities and dental schools attended mail certified copies of the appropriate transcripts directly to this Board.
- You are required to have the Joint Commission on National Dental Examinations mail a certified copy of your National Board grade card directly to this Board.
- If you graduated from dental school prior to January 1 of the year you are submitting this Application, you must make a self-query from the National Practitioner Data Bank (NPDB) and Healthcare Integrity and Protection Data Bank (HIPDB), and the original of this form must be forwarded to this Board's office.
- You are required to have the state dental licensing board for all states in which you currently are, or have ever been, licensed to mail certifications regarding your status, disciplinary actions, any reasons for licensure revocation or suspension, etc., directly to this Board.

- Proof of professional liability insurance coverage and that such coverage has not been refused, declined, canceled, non-renewed, or modified may be mailed with your Application or submitted to this Board by the insurance carrier.
- Proof of current certification in Cardiopulmonary Resuscitation should be mailed with your Application.
- Within ninety (90) days of the date the Board receives your Application, you will be required to successfully complete a jurisprudence examination based on the Mississippi Dental Practice Act and the Mississippi State Board of Dental Examiners rules and regulations.

Please visit Mississippi Dental Board for more information.

### Missouri

Missouri Dental Board 3605 Missouri Boulevard P.O. Box 1367 Jefferson City, MO 65102-1367

Phone: (573) 751-8216

Contact: <u>dental@pr.mo.gov</u>

### Missouri Requirements

### 332.181. License to practice dentistry, application, fee, renewal, requirements.

- No person shall engage in the practice of dentistry in Missouri without having first secured a license as provided for in this chapter.
- Any person desiring a license to practice dentistry in Missouri shall pay the required fee and make application to the board on a form prescribed by the board pursuant to section <u>332.141</u>. An application for licensure shall be active for one year after the date it is received by the board. The application becomes void if not completed within such one-year period.
- All persons once licensed to practice dentistry in Missouri shall renew his or her license to practice dentistry in Missouri on or before the license renewal date and shall display his or her license for each current licensing period in the office in which he or she practices or offers to practice dentistry.
- Effective with the licensing period beginning on December 1, 2002, a license shall be renewed every two years. To renew a license, each dentist shall submit satisfactory evidence of completion of fifty hours of continuing education during the two-year period immediately preceding the renewal period. Each dentist shall maintain documentation of completion of the required continuing education hours as provided by rule. Failure to obtain the required continuing education hours, submit satisfactory evidence, or maintain documentation is a violation of section <u>332.321</u>. As provided by rule, the board may waive and/or extend the time requirements for completion of continuing education for reasons related to health, military service, foreign residency or for other good cause. All requests for waivers and/or extensions of time shall be made in writing and submitted to the board before the renewal date.
- Any licensed dentist who fails to renew his or her license on or before the renewal date may apply to the board for renewal of his or her license within four years subsequent to the date of the license expiration. To renew an expired license, the person shall submit an application for renewal, pay the renewal fee and renewal penalty fee as set by rule, and submit satisfactory evidence of completion of at least fifty hours of continuing education for each renewal period that his or her license was expired as provided by rule. The required hours must be obtained within four years prior to renewal. The license of any

dentist who fails to renew within four years of the time his or her license has expired shall be void. The dentist may apply for a new license; provided that, unless application is made under section <u>332.321</u>, the dentist shall pay the same fees and be examined in the same manner as an original applicant for licensure as a dentist.

Please visit Missouri Statutes for more information.

### Montana

Montana Board of Dentistry P.O. Box 200513 301 S Park, 4<sup>th</sup> Floor Helena, Montana 59620-0513

Phone: (406) 444-5711

Contact: DLIBSDLincensingUnitB@mt.gov

### Montana Requirements

- Application fee \$100.00, Jurisprudence exam fee \$85.00
- Education Requirement
  - Graduation from an accredited CODA (Commission on Dental Accreditation) approved dental school
- Experience Requirement
  - No experience necessary for licensure by examination
  - Minimum of 5 years active practice with not less than 3,00 hours of clinical direct patient care for licensure by credentialing
- Examination Requirement
  - Passage of national Board Part I and II (now combine)
  - Passage of a Board approved clinical examination, the board review alls credentialing applications to determine licensure
  - Passage of the Montana Jurisprudence Examination

### LICENSURE BY EXAMINATION:

- Applicant shall have graduated from an accredited Commission on Dental Accreditation Dental Hygiene School (CODA)
- Applicant shall have passed the National Board Dental Examination
- Applicant shall have passed a Board approved clinical examination within the last 5 years
- Applicant shall pass a Montana Jurisprudence examination
- Applicant shall possess a current CPR/ACLS/PALS certification

Please visit Montana Board of Dentistry for more information.

### Nebraska

Department of Health and Human Services Division of Public Health Licensure Unit 301 Centennial Mall South, Third Floor P.O. Box 94986 Lincoln, NE 68509-4986

Phone: (402) 471-3121

### Nebraska Requirements

### **38-1117.** Dentistry; license; requirements.

Every applicant for a license to practice dentistry shall

- present proof of graduation with a Doctor of Dental Surgery degree or a Doctor of Dental Medicine degree from an accredited school or college of dentistry,
- pass an examination approved by the Board of Dentistry which shall consist of the National Board Dental Examinations, both Part I and Part II, as constructed and administered by the American Dental Association Joint Commission on National Dental Examinations,
- demonstrate the applicant's skill in clinical dentistry by passing the practical examination administered by the Central Regional Dental Testing Service or any other regional or state practical examination that the Board of Dentistry determines to be comparable to such practical examination,
- pass a jurisprudence examination approved by the board that is based on the Nebraska statutes, rules, and regulations governing the practice of dentistry and dental hygiene, and
- demonstrate continuing clinical competency as a condition of licensure if required by the board.

Upon completion of these requirements, the department, with the recommendation of the board, shall issue the applicant a license to practice dentistry.

Please visit **Dentistry Practice Act** for more information.

### Nevada

Nevada State Board of Dental Examiners 6010 S. Rainbow Blvd. Bldg A, Ste.1 Las Vegas, NV 89118

Phone: (702) 486-7044

### Nevada Requirements

Pursuant to state law, ALL applicants for a general dental license must meet the following eligibility requirements as set forth in NRS 631.230:

- Is over the age of 21 years;
- Is a citizen of the United States, or is lawfully entitled to remain and work in the United States;
- Is a graduate of an accredited dental school or college; and
- Is of good moral character

If you meet all of the requirements listed in item (a) through (d) above, you may be eligible to apply for licensure

Must present to the Board a certificate granted by the Joint Commission on National Dental Examinations which contains a notation that the applicant has passed the National Board Dental Examination with an average score of at least 75; and

Must present to the Board

- Successfully pass a clinical examination approved by the Board and the American Board of Dental Examiners; or
- Present to the Board a certificate granted by the Western Regional Examining Board which contains a notation that the applicant has passed, a clinical examination administered by the Western Regional Examining Board
- The Board shall examine each applicant in writing on the contents and interpretation of this chapter and the regulations of the Board.

### **Jurisprudence Examination/Fingerprints**

You will receive written confirmation via US Mail of the receipt of your application and application fee along with the on-line jurisprudence examination username/password and the fingerprint materials.

Please visit State Board of Dental Examiners for more information.

### **New Hampshire**

Board of Dental Examiners 121 South Fruit Street Concord, NH 03301

Phone: (603) 271-6985

Contact: <a href="mailto:sheri.walsh@oplc.nh.gov">sheri.walsh@oplc.nh.gov</a>

### New Hampshire Requirements

### Dentists

- <u>Applications:</u> Applicants are required to be graduates of a school that awards the degree of Doctor of Dental Medicine (DMD) or Doctor of Dental Surgery (DDS) and is recognized by the American Dental Association Commission on Dental Accreditation, and are eligible for licensure either by examination or endorsement certificate.
- <u>Examination</u>: Applicants shall have taken and passed the American Board of Dental Examiners (ADEX) examination, or other similar U.S. regional or state clinical examination acceptable to the Board within the last 3 years. The written portion of the ADEX must be passed by all applicants for licensure by examination. Refer to Den 302.04(a).
- <u>Endorsement Certification</u>: For the 3 years immediately prior to submitting an application, the applicant is required to have maintained an active dental practice in one or more states, or been in a dental specialty training program, or have been in active military dental service, or any combination of the aforementioned. An applicant must also have taken and passed the American Board of Dental Examiners (ADEX) examination, or other similar U.S. regional or state board clinical examination for dentists, including a periodontal/scaling exam.

Dental licenses are renewed biennially before April 1 of even-numbered years.

### **Dental Hygienists**

- <u>Applications:</u> Applicants are required to be graduates of a school of dentistry or a school of dental hygiene in an institution of higher education, the program of which is accredited by a national accrediting agency recognized by the United States Department of Education and the American Dental Association Commission on Dental Accreditation, and are eligible for licensure either by examination or endorsement certificate.
- <u>Examination</u>: Applicants shall have taken and passed the American Board of Dental Examiners (ADEX) dental hygiene examination, or other similar U.S. regional or state

board clinical examination acceptable to the Board, within the last 3 years. Refer to Den 302.03.

• <u>Endorsement Certification</u>: Requires an applicant to have a current, unsuspended, unrestricted license to practice dental hygiene in another state and to have practiced clinical dental hygiene in one or more states within the last 3 years. Applicants shall have successfully completed the American Board of Dental Examiners (ADEX) dental hygiene examination, or other similar U.S. regional or state board clinical examination acceptable to the Board for dental hygienists. Refer to Den 301.01(g) & (h).

Dental hygienist licenses are renewed biennially before April 1 of odd-numbered years.

Please visit **Board of Dental Examiners** for more information.

### **New Jersey**

New Jersey Board of Dentistry P.O. Box 45005 Newark, New Jersey

Phone: (973) 504-6405

### New Jersey Requirements

### **13:30-1.2 APPLICATION FOR LICENSURE TO PRACTICE DENTISTRY**

All persons desiring to practice dentistry in New Jersey shall secure a license from the Board.

To qualify as a candidate for dental licensure, an applicant shall submit a completed application to the Board which shall contain the following information and materials:

- A certified transcript from the secretary or dean of a dental school, college or department of a university approved by the Commission on Dental Accreditation verifying that the applicant has obtained a dental degree from such institution;
- A passport size photograph of the applicant signed by the applicant and notarized;
- Results from the successful completion of the North East Regional Board examination. If an applicant fails any portion of the North East Regional Board examination three consecutive times, the Board may require the applicant to sit for and pass a remedial course in the subject area at a dental school, college or department of a university approved by the Commission on Dental Accreditation. The Board shall recognize successful completion of the North East Regional Board examination for up to five years;
- Results of the successful completion of parts I and II of the National Board Dental Examination;
- Results from the successful completion of the New Jersey Jurisprudence examination taken within one year of the date of application;
- A certification by the board of dentistry in every state or jurisdiction in which the applicant holds a dental license verifying that the applicant's license in that state or jurisdiction is in good standing;
- Results from a criminal history background check conducted by the State of New Jersey pursuant to N.J.S.A. 45:1-28 et seq.;
- The applicant's complete professional employment history; and
- The application fee as set forth in N.J.A.C. 13:30-8.1.

An applicant for dental licensure who graduated from a dental school that has not been approved by the Commission on Dental Accreditation shall have completed at least two years of study at a dental school, college or department of a university approved by the Commission of Dental Accreditation, with a dental degree having been conferred by such institution. A candidate for dental licensure who has successfully completed the North East Regional Board examination five years or more prior to the date of application shall submit a completed application to the Board, which shall contain the following information and materials:

- A certified transcript from the secretary or dean of a dental school, college or department of a university approved by the Commission on Dental Accreditation verifying that the applicant has obtained a dental degree from such institution;
- A passport size photograph of the applicant signed by the applicant and notarized;
- Results of the successful completion of parts I and II of the National Board Dental examination;
- Results from the successful completion of the New Jersey Jurisprudence examination taken within two years of the date of application;
- A certification by the board of dentistry in every state or jurisdiction in which the applicant holds a dental license verifying that the applicant's license in that state or jurisdiction is in good standing. The applicant shall hold an active dental license in at least one state or jurisdiction upon application to the Board;
- Results from a criminal history background check conducted by the State of New Jersey pursuant to N.J.S.A. 45:1-28 et seq.;
- The applicant's complete professional employment history; and
- The application fee as set forth in N.J.A.C. 13:30-8.1

Please visit <u>New Jersey Board of Dentistry</u> for more information.

### New Mexico

NM Board of Dental Health Care Toney Anaya Building 2550 Cerrillos Road, Second Floor Santa Fe, New Mexico 87505

Phone: (505) 476-4622

Contact: <u>Dental.Board@state.nm.us</u>

### New Mexico Requirements

### 16.5.6.8 PREREQUISITE REQUIREMENTS FOR GENERAL PRACTICE LICENSE:

Each applicant for a license to practice dentistry by examination must possess the following qualifications:

- graduated and received a diploma from an accredited dental school as defined in NMSA 61-5A-12 A;
- successfully completed the dental national board examination as defined in NMSA 61-5A-12 A;
- passed a board approved clinical examination approved by the board; the results of the clinical examination are valid in New Mexico for a period not to exceed five years:
  - the applicant shall apply directly to a board accepted examining agent for examination, and
  - results of the clinical examination must be sent directly to the board office; and
- completed the jurisprudence exam with a score of at least 75 percent; the applicant shall schedule the exam through the board office;
- the board requires a level III background status report from a board designated professional background service for new graduates, and a level II background status report from a board designated professional background service for an applicant who has been in practice with experience; application for this service will be included

### 16.5.6.10 DOCUMENTATION REQUIREMENTS:

Each applicant for a license by examination must submit the required fees and following documentation:

- completed application signed and notarized with a passport quality photo taken within six months; applications are valid for one year from the date of receipt;
- official transcripts or an original letter on letterhead with an embossed seal verifying successfully passing all required courses from the dental school or college, to be sent directly to the board office from the accredited program;
- a copy of clinical examination score card or certificate from the appropriate specialty board;
- copy of national board examination certificate or score card;
- proof of having taken a course in infection control technique or graduation from dental school within the past 12 months;

- proof of current basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification accepted by the American heart association, the American red cross; or the American safety and health institute (ASHI); cannot be a self-study course;
- the board will obtain verification of applicant status from the national practitioners data bank and the American association of dental examiners clearinghouse; and
- the appropriate status report from a board designated professional background service must be received by the board office directly from a board designated professional background service; the results of the background check must either indicate no negative findings, or if there are negative findings, those findings will be considered by the board;
- the board may deny, stipulate, or otherwise limit a license if it is determined the applicant is guilty of violating any of the provisions of the act, the Uniform Licensing Act, the Impaired Dentists and Hygienists Act, these rules, or if it is determined that the applicant poses a threat to the welfare of the public;
- verification of licensure in all states where the applicant holds or has held a license in good standing to practice dentistry, or other health care profession; verification must be sent directly to the office from the other state(s) board, must include a seal, and must attest to the status, issue date, license number, and other information contained on the form;
- in addition to the documentation required above, an applicant for licensure in a specialty area must request official transcripts from the residency program or postgraduate training program to be sent directly to the board office from the accredited program.

Please visit <u>Dental Health Care</u> for more information.

### **New York**

NY State Education Department Office of the Professions 89 Washington Avenue Albany, New York 12234-1000

Phone: (518) 474-3817

#### New York Requirements

### **General Requirements**

The practice of dentistry or use of the title "dentist" within New York State requires licensure. To be licensed as a dentist in New York State initially or through endorsement you must:

- be of good moral character;
- be at least 21 years of age;
- meet education requirements;
- meet examination requirements;
- meet experience requirements; and
- complete coursework or training in the identification and reporting of child abuse offered by a New York State approved provider.

### **Education Requirements**

To meet the education requirements for licensure, you must present evidence of completion of:

- 1. not less than 60 semester hours of *preprofessional education*, including courses in general chemistry, organic chemistry, biology or zoology, and physics; and
- 2. a program of professional education consisting of either:
  - at least four academic years, or the equivalent thereof, in a program registered by the Department as licensure qualifying or accredited by an accrediting organization acceptable to the Department (see below for information about accredited dental programs); or
  - at least four academic years of dental education satisfactory to the Department, culminating in a degree, diploma or certificate in dentistry recognized by the appropriate civil authorities of the country in which the school is located, as acceptable for entry into practice in the country in which the school is located (see below).

### **Experience Requirements**

All applicants for initial licensure must complete an approved clinically-based dental residency program of at least one year's duration

• A clinical (practical) examination such as NERB will not be accepted for initial licensure

### **Examination Requirements**

For licensure, you must obtain passing scores on both Parts I and II of the National Board Dental Examination. The Department must receive verification of your passing scores directly from the Joint Commission on National Dental Examinations. You are responsible for contacting the examination agency for obtaining appropriate information and forms.

Normally, dental students take Parts I and II of the National Board Dental Examination in the final years of dental study and their dental schools assist in the arrangements. If you completed a program of dental education in an unregistered and unaccredited dental school outside the United States, contact the Joint Commission on National Dental Examinations for information on taking the examinations.

Please visit Office of the Professions for more information.

### North Carolina

North Carolina State Board of Dental Examiners 2000 Perimeter Park Drive, Suite 160 Morrisville, NC 27560

Phone: (919) 678-8223

Contact: info@ncdentalboard.org

### North Carolina Requirements

### 21 NCAC 16B .0501 DENTAL LICENSURE BY CREDENTIALS

An applicant for a dental license by credentials shall submit to the Board:

- a completed, notarized application form provided by the Board;
- the non-refundable licensure by credentials fee;
- an affidavit from the applicant stating for the five years immediately preceding the application:
  - the dates that and locations where the applicant has practiced dentistry;
  - that the applicant has provided at least 5,000 hours of clinical care directly to patients, not including post graduate training, residency programs or an internship; and
  - that the applicant has continuously held an active, unrestricted dental license issued by another U.S. state or U.S. territory;
- a statement disclosing and explaining any investigations, malpractice claims, state or federal agency complaints, judgments, settlements, or criminal charges;
- a statement disclosing and explaining periods within the last 10 years of any voluntary or involuntary commitment to any hospital or treatment facility, observation, assessment, or treatment for substance abuse, with verification demonstrating that the applicant has complied with all provisions and terms of any county or state drug treatment program, or impaired dentists or other impaired professionals program;
- a copy of a current CPR certificate; and
- a statement disclosing whether or not the applicant holds or has ever held a registration with the federal Drug Enforcement Administration (DEA) and whether such registration has ever been surrendered or revoked.

Please visit <u>NC Board of Dental Examiners</u> for more information.

### North Dakota

North Dakota Board of Dental 2900E Broadway Avenue Bismarck, ND 58501

Phone: (701) 258-8600

### North Dakota Requirements

### License by Examination

A dentist who has passed a clinical competency examination approved by the North Dakota Board of Dental Examiners and also the examination administered by the Joint Commission on National Dental Examinations or the National Dental Examining Board of Canada within five years of application may apply to the North Dakota State Board of Dental Examiners for a license to practice pursuant to the following requirements:

- has a DDS or DMD diploma from a dental program accredited by the Commission on Dental Accreditation of the American Dental Association
- A completed notarized application and the application fee must be submitted to the Board 30 days prior to the next quarterly meeting of the Board
- Background check results from recognized data sources, health care institutions, licensing agencies and national and state law enforcement agencies
- Professional references
- Evidence the applicant has the physical health and visual acuity to enable the applicant to meet the minimal standards of competency
- Evidence of successfully completing a cardiopulmonary resuscitation course with 2 years of application
- Verification of good standing from each state where the applicant holds or has ever held a professional license
- Grounds for dental of the application under section 43-28-18 do not exist
- The applicant has passed the online examination on ND laws and rules governing the practice of dentistry
- The board may require an interview
- Proof of identity including any name change documentation

Please visit North Dakota Board of Dental Examiners for more information.

### Ohio

Ohio State Dental Board 77 S. High Street, 17<sup>th</sup> Floor Columbus, Ohio 43215-6135

Phone: (614) 466-2580

Contact: dental.board@den.ohio.gov

### **Ohio Requirements**

# <u>A Dentist applicant must be a graduate of an accredited dental college, and meet one of the following requirements to apply:</u>

- Have taken an examination administered by any of the following regional testing agencies and received a passing score on the examination as determined by the administering agency: the central regional dental testing service, inc., northeast regional board of dental examiners, inc., the commission on dental competency assessments, the southern regional dental testing agency, inc., the council of interstate testing agencies, inc., or the western regional examining board; **OR**
- Have taken an examination administered by the state dental board and received a passing score as established by the board *no longer offered*; **OR**
- Possess a license in good standing from another state and have actively engaged in the legal and reputable practice of dentistry in another state or in the armed forces of the United States, the United States public health service, or the United States department of veterans' affairs for five years immediately preceding application; **OR**
- Have completed a dental residency program accredited or approved by the commission on dental accreditation and administered by an accredited dental college or hospital.

**Examination** - If you have **taken, and passed** an accepted Regional Board examination, regardless of whether you have an out-of-state-license.

**Out-of-State** - If you have *never* successfully passed one of the accepted Regional Board examinations, and you currently hold a license in good standing from another state and are actively engaged in the legal and reputable practice of dentistry in another state for five (5) years immediately preceding application.

**<u>Residency</u>** - You must have **completed** a dental residency program accredited or approved by the Commission on Dental Accreditation and administered by an accredited dental college or hospital in lieu of taking or passing an accepted Regional Board examination

Jurisprudence Exam - This is an exam over the Dental Practice Act

Proof of being a Graduate of an Accredited Dental College- the following will be accepted:

- Transcripts indicating graduation date and degree received, **OR**
- <u>Certification of Dental School</u> signed and sealed **after** graduation date- **seal must be** visible and legible, OR
- Certification Letter from school signed and sealed **after** graduation date **seal must be visible and legible**

Please visit Ohio State Dental Board for more information.

### <u>Oklahoma</u>

Oklahoma Board of Dentistry 2920 N. Lincoln Blvd, Suite B Oklahoma City, OK 73105

Phone: (405) 522-4844

### Oklahoma Requirements

Section 328.21 - Registration and Display of Licenses and Certificates No person shall practice dentistry or dental hygiene without first applying for and obtaining a license from the Board of Dentistry.

Application shall be made to the Board in writing and shall be accompanied by the fee established by the rules of the Board, together with satisfactory proof that the applicant:

- Is of good moral character;
- Is twenty-one (21) years of age, or over, at the time of making application to practice dentistry or eighteen (18) years of age, or over, if the applicant is to practice dental hygiene;
- Has passed a written theoretical examination and a clinical examination approved by the Board; and
- Has passed a written jurisprudence examination over the rules and laws affecting dentistry in this state.

An application from a candidate who desires to secure a license from the Board to practice dentistry or dental hygiene in this state shall be accompanied by satisfactory proof that the applicant:

- Is a graduate of an accredited dental college, if the applicant is to practice dentistry;
- Is a graduate of an accredited dental hygiene program, if the applicant is to practice dental hygiene;
- Has passed all portions of the National Board Dental Examination or the National Board Dental Hygiene Examination; and
- Has passed the Western Regional Examination Board (WREB), or another regional exam as approved by the Board, as specified in Section 328.15 of this title.

When the applicant and the accompanying proof are found satisfactory, the Board shall notify the applicant to appear for the jurisprudence examination at the time and place to be fixed by the Board. A dental student or a dental hygiene student in their last semester of a dental or dental hygiene program, having met all other requirements, may make application and take the jurisprudence examination with a letter from the dean of the dental school or director of the hygiene program stating that the applicant is a candidate for graduation within the next six (6) months. The Board shall require every applicant for a license to practice dentistry or dental hygiene to submit, for the files of the Board, a copy of a dental degree or dental hygiene degree, an official transcript, a recent photograph duly identified and attested, and any other information as required by the Board.

Please visit Oklahoma Dental Act for more information.

### **Oregon**

Oregon Board of Dentistry 1500 SW 1<sup>st</sup> Avenue, Suite 770 Portland, OR 97201

Phone: (971) 673-3200

Contact: Ingrid.nye@state.or.us

Oregon Requirements

### 679.065 Qualifications of applicants; rules.

An applicant for a dental license shall be entitled to take the examination to practice dentistry in Oregon if the applicant:

- Is 18 years of age or older; and
- Is a graduate of a dental school accredited by the Commission on Dental Accreditation of the American Dental Association or its successor agency, if any, which must have been approved by the Oregon Board of Dentistry.

Foreign trained graduates of dental programs may apply for the dental licensure examination, providing the applicant meets the board's requirements, by rule, as will reasonably assure that an applicant's training and education are sufficient for licensure.

Please visit Oregon Legislature for more information.

### **Pennsylvania**

State Board of Dentistry P.O. Box 2649 Harrisburg, PA 17105-2649

Phone: (717) 783-7162

Contact: <u>ST-DENTISTY@PA.GOV</u>

#### Pennsylvania Requirements

#### § 33.104. Initial licensure/certification; licensure/certification documents.

- Each new licensee is issued a wall certificate indicating initial licensure and a registration packet including a biennial renewal certificate and a wallet-size license card that show the expiration date of the license. Licenses expire on March 31 of each odd-numbered year, regardless of the date of issuance.
- Each new certificate holder is issued a wall certificate indicating initial certification and a registration packet including a biennial renewal certificate and a wallet-size certification card that show the expiration date of the certificate. Certificates expire on March 31 of each odd-numbered year, regardless of the date of issuance.
- Fees as prescribed by the Bureau of Professional and Occupational Affairs Fee Act (63 P. S. § § 1401-101—1401-501), shall be charged for duplicate wall certificates and biennial renewal documents. A duplicate will be issued only upon submission by the licensee or certificate holder of a notarized statement specifying why the original is unavailable and stating that the duplicate will be returned if the original is recovered

Please visit Pennsylvania Code for more information.

### **Rhode Island**

Department of Health Licensing Unit 3 capitol Hill, Room 105A Providence, RI 02908

Phone: (401) 222-5960

### Rhode Island Requirements

### **2.4.6 Qualifications for Licensure for Dentists**

A. An applicant seeking licensure to practice dentistry in the state of Rhode Island shall:

- Be of good moral character;
- Be eighteen (18) years of age or over;
- Be a graduate of a school of dentistry accredited by the American Dental Association Commission on Dental Accreditation or its designated agency and approved by the Board;
- Have passed to the satisfaction of the Board the required examinations in accordance with § 2.5 of this Part or met the requirements for endorsement stipulated in § 2.5(A)(1)(c)((3)) of this Part; and
- Be in good standing in each state in which he/she holds a license, which shall include a Board query to the National Practitioners Databank.

### 2.5 Examination for Licensure as a Dentist

By Examination: Applicants shall be required to pass such examination(s) as the Board deems most practical and expeditious to test the applicant's knowledge and skills to practice dentistry in this Rhode Island pursuant R.I. Gen. Laws § 5-31.1-6; and:

- The Board requires each applicant to:
  - Have graduated from a school of dentistry in accordance with § 2.4.6(A)(3) of this Part; and
  - Have successfully passed the national examination of the Joint Commission on National Dental Examination (Parts I and II); and
  - Have successfully passed the ADEX exam, including the periodontal examination portion within five (5) years from the date of application for licensure in Rhode Island; or
    - Have successfully passed an examination, approved by the Board, other than a regional board that is similar to the examination for which the applicant is seeking waiver, with an earned score of seventy-five percent (75%) in each discipline, clinical skill, procedure or knowledge area that is tested on the ADEX Examination, including the periodontal examination

portion using the internal weighting and scoring methods the CDCA uses to score the ADEX Examination in Dentistry; and

- Have successfully passed a comprehensive examination in applied clinical diagnosis and treatment planning (CDCA Dental Simulated Clinical Exercise {DSCE} written) with an earned score of seventy-five percent (75%); or
- Hold a current license in good standing to practice dentistry in another state for five (5) years immediately prior to submitting an application for licensure in RI; Said state shall have required successful completion of a clinical exam, not part of the applicant's training program, to be considered for RI licensure.
- Applicants shall submit to the Board, the application accompanied with the appropriate documentation as set forth in § 2.4.7 this Part.
- Sites and schedules of examinations may be obtained directly from the examination service(s) referred to above or from the Board.

Please visit <u>Rules and Regulations</u> for more information.

### South Carolina

South Carolina Board of Dentistry 110 Centerview Drive Columbia, SC

Phone: (803) 896-4599

Contact: <u>Contact.Dentistry@llr.sc.gov</u>

### South Carolina

General Dentistry License by Examination Requirements

- Graduate of an ADA accredited dental school
- Must have passed National Board Examination.
- Must have passed a \*Board-approved clinical dental licensure examination within the last 5 years. \*The Board accepts results of 1) CRDTS and 2) ADEX SRTA/NERB(CDCA)/CITA.
- Must pass the South Carolina Jurisprudence Examination.
- Applicants that have disciplinary action or malpractice case(s), pending or closed, will be considered for licensure on a case-by-case basis after receipt of all required materials. For each case, the applicant should submit:
  - a copy of the formal complaint pleading(s);
  - $\circ$  a copy of the final action, disposition or settlement;
  - o a personal explanation of the disciplinary action or malpractice claim; and
  - any further information requested by the Board in separate communications.
- You must be of good moral character.
- Must agree to appear for a personal interview if requested by the Board.
- Make a full and complete application with all required documents and with non-refundable fee

Please visit **Board of Dentistry** for more information.

### South Dakota

South Dakota State Board of Dentistry P.O. Box 1079 1351 N. Harrison Ave. Pierre, SD 57501

Phone: (605) 224-1282

Contact: <a href="mailto:contactus@sdboardofdentistry.com">contactus@sdboardofdentistry.com</a>

#### South Dakota Requirements

#### 20:43:03:01. Application for license to practice as a dentist -- Requirements.

An applicant for a license to practice as a dentist shall submit the following:

- A completed application form and a fee of \$150;
- Certified transcripts or, when approved, a certified letter from a dental school official verifying that the applicant has graduated from an American Dental Association Commission on Dental Accreditation accredited United States dental school, having obtained a doctor of dental medicine or a doctor of dental surgery degree;
- Verification of passage of the National Board Dental Examination Parts I and II;
- Verification of passage of a board approved patient based clinical competency examination that meets the criteria outlined in § 20:43:03:02 within the five years preceding application or, if the patient based clinical competency examination was passed prior to July 1, 2018, and within the five years preceding application, verification of passage of the Central Regional Dental Testing Service examination or Western Regional Examining Board examination. An applicant who fails any combination of board approved clinical competency examinations three times is not eligible for licensure in South Dakota;
- A certified letter verifying the license number and status of the license from the Board of Dentistry in each state in which the applicant is or has been licensed, if applicable;
- A copy of the applicant's birth certificate or equivalent documentation;
- A recent photograph;
- A copy of the applicant's current cardiopulmonary resuscitation (CPR) card. The board accepts only the American Heart Association for the Healthcare Provider, the American Red Cross for the Professional Rescuer, or an equivalent program approved by the board; and
- Completed fingerprint cards necessary to conduct a state and federal criminal background check.

An applicant for a license to practice as a dentist shall pass a written examination administered by the board on the relevant administrative rules and statutes. A cut score of 70 percent is considered passing.

To be considered, a complete application and all supporting documentation must be received at least 30 days before the board meeting to be considered. If requested, an applicant shall appear for a personal interview conducted by the board on a date set by the board

### 20:43:03:02. Clinical competency examination -- License to practice as a dentist.

The board may approve a patient-based clinical competency examination pursuant to subdivision 20:43:03:01(4) that includes, at a minimum, a cut score of 75 percent along with the following components:

- A patient-based periodontal component that includes at least the following:
  - Pocket depth detection;
  - Calculus detection and removal; and
  - An intra oral and extra oral assessment;
- A patient-based restorative component that includes at least the following:
  - A Class II composite or amalgam preparation and restoration. Slot preparations will not be accepted as fulfilling this requirement; and
  - A Class III anterior composite preparation and restoration;
- A manikin-based prosthodontic component that includes at least the following:
  - An all ceramic anterior crown preparation; and
  - A three unit fixed bridge that includes:
    - A cast gold posterior crown preparation; and
    - A porcelain fused to metal crown preparation;
- A manikin-based endodontic component that includes at least the following:
  - An anterior endodontic procedure that includes access opening, instrumentation, and obturation; and
  - A posterior endodontic procedure that includes access opening and canal location; and
- A remediation policy to address candidate deficiencies.

Please visit <u>South Dakota Legislature</u> for more information.

### **Tennessee**

Tennessee Board of Dentistry 665 Mainstream Drive Nashville, TN 37243

Phone: (615) 532-5073

### Tennessee Requirements

0460-02-.01 LICENSURE PROCESS - BY EXAM AND BY CRITERIA (RECIPROCITY).

The process for obtaining licensure by exam or by criteria (reciprocity) is as follows:

- An applicant shall obtain a Board application form from the Board Administrative Office, respond truthfully and completely to every question or request for information contained in the form and submit it along with all documentation and fees required by the form and this rule to the Board Administrative Office. It is the intent of this rule that all activities necessary to accomplish the filing of the required documentation be completed prior to filing a licensure application and that all documentation be filed simultaneously.
- An applicant shall cause to be submitted directly, from a dental school, college or university duly accredited by the Commission on Dental Accreditation of the American Dental Association, to the Board Administrative Office a certificate of graduation containing the institution's Official Seal and which shows the following:
  - The applicant's transcript; and
  - The degree and diploma conferred, or a letter from the Dean of the educational institution attesting to the applicant's eligibility for the degree and diploma if the last term of dental school has not been completed at the time of application. However, no license shall be issued until official notification is received in the Board Administrative Office that the degree and diploma have been conferred.
- An applicant shall submit a signed "passport" style photograph taken within the preceding twelve (12) months.
- An applicant shall submit evidence of good moral character. Such evidence shall include at least two (2) letters attesting to the applicant's character from dental professionals on the signator's letterhead.
- An applicant shall submit proof of United States or Canadian citizenship or evidence of being legally entitled to live in the United States. Such evidence may include copies of birth certificates, naturalization papers, or current visa status.
- An applicant shall submit the required fees as provided in Rule 0460-01-.02 (1).
- An applicant shall disclose the circumstances surrounding any of the following:
  - Conviction of any criminal law violation of any country, state, or municipality, except minor traffic violations.
  - The denial of licensure application by any other state or the discipline of licensure in any state.
  - Loss or restriction of hospital privileges.
  - Any other civil suit judgment or civil suit settlement in which the applicant was a party defendant including, without limitation, actions involving malpractice, breach of contract, antitrust activity or any other civil action remedy recognized under any country's or state's statutory, common, or case law.

- Failure of any dental licensure examination.
- An applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check.
- An applicant shall submit evidence of current training in cardiopulmonary resuscitation (CPR) which is defined as successful completion of a BLS for Healthcare Providers, or CPR/AED for Professional Rescuers, or an equivalent course, which provides training for healthcare professionals in CPR and the use of an AED by a Board approved training organization. The course must be conducted in person and include a skills examination on a manikin with a certified instructor.
- An applicant shall indicate whether the applicant is physically capable of performing the procedures included in the practice of dentistry and if not, make explanation.
- An applicant shall successfully complete the Tennesee Board of Dentistry Ethics and Jurisprudence examination.

In addition to completing the process described in paragraph (1), an applicant for licensure by exam:

- Shall cause to be submitted a certificate of successful completion of the examinations for licensure as governed by Rule 0460-02-.05; and
- If an applicant for licensure by exam has ever held a license to practice dentistry in any other state or Canada, the applicant shall submit or cause to be submitted directly to the Board's administrative office from each licensing board that has currently or has ever granted authority to practice dentistry indication that the applicant either holds a current active license and whether it is in good standing, or held a license which is currently inactive and whether it was in good standing at the time it became inactive.

Please visit Tennessee Board of Dentistry for more information.

### <u>Texas</u>

Texas State Board of Dental Examiners William P. Hobby Building 333 Guadalupe Street Tower 3, Suite 800 Austin, TX 78701

Phone: (512) 463-6400

### Texas Requirements

### **General Qualifications for Licensure**

- Be at least 21 years of age.
- Has graduated and received either the DDS or DMD degree from a dental school accredited by CODA;
- Has taken and passed Part I and II of the American Dental Association Joint Commission on National Dental Examinations;
- Has taken and passed a clinical examination administered by a regional examining board <u>designated by the Board</u> within the last five (5) years.

In addition to the general qualifications for licensure by examination, an applicant who is a graduate of a non-accredited school must present proof that the applicant;

- Has graduated from dental school that is not CODA-accredited;
- Has successfully completed training in an ADA-approved speciality in a CODAaccredited education program that consists of at least two years of training as specified by the Council on Dental Education.
  - Recognized Specialties: Endodontics, Periodontics, Oral and Maxillofacial Pathology, Oral and Maxillofacial Surgery, Oral and Maxillofacial Radiology, Orthodontics and Dentofacial Orthopedics, Pediatric Dentistry, Dental Public Health, or Prosthodontics.

Please visit State Board of Dental Examiners for more information.

### <u>Utah</u>

Utah Department of Commerce Division of Occupational & Professional Licensing 160 East 300 South Salt Lake City, UT 84111

Phone: (801) 530-6628

Contact: <u>lmarx@utah.gov</u>

### <u>Utah Requirements</u> 58-69-302. Qualifications -- Licensure as a dentist -- Licensure as a dental hygienist.

An applicant for licensure as a dentist, except as provided in Subsection (2), shall:

- submit an application in a form as prescribed by the division;
- pay a fee as determined by the department under Section 63J-1-504;
- be of good moral character;
- provide satisfactory documentation of having successfully completed a program of professional education preparing an individual as a dentist as evidenced by having received an earned doctor's degree in dentistry from a dental school accredited by the Commission on Dental Accreditation of the American Dental Association;
- pass the National Board Dental Examinations as administered by the Joint Commission on National Dental Examinations of the American Dental Association;
- pass any regional dental clinical licensure examination approved by division rule made in collaboration with the board and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
- pass any other examinations regarding applicable law, rules, or ethics as established by division rule made in collaboration with the board and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
- be able to read, write, speak, understand, and be understood in the English language and demonstrate proficiency to the satisfaction of the board if requested by the board; and
- meet with the board if requested by the board or division for the purpose of examining the applicant's qualifications for licensure.

Please visit <u>Utah State Legislature</u> for more information.

### **Vermont**

Vermont Secretary of State Dental Examiners 89 Main Street, 3<sup>rd</sup> Floor Montpelier, VT 05620-3402

Phone: (802) 828-2390

#### <u>Vermont Requirements</u> **§ 601. License by examination**

To be eligible for licensure as a dentist, an applicant shall:

- have attained the age of majority;
- be a graduate of:

A dental college accredited by the Commission on Dental Accreditation of the American Dental Association; or

A program of foreign dental training and a postgraduate program accredited by the Commission on Dental Accreditation of the American Dental Association that is acceptable to the Board; and

Meet the certificate, examination, and training requirements established by the Board by rule. (Added 2011, No. 116 (Adj. Sess.), § 13; amended 2017, No. 144 (Adj. Sess.), § 14.)

Please visit <u>Vermont Legislature</u> for more information.

### <u>Virginia</u>

Virginia Board of Dentistry Perimeter Center 9960 Maryland Drive, Suite 300 Henrico, VA 23233-1463

Phone: (804) 367-4538

Contact: <u>denbd@dph.virgnia.gov</u>

#### Virginia Requirements

### 18VAC60-21-210. Qualifications for an unrestricted license.

Dental licensure by examination.

- All applicants for licensure by examination shall have:
  - Successfully completed all parts of the National Board Dental Examination given by the Joint Commission on National Dental Examinations; and
  - Passed a dental clinical competency examination that is accepted by the board.
- If a candidate has failed any section of a clinical competency examination three times, the candidate shall complete a minimum of 14 hours of additional clinical training in each section of the examination to be retested in order to be approved by the board to sit for the examination a fourth time.
- Applicants who successfully completed a clinical competency examination five or more years prior to the date of receipt of their applications for licensure by this board may be required to retake an examination or take continuing education that meets the requirements of 18VAC60-21-250 unless they demonstrate that they have maintained clinical, ethical, and legal practice in another jurisdiction of the United States or in federal civil or military service for 48 of the past 60 months immediately prior to submission of an application for licensure.

Please visit **Board of Dentistry** for more information.

### **Washington**

Washington State Department of Health Kent Regional Office 20425 72<sup>nd</sup> Avenue South, Building 2, Suite 310 Kent, WA 98032

Phone: (800) 525-0127

## Washington Requirements

**Requirements for licensure.** 

The commission shall require that every applicant for a license to practice dentistry shall:

- Present satisfactory evidence of graduation from a dental college, school, or dental department of an institution approved by the commission;
- Submit, for the files of the commission, a recent picture duly identified and attested; and
- Pass an examination prepared or approved by and administered under the direction of the commission. The dentistry licensing examination shall consist of practical and written tests upon such subjects and of such scope as the commission determines. The commission shall set the standards for passing the examination. The secretary shall keep on file the examination papers and records of examination for at least one year. This file shall be open for inspection by the applicant or the applicant's agent unless the disclosure will compromise the examination process as determined by the commission or is exempted from disclosure under chapter 42.56 RCW.
  - The commission may accept, in lieu of all or part of the written examination required in (a) of this subsection, a certificate granted by a national or regional testing organization approved by the commission.
  - The commission shall accept, in lieu of the practical examination required in (a) of this subsection, proof that an applicant has satisfactorily completed a general practice residency, pediatric residency, or advanced education in general dentistry residency program in Washington state accredited by the commission on dental accreditation of the American dental association, of at least one year's duration, in a residency program that serves predominantly low-income patients.

Please visit <u>Washingotn State Legislature</u> for more information.

### West Virginia

West Virginia Board of Dentistry 1319 Robert C. Byrd Drive P.O. Box 1447 Crab orchard, WV 25827

Phone: (877) 914-8266

### West Virginia Requirements

### §5-9-3. Application for Licensure of a Dentist.

- Persons seeking licensure as a dentist shall submit an application to the Board prescribed by the Board.
- Each applicant shall submit a fee for application as set forth in the Board's fee schedule.
- Each applicantshallsubmit evidence of graduation with a diploma froman approved dental college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office
- Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.
- Each applicant shall submit evidence of the applicant's successful completion of an examination by a regional and/or state clinical board approved by the Board sent directly from the regional or state board to the Board's office.
- Each applicant shall successfully complete the West Virginia Dental Law Examination.
- Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.
- Each applicant shall submit verification of good moral character by two letters of recommendation frompersons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.
- Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members. Applicants who are or have been given the law exam in a mass examination at a dental school within the boundaries of the State of West Virginia are exempted from this requirement

Please visit West Virginia Dental Board for more information.

### Wisconsin

Department of Safety and Professional Services 4822 Madison Yards Way Madison, WI 53705

Phone: (608) 266-2112

### Wisconsin Requirements

### **DE 2.01** Application for license.

An applicant for license as a dentist shall submit all of the following to the board:

- An application on a form approved by the board.
- The fee authorized by s. 440.05 (1), Stats.
- Evidence of successful completion of an examination on provisions in ch. 447, Stats., and chs. DE 1 to 9.
- Evidence satisfactory to the board of having graduated from an accredited dental school.
- Verification from the commission on national examinations of the American dental association or other board–approved professional testing services of successful completion of an examination.
- Verification from the central regional dental testing service or other board-approved testing services of successful completion of an examination in clinical and laboratory demonstrations taken within the 5-year period immediately preceding application. In this paragraph, "successful completion" means an applicant has passed all parts of the examination in no more than 3 attempts on any one part, as required in s. DE 2.09. Note: Application forms are available upon request to the board office at 1400 East Washington Avenue, P. O. Box 8935, Madison, Wisconsin 53708.

An applicant for a license as a dentist who is a graduate of a foreign dental school shall submit all of the following to the board:

- Evidence satisfactory to the board of having graduated from a foreign dental school.
- The information required in sub. (1) (a) to (d), (f) and (g). (d) Evidence of one of the following:
  - Verification of having been awarded a DDS or DMD degree from an accredited dental school. 2. Verification of having received a dental diploma, degree or certificate from a full time, undergraduate supplemental dental education program of at least two academic years at an accredited dental school. The program must provide didactic and clinical education to the level of a DDS or DMD graduate.
  - An applicant for license as a dental hygienist shall meet requirements in sub. (1)
    (a) through (d) and shall also submit to the board:
- Verification from the commission on national examinations of the American dental association or other board–approved professional testing service of successful completion of an examination on the basic principles of the practice of dental hygiene; and
- Verification from the central regional dental hygiene testing service or other board-approved testing service of successful completion of an examination in clinical and laboratory demonstrations taken within the 5-year period immediately preceding application

Please visit <u>Wisconsin Legislature</u> for more information.

### **Wyoming**

Wyoming Board of Dental Examiners 2001 Capitol Ave, 105 Cheyenne, WY 82002

Phone: (307) 777-7387

Contact: <u>Jason.Brock1@wyo.gov</u>

Wyoming Requirements

### Section 5. Dental Licensure by Examination.

Eligibility. An applicant may seek dental licensure by examination if the applicant graduated from a CODA accredited U.S. or Canadian Dental School within twelve (12) months.

Application Requirements. Applicant shall:

- Submit a completed application and payment of fee;
- Successfully pass the NBDE;
- Successfully pass a regional clinical examination that indicates competency in:
  - Endodontics, including access opening of a posterior tooth and access, canal instrumentation and obturation of an anterior tooth;
  - Fixed Prosthodontics including one of the following:
    - A full crown procedure;
    - An indirect cast class II inlay;
    - An indirect cast class II onlay; or
    - Cast 3/4 crown.

Periodontics, including scaling and root planing on a patient in a clinical setting; and

Restorative Dentistry, including a class II amalgam or composite

preparation and restoration and a class III composite preparation and restoration on a patient in a clinical setting.

- Slot preps shall not be accepted.
- If an indirect inlay, onlay, or 3/4 crown procedure is done on a patient, the applicant shall be required to perform one (1) additional restorative procedure as listed above.

Please visit Wyoming Board of Dental Examiners for more information.