

The American Board of Dental Public Health

Incorporated 1950

Certification As a Specialist in Dental Public Health ABDPH Certification-Examination-Information

Introduction

The American Board of Dental Public Health examination for certification as a Diplomate is designed to be comprehensive and fair to all candidates. The Board evaluates each component of the examination annually, and after completion of the examination, each candidate has an opportunity to comment about the examination and to make suggestions for future improvement. The Board Directors are aware that a certain amount of apprehension exists and make every effort to put the candidates at ease.

Preparation for the examination should be thorough. An excellent reference to serve as the basis for review is: "Dental Public Health Competencies" Journal of Public Health Dentistry Volume 58, Supplement 1, 1998.

- 1. Examinations will be held periodically and in various locations as determined by the Board.
- 2. Unless otherwise informed, the ABDPH examination will be given over 3 days beginning on the Thursday preceding the National Oral Health Conference.
- 3. The applicants shall be notified of the date and place of the examination at least 60 days in advance
- 4. The examination has four sections as follows:

ABDPH Examination Section	Percent
Section 1: Written Project Reports	20%
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Section 2: Oral examination 1 on Project Reports	20%
Section 3: Oral examination 2 on Assigned Problem	30%
Section 4: Written examination on General Knowledge	<u>30%</u>
Overall Score 🗲	100%

- 5. Each section of the examination, except the written examination, is scored separately and individually by each member of the Board. A candidate receives a final score which is the weighted average of all sections using the percentages described in (4) above. A passing score requires BOTH an overall average score of 70, AND a score of 60 or above on each of the four sections. In addition, each project report must receive a score of 60.
- 6. Upon request, candidates may receive from the Executive Director the results of their separate section and total examination scores. Those candidates who would like to receive their exam score must submit a written request to the ABDPH Executive Director within 60 days of completing the examination.

Description of each Examination Section:

- 1. Section 1: Written Project Reports. This is the Board's evaluation of two project reports. The reports must be received by October 1st of the year prior to the one in which the applicant will be examined. One portable document format (pdf) file for each report must be submitted electronically to the Executive Director at abdph@comcast.net. Name the Project Reports as: ABDPH-2XXX (Year of Exam)-PR1 (or PR2)-YYY (YYY is the # Assigned by Executive Director, for example: ABDPH-2099-PR1-007 and ABDPH-2099-PR2-008). The Executive Director will review the reports for compliance with the guidelines (See Instructions for preparing project reports below). Board Directors will score the reports and send the results to the Executive Director. You will be informed as to whether you have received a failing score for one or both reports by February 1st. A failing score is less than 60% on either of the two reports. You will not be informed however if you have received a passing score.
 - Failure of Section I: Written Project Reports constitutes a failure of the full examination. A candidate failing the examination may reapply for the examination for a fee of \$500 after submitting revised or new project reports. For further information, please see ABDPH Examination-Information on the American Association of Public Health Dentistry Home Page, www.aaphd.org, link to the **ABDPH Webpage**.
- 2. Section 2: Oral Examination 1 on Project Reports. This is the Board's evaluation of the candidate's ability to discuss, defend, and explain various aspects of the two written project reports previously submitted. For each project, the candidate will be asked to give a brief five minute oral overview of the project, followed by 20 minutes of questions and answers from the Board.
- 3. Section 3: Oral Examination 2 on Assigned Problem. This is a test of the candidate's ability to discuss his or her analysis and possible solutions to a hypothetical dental public health problem. This section of the examination is designed a) to evaluate the candidate's ability to understand the problem in relation to the information provided; b) to present rational solutions and alternatives based on the available information; c) to assess the candidate's rationale for selecting the choice of approach; and d) to evaluate the reasonableness and practicality of the choice of solution in regard to timing, resources, public and professional acceptance, legal and ethical considerations, cost-effectiveness and justification of the resources required. There is no single correct solution and each candidate's approach should be unique. A written description and ancillary information on the dental public health problem will be given to each candidate on the first day after completion of the oral examination of the project reports. An oral examination of the candidate's solution to the problem will be conducted the following day. The candidate will be given 20 minutes to present his/her solutions, followed by 30 minutes for questions from the Board. The candidates may bring written notes to this examination for reference while making their

- presentation. PowerPoint presentations on an LCD projector are NOT allowed due to time constraints; however, the candidate MUST provide a handout to board members that outlines/summarizes the components of their solution. There is no requirement for the format of the handout.
- 4. Section 4: Written Examination on General Knowledge. This is a comprehensive 100-item multiple choice examination (five choices). The written examination is designed to test the applicant's basic knowledge of the theory and practice of dental public health. Questions are based upon the four (4) areas in the Definition of the Specialty of Dental Public Health and the ten Dental Public Health Competencies. The overall score is based upon the number of correct answers; thus, the candidate should choose what he or she considers to be the most correct answer for each question (Do not leave questions answered). You are allowed to bring into the examination room ONLY a pen, No. 2 pencil(s), pencil eraser, time piece, and a pocket calculator. There will be some simple calculations on a few of the questions and a calculator, although not absolutely necessary, would be helpful. Cell or smart phones, Ipads or tablets are NOT allowed. A proctor will be available during the four hours allocated for the written examination. The proctor will not be able to answer issues of content but will bring to the attention of the Board if there is a missing page or a typographical error.

5. Note:

- A. If a failing score (below 60%) is received on the written examination only, the candidate can retake the written examination for a \$100.00 fee when taken at a regularly scheduled examination (April of the following year). Requests to take the written exam at an alternative time and site must be approved by the Board and must have a strong justification for consideration by the Board. In these cases, Candidates will be required to pay the \$200 fee plus an off-site fee of \$100 for a total fee of \$300. The written examination may be retaken no earlier than six months after the original examination. The examination must be proctored by a Diplomate who has been approved by the Board and who is not the candidate's residency supervisor. Contact the Executive Director, ABDPH for additional information.
- B. If a candidate fails a single portion of the examination besides the written examination, the candidate would be givens the opportunity to retake only that portion of the examination at a regularly scheduled examination. The fee to retake one section of the exam is \$200. If the candidate is unsuccessful on two or more portions of the examination or if an overall average score of 70% is not achieved even though no score is below 60%, it would be at the discretion of the Board as to what the requirements would be for reexamination. If the Board allows the candidate to retake two or more sections of the exam, the fee is the same as for the full exam, \$500.
- C. <u>Conditional eligibility</u>: If the candidate cannot forward the copy of the actual certificate of Masters of Public Health degree or equivalent, or the certificate of residency or equivalent (for example Doctoral Degree) at the time of submitting the application, the ABDPH could declare the

candidate as *conditionally eligible*. The conditional eligibility is contingent on sending a copy of the appropriate certificate(s) to the Executive Director, ABDPH at least TWO (2) months prior to the examination. In these circumstances, the Board will accept a letter signed by the candidate's supervisor certifying that the training has been completed satisfactorily and explaining the reason why the certificate could not be issued on time. The certificates itself must be submitted in order to complete the requirements. If the ABDPH have not received the certificate or the letter on time, the conditional eligibility will be voided and the candidate will have to reapply after the requirements are completed in full. (Approved: 9/22/13 ABDPH)

Instructions for Preparing Project Reports

1. Project Report Guidelines

Project Reports should be clearly numbered 1 and 2. The projects **must** be completed at the time of submission. Terms such as "results will be presented at the oral examination" or "these are preliminary results" are NOT acceptable. Those projects will receive a failing score. Each report should summarize a **dental public health** project originated and completed by the Candidate, or one where he or she have made a major contribution to its planning, implementation, and interpretation. Protocols, grant applications, reviews of the literature, site visit reports, and preparations for a conference, are **not** acceptable project reports. Term papers or dissertations may serve as a basis for project reports but need to be re-written to meet the required format. A systematic review of the literature may be a suitable project report if a meta-analysis or some other analytical procedure is included in the methodology.

The project reports should demonstrate a depth of experience in dental public health, and must represent a separate project (not two reports from one project), with the two projects having distinct methodology and data sources. The projects must be significant in scope and represent an extensive effort. At least one project must demonstrate the analytical or statistical skills of the candidate.

Types of acceptable Project Reports include: 1) administrative program planning and implementation, 2) epidemiologic studies, 3) health services research, 4) clinical trials, 5) oral health promotion and disease prevention, and 6) other research related to dental public health. Major secondary analyses of existing datasets are also acceptable for one of the project reports.

The chosen projects must have been completed within 10 years of the applicant's examination and the project report must represent current knowledge. If a candidate postpones an examination after projects have been graded, and changes affecting the projects or the relevant scientific literature have occurred, the ABDPH may ask the candidate to resubmit project report(s). The ABDPH does not provide advice on the suitability of specific studies (planned or conducted) as project reports. The Board encourages candidates to discuss the two project reports with their supervisors before and after the projects are completed.

2. Project Report Format

Project Reports should be no more than 25 double-spaced, numbered, typewritten pages, including the cover page, table of contents, abstract, main body of the report, references, tables and figures, and appendices if needed. The body of the report should be no more than 15 pages. Font size should be Times, New Roman font 12 cpi. All margins should be one inch on standard 8.5 x 11 inch paper. Number and label each section as recommended in the guidelines (below). Do not alter the order of the sections. Do not leave extra line spaces between sections. The ABDPH strongly suggests having the final manuscript reviewed by your Program Director or another person with previous experience in editing scientific publications. The submitted manuscript should be of the same quality as one would submit as a publishable paper to the Journal of Public Health Dentistry (JPHD). See JPHD's Instructions for Contributors at: http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1752-7325/homepage/ForAuthors.html

After you have completed these steps, make a portable document format (pdf) file and send it to the Executive Director, ABDPH.

Project Reports **must** conform to the following sections and guidelines:

- A. Title of the Project. A cover sheet bearing the title should be the first page of the report. Please do not place your name on it. The Executive Director, ABDPH will assign a three digit code number to each report. Name the Project Reports as: ABDPH-2XXX (Year of Exam)-PR1 (or PR2)-YYY: (YYY is the # assigned by the Executive Director) followed by the Title of the Project. [Example: ABDPH-2015-PR1-007: Title of the Project and ABDPH-2015-PR2-008: Title of the Project).
- B. Table of contents.
- C. Abstract. Structured abstract with clearly labeled Objectives, Methods, Results, and Conclusions/Recommendations and no longer than 250 words or one page in length.
- D. Candidate's role. Describe in one or two paragraphs with sufficient level of detail the candidate's specific role as originator or major contributor to the project. Explain your participation in the planning, implementation, interpretation and completion of the project.
- E. Problem identification. Please describe the public health problem object of your study and described in your project report.
- F. Background and review of the current pertinent literature. Do not just describe the studies supporting or not your hypothesis or objectives, but also provide some assessment of the quality of the works cited.
- G. Objective(s) or hypothesis(es). Describe your study objective(s) and/or the specific hypothesis(es).

- H. General description of the project. Please include aspects such as the population studied geographic location and inclusive dates. If the project relies on analysis of secondary data indicate the sources of the data and a general description of the characteristics of the dataset.
- I. Methods and procedures. Provide sufficient information to demonstrate the logical process and scientific rigor of your approach to test your hypothesis or achieve your objectives. Include analytic methods with sufficient level of detail. Reports must address human subjects' considerations, including consent and assent if applicable. Discuss Institutional Review Board (IRB) approval. If the study involves human subjects or animals and was exempt from informed consent, explain why and who granted that exception (For example, if a project was administrative and not research, IRB approval would not be necessary.)
- J. Results. Besides text, include self-standing information in tables and graphs.
- K. Discussion. This section should be comprehensive and clear. Did you achieve your objectives? Did you reject your null hypothesis? How do your results agree or disagree with similar studies? Provide potential reasons for lack for agreement. Highlight how your results contribute to filling gaps, resolving controversies, or providing new knowledge on the topic. What are the public health implications of your results?
- L. Strengths and limitations of the study. Include what you would do differently if having the opportunity to repeat the project.
- M. Conclusions and public health recommendations. Emphasize the new and important aspects of the study and conclusions that follow from them, particularly as these relate to public health policy.
- N. References. Please be sure that all references in the text are included in the list of references and that references are not repeated. Check special formatting requirements below.
- O. Appendices. Use this section to provide any documentation in support of your methods. Please do not include your tables here. Keep in mind that these pages are included within the total number of pages allowed.

Note: Please follow the preceding guidelines before you submit electronically your project reports. The ABDPH evaluate the project reports in the format they are received. You may not receive full scores if the information requested is not present or is misplaced.

<u>References.</u> The author(s) must verify cited references against the original publications. Identify references in text, tables, and legends by Arabic numerals in parentheses; number them consecutively in the order in which they are first mentioned in the text. Avoid using abstracts as references. Abstracts not published in the periodical literature (e.g., printed only in an annual meeting program) may be cited only as written communications in parentheses in the text. "Unpublished observations" and "personal communications" may

not be used as references, although references to written, not oral, communications may be inserted (in parentheses) in the text. For papers accepted but not yet published, designate the journal and add "In press." Information from manuscripts submitted, but not yet accepted, should be cited in the text as "unpublished observations" (in parentheses). Authors should use the Vancouver style as requested by the Journal of Public Health Dentistry Instructions for Contributors at: http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1752-7325/homepage/ForAuthors.html

Tables and Figures. These should be numbered as they appear in the presentation of results. Each Table and Figure should have a descriptive title indicating what is in the table, the population represented, place of the study, and time. Use footnotes in each table to clarify acronyms or groups in the table that are statistically compared. Use Arabic numbers as call characters for each footnote. A large table can be broken into two components with clarification on the title that the second part is a continuation of a previous table.

Graphs are meant to be easy to understand and clarify an item that is not visually clear in the tables. Make graphs of appropriate size and clearly labeled. Do not break a Figure. Keep in mind that tables and graphs are "self-standing" meaning a reader should make sense of what is in the table without referring to the written text. Include all figures and tables after the references in your project reports. Do **not** insert the tables and figures in the text. Do not collate all Tables and Figures in an Appendix.

3. Scoring of Project Reports

The two Project Reports are considered and scored collectively <u>as one of the four sections</u> of the examination and count for 20% of the final score. You will be scored based on the information you provide showing your logical processes and scientific rigor, from your initial question to the conclusions of your project.

Prior to grading, each Project Report is evaluated according to the following criteria to determine if it is eligible for grading:

- A. Is the project primarily the work of the candidate?
- B. Is the project primarily concerned with dental public health as defined by the Board? ("Dental Public Health is the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. It is that form of dental practice that serves the community as a patient rather than the individual. It is concerned with the dental health education of the public, with applied dental research, and with the administration of group dental care programs, as well as the prevention and control of dental diseases on a community basis. Implicit in this definition is the requirement that the specialist have broad knowledge and skills in public health administration, research methodology, the prevention and control of oral diseases, and the delivery and financing of oral health care.")
- C. Does the project report's format conform to the sections' guidelines specified in the preceding section 3: "Project Report Format?"

If the Board approves the Project Reports after applying these three criteria, then each project is scored anonymously based on each of the following criteria. (If a report does not meet these three criteria, the candidate will fail the exam and will need to reapply in a future year)

- A. Problem identification.
- B. Background and review of the current pertinent literature.
- C. Objective(s) or Hypothesis(es).
- D. General description of the project.
- E. Methods and procedures.
- F. Results.
- G. Discussion.
- H. Strengths and limitations of the study.
- I. Conclusions and public health recommendations.
- J. Clarity of writing and overall style of the report.

4. Timelines:

- A. Electronic Application for Full Examination submitted no later than September 15th of the year before the candidate wants to take the examination.
- B. Notification of eligibility to take examination and submit Project Reports no later than September 24th of the year before the candidate wants to take the examination.
- C. Electronic Project Reports due to Executive Director no later than October 1st of the year before the candidate wants to take the examination.
- D. Results of unacceptable scores (less than 60%) for either Project Report are sent to Candidates: February 1st. pf the year of the examination.

Note: Please be aware of the timelines and check with the Executive Director if you have any questions. After the Executive Director notification that you are eligible to take the examination there are two weeks before the Executive Director must receive your project reports. You should complete most of the final format of the project reports before you apply for examination September 15th. If you receive information from the Executive Director about problems with your project reports, please reply immediately. If timelines are missed you will not be able to take the examination that year.

5. Exam Fees Schedule:

- A. Total examination fees: \$800
 - i. Full exam application fee (due with application): \$300.
 - ii. Full exam fee (due when submitting project reports): \$500.
- B. Written examination only \$100.
- C. Retake examination fees:

- i. Retake written examination only \$100.
- ii. Retake full examination fees: \$500.
- iii. Retake one section of full examination: \$200 (Includes Section 2: Oral examination 1 on Project Reports, Section 3: Oral examination 2 on Assigned Problem.
- iv. Retake two or more parts is considered the same as retaking the full exam: \$500
- v. Requests to take the written exam at an alternative time and site approved by the Board must have a strong justification for consideration by the Board, such as passing all parts of the full examination except the written examination. Candidates will be required to pay a \$200 fee (See "iii".) plus a \$100 off-site fee, for a total fee of \$300. The written examination may be retaken no earlier than six months after the original examination. The examination must be proctored by a Diplomate, who has been approved by the Board, and who is not the candidate's residency supervisor. Contact the Executive Director, ABDPH for additional information.

7. Conflict of Interest:

Many ABDPH Directors are currently or have been past Residency Directors, or supervised dental public health residents' Projects. When a Director evaluates a candidate's application, the Director can be objective and "vote" for Board eligibility under most circumstances. The ABDPH takes into consideration potential conflict of interest when a Director has to provide a score to a candidate who has been a former resident. In such cases, the Director is not assigned as primary or secondary reviewer of the Project Reports but will be asked to score the written component of the project reports. If there is a question about the Director's ability to objectively evaluate the written project report, the Director discusses the potential conflict with the President, ABDPH or the Executive Director, ABDPH. If there is doubt, the Director will be recused from scoring the project to avoid possible conflict of interest.

American Board of Dental Public Health Policy and Procedures for Appeal

1. Actions Subject to Appeal

A decision made by the Board relative to an application or an examination may be appealed by an applicant or candidate. Requests for additional information regarding an application or examination result are processed routinely and are not considered part of the appeal process. The correspondence for such information becomes part of the candidate's or applicant's file, but does not modify or alter any decision made by the Board.

2. Communication Regarding an Appeal

All correspondence regarding an appeal will be through the Executive Director of the American Board of Dental Public Health.

3. Submission of an Appeal

Appeals must be submitted in writing to the Executive Director of the American Board of Dental Public Health within sixty (60) days following notification of a decision of the Board. The written appeal should be dated, identify in concise terms the decision being appealed and provide a brief outline of the reasons why the Board's action was not fair or reasonable. No decision shall become final while an appeal is pending or until the sixty (60) day period for filing notice of appeal has elapsed. The appellant will be notified in writing of the receipt of the appeal, and informed that the appeal will be reviewed and responded to within sixty (60) days of the receipt of the appeal.

4. Appeals Review Process

The appeals process begins with a review of the submitted appeal by the Appeals Committee, consisting of two Board Directors and the immediate past-president once removed. The Appeals Committee will review the appeal and all relevant facts, and submit their recommendation to the Board. The final decision will then be transmitted by the Executive Director to the appellant.

If the decision is not acceptable to the appellant, the appellant has sixty (60) days to resubmit the appeal. This second appeal is reviewed by an Appeals Panel consisting of three past presidents (not including the past-president serving on the Appeals Committee). The Appeals Panel is selected by the Board and members serve for a five year period. The Appeals Panel has sixty (60) days to process the appeal. If the appeal necessitates a hearing, the hearing will be scheduled at the next annual meeting of the Board. The appellant will incur the costs of his/her travel and the Board will cover the travel costs for Appeals Panel members. The recommendation of the Appeals Panel will be provided to the Board who in turn will review it and submit their second and final response to the appellant.