

**Becoming a Diplomate  
of the American Board of Periodontology**

**The Candidate's Guide to the  
Board Certification**





## PERIODONTOLOGY AS A SPECIALTY

Periodontology is one of the nine dental specialties recognized by the American Dental Association. Periodontics is that specialty of dentistry, which encompasses the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function and esthetics of these structures.

The specialist in Periodontology is an expert in the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes, regeneration of lost components of the periodontium, and the maintenance of the health, function and esthetics of these structures and tissues.

The American Board of Periodontology (the 'ABP') was organized by The American Academy of Periodontology (the 'Academy') in 1939. The mission of the American Board of Periodontology is to advance the art and science of Periodontics and elevate the quality of periodontal care through the examination, certification, and recertification of periodontists and by encouraging the achievement and maintenance of Diplomate status.

- Encourage Periodontists to pursue the Board Certification process.
- Administer a Recertification process to assure continued professional development
- Elevate the quality of care in the specialty of Periodontics.
- Collaborate with other entities and organizations to improve the profession of Dentistry.



The mission of the American Board of Periodontology is to certify the achievement of in-depth knowledge and proficiency in the full scope of periodontology and dental implant surgery through examination and periodic recertification.

To accomplish its major mission, the Certification process is divided into three phases:

1. Periodontists must pass the Qualifying Examination to become eligible to apply for the Oral Examination.
2. Candidates become Board Certified and Diplomates of the Board when they successfully complete the Qualifying and Oral Examination.
3. In order to maintain a high level of competency and active certification, Diplomates of the Board must recertify every six years by obtaining 60 points of Continuing Education and completion of the on-line Self Study Recertification Program.

The activities of the American Board of Periodontology conform to the "Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists" of the Council on Dental Education and Licensure of the American Dental Association.

The vision of the American Board of Periodontology is that all periodontists achieve Board certification and that diplomates of the Board are universally recognized by the public, the dental profession, the medical community, and third-party payers as the preferred providers of periodontal and dental implant surgical care.

## EXAM COMPOSITION

The Qualifying Examination is a multiple choice, computer-based test that covers a broad range of information relating to the science and practice of periodontology. Subject areas include basic science, oral medicine/oral pathology, periodontal histology/periodontal pathology, epidemiology/statistics, and evidence-based clinical practice.

A computer Based Test Tutorial is available at [www.MeasurementResearch.com](http://www.MeasurementResearch.com). Click the "Specialty Board Exams and Computer Based Testing" link to obtain general information about computer-based testing and answers to frequently asked questions, as well as practice taking an exam using Computer Based Testing.

## EXAM DATES AND LOCATION

The Qualifying Exam will be conducted yearly. It may be taken on one day at regional testing centers. Information regarding currently available testing center locations can be found on the web at [www.pearsonvue.com](http://www.pearsonvue.com) or by calling the Board office at 410-437-3749. When possible, the examination will be offered on 2-5 consecutive days and candidates may select their testing center on a first come, first serve basis.

## EXAM APPLICATION PROCESS

You will need to complete the Qualifying Exam Application Form, Qualifying Examination Attestation Form, and Qualifying Exam Credentials Form which may be downloaded from the Board's website at [www.abperio.org](http://www.abperio.org). Make sure all documents are signed and dated and all questions are answered. The Application, Attestation, Credentials Form and evidence of completion of an accredited program must accompany the application fee of \$850.00 US and must be submitted by June 15th.

Evidence of successful completion of an ADA accredited program in Periodontics must be submitted with your application. This consists of a copy of your certificate or an official letter signed by the program director and the dean (or equivalent administrative officer) that specifies:

"successful completion of an educational program in Periodontology, which is accredited by the Commission on Dental Accreditation".

Acceptance of submitted documentation is at the sole discretion of the Board.



Candidates unable to obtain verification of successful completion of their program due to research requirements (M.S., M.S.D.) or clinical requirements must have their program director submit the following statement with the program director's signature:

"It is anticipated that Dr. \_\_\_\_\_ will satisfy all requirements and successfully complete the program in Periodontics prior to the ABP Qualifying Exam".

Under these circumstances candidates will be permitted to take the Qualifying Exam and receive their results. However, candidates must submit evidence of successful completion of their program (certificate or letter stating they HAVE successfully completed their program signed by BOTH the Program Director and the Dean (or equivalent administrative officer) before applying for and taking the Oral Exam. Acceptance of submitted documentation is at the sole discretion of the Board.

## OBTAINING APPLICATION FORMS

1. Download at ABP website at [www.abperio.org](http://www.abperio.org)
2. Calling the Board office at (410) 647-1324
3. Request via email [info@abperio.org](mailto:info@abperio.org)

## NOTIFICATION OF APPLICATION STATUS

Candidates will receive e-mail notification of receipt of application, fees, and enclosures.

## TESTING CENTERS

The Board will provide Pearson Vue with the names of accepted candidates. Accepted candidates will be able to register at specific testing centers after Pearson receives notification from the Board office of approved candidates prior to the examination date.

Candidates must acquire a username and password before they can schedule an appointment to take an exam. We recommend using the first initial of your first name, first initial of your middle name, and full last name for the username. The password can be anything under 40 characters.



## registering for the qualifying exam

After receiving confirmation of your username and password, which can take up to 24 hours, the candidate can schedule, reschedule and cancel exams via the Internet. Candidates may also check their status, change their password, check which exams are offered and look up testing center locations. Candidates may access this information by visiting the Pearson Vue website at: [www.pearsonvue.com/abp](http://www.pearsonvue.com/abp)

### REQUEST A USERNAME & PASSWORD

1. Call Pearson VUE to receive your username and password at 1-877-435-1414, Ext 6; or
2. Go to the Board's landing page: <http://www.pearsonvue.com/abp>; Click on "Create a Web Account" and enter demographic information (note all fields with \* are required). Entering a candidate's e-mail address is not mandatory, but **STRONGLY RECOMMENDED**, so candidates will receive their confirmation letter via e-mail.

**NOTE:** The candidate will receive an e-mail with their username and password within 24 hours.

### SCHEDULING AN EXAM APPOINTMENT

1. Go to <http://www.pearsonvue.com/abp>
2. Click "schedule or reschedule an exam online."
3. Enter user name and password to sign-in
4. Select appropriate exam name abbreviation for which you are authorized
5. Select the language of the exam (all exams will be given in English only) Select Testing Center (a listing of all Pearson Professional Testing Centers will appear for the State the individual resides in).
6. Search available dates and times to schedule an exam.

7. Choose an appointment from the search of dates and times.
8. A confirmation screen including the exam name, appointment date, time, and testing center location will appear.
9. A confirmation letter will also be sent via email to the candidate.

### CONFIRMATION OF APPOINTMENT

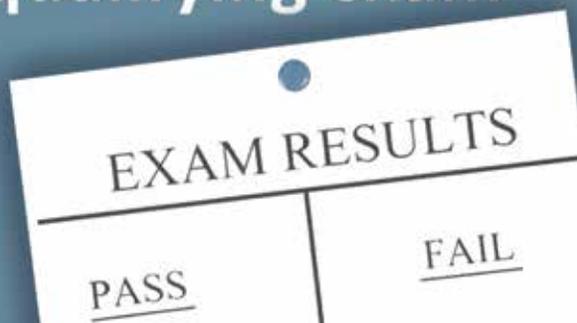
After registration for an appointment is complete, the candidate will receive a confirmation letter via e-mail, fax or postal mail. Due to system limitations, Pearson Vue is not able to receive copies of faxed or mailed confirmation letters.



Exam candidates are required to agree to the following confidentiality agreement:

"I understand that the Board wishes to keep all test questions confidential so that they will not become available to future examinees, who may thereby obtain an unfair advantage. Accordingly, I agree not to retain the examination and not to discuss the questions or answers with anyone other than those who have taken this examination with me. I further understand that this examination is copyrighted work of the Board and that copying of any questions in any form constitutes infringements of the Board's copyright."

# scoring & reporting results for the qualifying exam



## EVALUATION AND NOTIFICATION

Evaluation of performance is criterion based and done in consultation with Measurement Research Associates, Inc. Examination results will be sent in writing to the candidate by postal mail approximately 8 weeks following the close of the exam session. Only notification of success or failure is provided to candidates; no specific grades are reported.

Candidates are solely responsible for notifying the Board office of any change in mailing address, to ensure the timely delivery of results.

Please note, examination results will not be provided over the phone, by facsimile, or email. Candidates who fail the exam may discuss results with the Executive Director of Examinations by calling the Board office to schedule an appointment.

Exam questions are not released, and all questions are copyrighted by The American Board of Periodontology.

## FAILING THE QUALIFYING EXAM

Candidates who are not successful in passing the Qualifying Exam may reapply by submitting a completed application and the reapplication fee of \$850 by the published deadline for the next exam administration. No applications fees will be refunded to failing the Qualifying Exam.

## PASSING THE QUALIFYING EXAM - NEXT STEPS

Candidates who pass the Qualifying Exam must complete the Oral Exam within two (2) years from the year the Qualifying Exam was successfully completed unless an extension is granted.

## EXTENSION OF ELIGIBILITY

A request for a one-year extension to complete the Oral Exam may be made in writing to the Board office and must be received by October 31st of the year prior to eligibility expiration (i.e. Eligibility expiration of 2013; request for Eligibility extension must be received by October 31, 2012).

The Executive Director of Examinations will approve extensions for qualified candidates without Board action. Questionable requests will be considered by the Board.

Requests will be granted only when in the Board's judgment the candidate was prevented from taking the Oral Exam due to extreme extenuating circumstances. A maximum of one request will be considered by the Board.



### ABOUT THE QUALIFYING EXAM

The Qualifying Exam is a multiple choice, computer-based test that covers a broad range of information relating to the science and practice of periodontology. Subject areas include basic science, oral medicine/oral pathology, periodontal histology/periodontal pathology, epidemiology/statistics, and evidence-based clinical practice.

The Qualifying Exam is conducted annually, typically in August, at regional testing centers. The exam is typically made available for 2-5 business days.

### THE EXAM BLUEPRINT/CONTENT OUTLINE

The following specifications represent the categories of the knowledge base considered by the Board to be important in the science of Periodontology and/or relevant to the proficient practice of periodontics. The items developed according to these specifications for inclusion in each examination represent a consistent sampling of Periodontology and reflect subject matter beyond the predoctoral curriculum. Basic science content will be included to the extent that it addresses the scientific basis for diagnostic and therapeutic skills required in clinical application and the future advance of the specialty.

#### I. Basic Science

##### A. Anatomy

1. Gross surgical anatomy
2. Microanatomy
3. Ultrastructural anatomy
4. Growth and pathology

##### B. Biochemistry-Physiology

1. Biochemistry
  - a) Connective tissue
  - b) Hard tissue
  - c) Cell biology
  - d) Inflammation
2. Physiology
  - a) Cardiovascular
  - b) Endocrine
  - c) Neural

##### d) Other

#### C. Immunology

1. Anatomy of the immune system
2. Humoral and complement
3. Cell mediated
4. Immune deficiencies

#### D. Microbiology

1. Biology of microorganisms
  - a) Bacteria
  - b) Viruses
2. Pathogenic mechanisms

#### E. Pharmacology

1. Antimicrobials
  - a) systemic agents
  - b) local agents
2. Narcotics and analgesics
3. Cardiovascular
4. Emergency Drugs
5. Drug interactions

#### F. Molecular Biology

#### G. Genetics

#### II. Clinical

##### A. Diagnosis

1. Medical and dental history
2. Clinical findings/interpretation
3. Diagnostic techniques
  - a) Probing
  - b) Radiology/imaging
  - c) Crevicular fluid
  - d) Disease activity
  - e) Microbiologic findings
4. Pulpal-periodontal pathology

##### B. Etiology

1. Plaque
2. Local factors
3. Occlusion
4. Iatrogenic factors
5. Tobacco products

##### C. Prognosis

##### D. Treatment Planning

##### E. Therapy

1. Plaque control, behavioral modification, devices
2. Non-surgical
  - a) Root planing
  - b) Systemic/local adjuncts
3. Occlusal therapy
4. Periodontic-Orthodontic therapy
5. Surgical therapy
  - a) Gingivectomy and gingivoplasty
  - b) Gingival attachment procedures

- c) Regeneration or replacement of periodontal supporting structures (GTR)
    - d) Osseous resection
      - (1) treating disease
      - (2) functional and esthetic crown lengthening
    - e) Mucogingival procedures and flap management
    - f) Tooth/Root resection and furcation management
    - g) Perioplastic surgery
  - 6. Guided bone regeneration
    - a) Alveolar ridge augmentation
    - b) Sinus augmentation
    - c) Tooth socket preservation
  - 7. Dental implants
  - F. Maintenance
- III. Oral Pathology and Oral Medicine
- A. Ulcers and vesicular-bullous lesions
  - B. Hypersensitivity reactions
  - C. Discolorations and Pigmentation
  - D. Neoplasms
    - 1. Malignant
    - 2. Non-malignant
  - E. Infections
  - F. Syndromes
  - G. Endocrine
  - H. Oral manifestations of systemic disease
  - I. Laboratory tests
- IV. Periodontal Histology and Pathology
- A. Gingivitis
    - 1. Plaque related
    - 2. Non-plaque related
  - B. Periodontitis
    - 1. Chronic periodontitis
    - 2. Aggressive periodontitis
    - 3. Periodontitis associated with systemic disease
  - C. Necrotizing Periodontal Diseases
    - 1. Necrotizing ulcerative gingivitis
    - 2. Necrotizing ulcerative periodontitis
  - D. Mucogingival Deformities
    - 1. Recession
    - 2. Ridge defects
  - E. Abscesses of the periodontium
    - 1. Periodontal and Gingival abscesses
  - F. Occlusal trauma
  - G. Gingival enlargement
    - 1. Drug related
    - 2. Non-drug related
- H. Periodontal histology-histopathology
- 1. Periodontal structures
  - 2. Periodontal ultrastructure
  - 3. Pathogenesis
- I. Periodontic-Endodontic Lesions
- J. Wound healing
- V. Epidemiology and Statistics
- VI. Systemic Implications
- A. Cardiovascular
  - B. Pregnancy
  - C. Respiratory
  - D. Diabetes
  - E. Other
    - 1. Diet/Nutrition
    - 2. Aging
    - 3. Stress
    - 4. Osteoporosis

# oral exam process



The exam follows a presentation, interview, and discussion format to evaluate the candidate's diagnostic and therapeutic skills. Candidates may request information from the Examiners to answer questions. Protocols developed by the Board form the basis of the testing process. Three protocols will be presented at each of two, 1 ½ hour sequential (back to back) sessions on the same day, for a total of six protocols. Each session will be conducted by a team of two Examiners, for a total of four Examiners. ABP Directors and Examiners serve as Examiner teams. Five of the six protocols will consist of a single case or procedure. Each will be graded in six skills; Diagnosis, Etiology, Prognosis, Treatment Plan, Therapy, and Evaluation of Therapy and Maintenance. The sixth protocol will consist of three ten-minute vignette protocols. These may include such topics as medical management, medical emergencies, periodontal and oral medicine, perio-pathology, post-op complications and management of failures. Each ten-minute vignette protocol will be graded on only two skills: Diagnosis and Therapy. This sixth protocol will therefore have six grades from each Examiner, which is the same number of grades as the other five protocols. (Since the six grades for the vignette protocols are only in the Diagnosis and Therapy categories, these two categories will be slightly more weighted than the other four grading categories for the overall score.)

## APPLICATION PROCESS:

Applications may also be downloaded from the Board's website at [www.abperio.org](http://www.abperio.org) or obtained by calling the Board office at (410) 647-1324.

Assignment of candidates to a session will be at the sole discretion of the Board.

Applications for the Oral Exam will not be approved if candidate has not submitted evidence of completion of an ADA accredited program in Periodontics. Evidence consists of a copy of the candidate's certificate or an official letter signed by BOTH the program Director and the Dean (or equivalent administrative officer) that specifies "successful completion of an educational program in Periodontology, which is accredited by the Commission on Dental Accreditation.

In order to register for the Oral Examination:

1. Complete the Oral Examination Application Form.
2. Read, date, and sign the Oral Examination Attestation Form (on-line application includes e-signature).
3. Read, answer questions, date, and sign the Oral Examination Credentials Form (included as a part of the on-line application).
4. Complete the on-line application or , mail completed Oral Exam Application, Attestation, and Credential Forms along with exam fee of \$2,100 (in U.S. Dollars, drawn on U. S. Bank) to the Board office by October 31st of the prior year in which you plan to take the Oral Exam.

5. Provide a full color passport style photo (allowable formats include jpg, tif, png, pdf).Candidates who request to withdraw from the oral examination must submit their request in writing to the Board office.
6. Candidates who withdraw and whose eligibility has not expired may transfer their oral examination fee to a subsequent examination for a reapplication fee of \$600. Candidates withdrawing with special circumstance; (i.e. illness, family death, national disaster) may submit written request to the Board that the oral examination reapplication fee be waived. The decision will be at the sole discretion of the Board and candidates will be notified in writing of the Board's decision.
7. Candidates who fail to attend the mandatory Orientation Session prior to the Oral Exam; or who fail to show for the Oral Examination must restart the application process by submitting a new completed application,attestation, and credential forms and fee of \$2,100.00 to the Board office.

## EXAM DATES AND LOCATION:

The Oral Exam is given each year at a time and place determined annually by the Board. Please visit the Board website at [www.abperio.org](http://www.abperio.org) for details on specific exam dates and locations.

## ORIENTATION

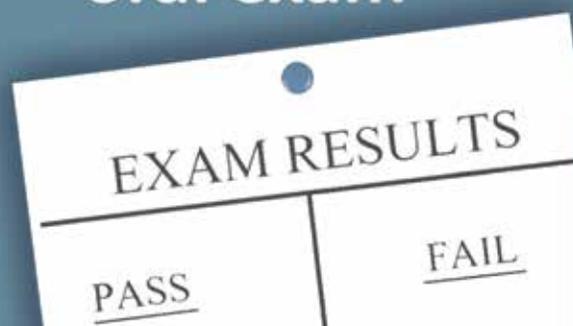
A mandatory candidate registration/orientation session will be held the day of candidate's exam at the testing center prior to the candidate's first 1.5 hr oral exam. Candidates must arrive and leave the testing center via shuttle transportation provided by the Board. Candidates will be picked up by the shuttle transportation at the designated candidate hotel and taken to the testing center. Candidates are required to show photo id at registration. Candidates will complete registration sign-in forms and will receive the oral exam orientation. Candidates will be taken back to the designated candidate hotel by shuttle transportation provided by the Board after their exam session is completed.



## incident reporting

If, before the exam begins, a candidate recognizes one of their Examiners as their program director or residency faculty, the Examiner will contact the Executive Director of Examinations and Professional Affairs, so that the issue can be considered, and appropriate modifications will be made. If during the exam a Candidate becomes ill or if the judgment of the Examiners, unable to answer questions, the Examiners may terminate the exam and request the Board to reschedule the exam. If during the examination a Candidate becomes hostile toward an Examiner or accuses the Examiner of bias or inappropriate conduct, the Examiners may terminate the exam and request the Board to reschedule the exam. Incident reports are available to Examiners and Candidates and should be completed at the time of the exam. Reports of Incidents are referred to the Executive Director of Examinations and Professional Affairs. Ultimately, rescheduling of the exam is at the sole discretion of the Board.

## scoring & reporting results for the oral exam



Candidates will be graded in each of the six (or in diagnosis and therapy only for the vignette protocol) categories listed in the oral examination process section of these Guidelines. Candidates are scored independently by each member of the Examiner teams (2 each session). Each skill is graded as: 4-Outstanding; 3-Satisfactory; 2-Marginal; or 1-Unsatisfactory. Final scores will be computed statistically. Candidates will be notified of the results within 4-6 weeks following completion of the exam. The Board's Executive Director will send exam results in writing to the candidate by US postal mail. Candidates are solely responsible for notifying the Board office of any change in mailing address to ensure the timely delivery of results. The Board office will not provide exam results by phone, email, or facsimile.



## failing the oral exam

Candidates who fail the Oral Exam and whose eligibility period has not expired may apply to repeat the exam within the eligibility period by submitting a completed application and the reapplication fee of \$2,100.00 (in U.S. funds). The reapplication fee must be received by the Board on or before October 31st of the year prior to the year in which the Oral Exam is to be repeated. No application fees will be refunded for failing the Oral Examination. Placement of candidates retaking the examination in a particular session is on a first come/first serve basis and ultimately at the sole discretion of the Board.



# passing the oral exam... what's next

## CERTIFICATES:

The Board shall issue each candidate who successfully completes the ABP Qualifying and Oral Examination a certificate. Duplicate certificates shall not be issued. Beginning May 2013 candidates who successfully complete the Oral Examination will be awarded time-limited certificates of six (6) years. Diplomates who were awarded certificates prior to May 2013 will continue to have certificates which are not time limited.

## USE OF TERMS

- The Board endorses the use of “Diplomate of the American Board of Periodontology” and “Practice Limited to Periodontology and Dental Implant Surgery” in professional letterheads and advertisements.
- The Board also endorses the statement that “The American Board of Periodontology is one of the nine recognized Dental Specialty Boards of the American Dental Association”.
- The Board also endorses the use of a stamp for insurance forms stating, “Practice Limited to Periodontics and Dental Implant Surgery, Diplomate of the American Board of Periodontology.”
- The Board endorses the use of the ABP Diplomate Seal. Requests to acquire the Diplomate Seal should be made by contacting the Board office.

## SUPPORT FOR DIPLOMATES

- Represents Diplomates at Specialty Board Conferences
- Provides for comprehensive programs of continued competency (recertification), including self-study continuing education programs and recertification certificates
- Provides order forms for Board Lapel Pin
- Provides CE Credit for successful completion ABP Qualifying Exam(6 Credits) and Oral Exam (12 credits)
- Publishes Brochure “Your Periodontist is a Diplomate of the American Board of Periodontology”
- Publication of individual listings on ABP web pages at [www.abperio.org](http://www.abperio.org)
- Acknowledgment of new Diplomates at the AAP General Assembly, AAP Perspectives, and ABP Website
- Awards 25-50 Year Anniversary Certificates to Diplomates
- Verifies Board certification and recertification to patients, state boards, hospitals, military organizations, HMO's, and insurance companies
- Provides ABP Seal for use on stationary and in advertisements. All Periodontist listed on stationary and in advertisements that include ABP Seal must be Diplomates of the ABP
- Provides certificate for completion of Recertification Requirements



Oral exam candidates are required to agree to the following confidentiality agreement:

*“I understand that the Board wishes to keep all test questions confidential so that they will not become available to future examinees, who may thereby obtain an unfair advantage. Accordingly, I agree not to retain the examination and not to discuss the questions or answers with anyone other than those who have taken this examination with me. I further understand that this examination is copyrighted work of the Board and that copying of any questions in any form constitutes infringements of the Board’s copyright.”*



The Oral Exam follows a presentation, interview, and discussion format to evaluate the candidate's diagnostic and therapeutic skills. Candidates may request information from the Examiners to answer questions. Protocols developed by the Board form the basis of the testing process. Three protocols will be presented at each of two, 1 ½ hour sequential sessions (back to back) on the same day, for a total of six protocols. Each session will be conducted by a team of two Examiners, for a total of four Examiners. ABP Directors and Examiners serve as Examiner teams. Five of the six protocols will consist of a single case or procedure. Each will be graded in six skills; Diagnosis, Etiology, Prognosis, Treatment

Plan, Therapy, and Evaluation of Therapy and Maintenance. The sixth protocol will consist of three ten-minute vignette protocols. These may include such topics as medical management, medical emergencies, periodontal and oral medicine, perio-pathology, post-op complications and management of failures. Each ten-minute vignette protocol will be graded on only two skills: Diagnosis and Therapy. This sixth protocol will therefore have six grades from each Examiner, which is the same number of grades as the other five protocols. (Since the six grades for the vignette protocols are only in the Diagnosis and Therapy categories, these two categories will be slightly more weighted than the other four grading categories for the overall score.)

### ORAL EXAM PROTOCOL CONTENT OUTLINE

Protocols have been prepared to examine candidate's knowledge in the following areas:

- I. Non-surgical therapy
    - A. Plaque control / behavior modification
    - B. Scaling, root planing / debridement
    - C. Pharmacotherapeutics / irrigation
    - D. Stress reduction / sedation
    - E. Occlusal therapy / splints / TMJ
    - F. Interdisciplinary therapy, e.g. ortho, endo, restorative dentistry
  - II. Surgical therapy
    - A. Crown lengthening for
      - a. restorative dentistry
      - b. cosmetic reasons
    - B. Gingival attachment procedures, e.g. Mod. Widman, open flap debridement, ENAP
    - C. Regeneration or replacement of periodontal supporting structures
      - a. Bone replacement grafting
      - b. Barrier therapy, e.g. GTR
      - c. Combination graft and barrier
      - d. Root surface conditioning
      - e. Growth Factors
  - D. Resective
    - a. Soft tissue
    - b. Hard tissue
    - c. Root resection
    - d. Periodontal plastic surgery
    - e. Soft tissue grafts
    - f. Pedicle flaps
    - g. Combination pedicle flaps, connective tissue
    - h. Connective tissue grafts
    - i. Barriers
  - E. Dental implants
    - a. Placement
    - b. Repair /removal
  - F. Site preparation, e.g. sinus elevation, GBR
  - G. Post-op complications and management of failed therapy
- III. Oral/Systemic Interrelationships
    - A. Oral medicine
    - B. Oral pathology
    - C. Perio / Medicine / Systemic



# THE AMERICAN BOARD OF PERIODONTOLOGY

## SAMPLE ORAL EXAM PROTOCOL

The following hypothetical protocol is provided as an example of what one protocol may include. Actual protocols may be more or less comprehensive than the following example:

The patient is a 41-year-old Caucasian male who presented with a chief complaint of a recently developed space between his front teeth. He reports that his general health is good, but premedicates with clindamycin for a prosthetic heart valve. He states that he is allergic to penicillin. His gums bleed occasionally with brushing.

Candidate will usually receive charting of localized area.

Digitized photographic slides to be used throughout the questioning period for this protocol include:

1. Maxillary anterior photograph demonstrating anterior open bite, and open contact 7-8.
2. Preoperative radiograph #6-11
3. Occlusal view demonstrating excessive occlusal wear
4. Surgical site #6-11
5. One-year post-op radiographs
6. One-year post-op photographs #6-11

### DIAGNOSIS

Describe how you would proceed in order to generate an accurate periodontal diagnosis including any intra-oral and extra-oral pathoses. Candidates should consider the following factors in making the diagnoses of Localized Severe Chronic Periodontitis with Occlusal Traumatism:

- Medical history
- Occlusion – anterior open bite, centric pre-maturities
- Plaque/calculus
- Recession
- Attachment levels/pocket depths
- Bone loss
- Mobility

### ETIOLOGY

What etiologic factors are pertinent in this patient? Candidates should consider the following factors:

- Space between #7 & 8
- Open contacts
- Food impaction
- Occlusal trauma
- Plaque and calculus
- Anterior open bite
- Centric prematurity
- Habits
- Genetics

### PROGNOSIS

What would you consider the prognosis to be for individual teeth and for the overall dentition both short and long term in this patient? Candidates should be able to discuss:

- Short/long term prognosis of #6-11, and how derived?
- Will prognosis change after treatment?
- Will prognosis change with different treatment modalities? Why? How?

## TREATMENT PLANNING

Please proceed with your treatment plan for this patient. You may request to review any information that you believe important to this task. Candidate should be prepared to discuss:

- Which options are best for this patient and why
- Order of treatment
- Rationale for each treatment
- What is the expected outcome for each treatment?

## SELECTED THERAPY

Discuss the rationale for the selected therapy. Possible Questions: 1) Since you chose to extract #7,8 please provide your rationale; 2) If you chose to retain #7,8 what therapy(ies) would you consider; 3) Please provide in detail your technique for grafting #7,8. and why you chose this technique; 4) Describe the specific techniques you would use for the treatment of #'s 7 & 8 and how you would perform them; 5) Discuss implant placement in this region. Candidate should be prepared to discuss:

- GTR – flap design, materials, steps
- Root treatment – how (manual, sonic, ultra-sonic, rotary), why?
- Root conditioning
- Graft –choices
- Barrier – choices
- Suture
- Dressing placement?
- Antibiotics – localized- systemic
- Post-op management

## EVALUATION AND MAINTENANCE OF THERAPY

What factors would you consider when evaluating results of therapy? Candidate should be prepared to discuss:

- What were goals
- How to measure results
- When to measure results – why?
- What is success?
- What is failure?

What factors would you consider in developing a maintenance schedule for this patient? Candidate should be prepared to discuss:

- How to maintain 0-3 mm pockets
- How to maintain 3-5 mm pockets
- How to maintain 5-7 mm pockets
- When to retreat-Why
- Reasons not to retreat



# THE AMERICAN BOARD OF PERIODONTOLOGY

## SAMPLE ORAL EXAM VIGNETTE

This example represents one ten-minute vignette, which is one third of the Vignette Protocol. Two additional vignettes, consisting of unrelated topics, would also be included in the 30-minute Vignette Protocol.

The patient is a 63-year-old Caucasian female for whom you placed an implant to replace tooth #5. The implant was placed 18 months ago and restored four months following placement. The patient has not been back to your practice since the implant was restored. Her general dentist referred her back to you because of swelling and soreness around the implant.

Candidate will be able to view photograph and radiographs of the area as well as charting completed when the patient arrived.

Charting demonstrated a 10mm. pocket over the facial of the implant with 5mm pockets in the palatal and interproximals.

A periapical radiograph demonstrated a radiolucency over the coronal 1/3 of the implant.

The clinical photo demonstrates edema and erythema #5 area,

**Diagnosis:** Describe how you would determine a diagnosis for the #5 area.

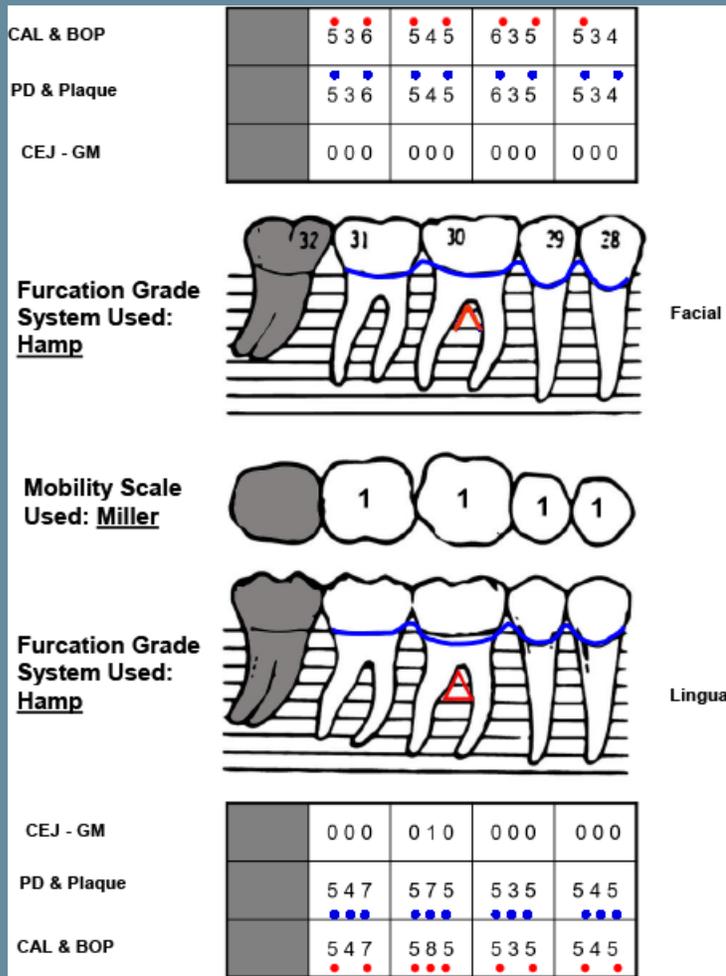
Candidate should be able to describe the clinical appearance, findings and history that would lead to the diagnosis of ailing implant.

1. History
2. Clinical findings
3. Radiographic picture
4. Symptoms

**Therapy:** Candidate should be able to describe his/her approach to treating this ailing implant and provide a rationale for treatment.

1. Surgical vs non-surgical treatment
2. Disinfection of site
3. Flap design & debridement
4. Regenerative procedures including;
  - Grafting materials
  - Barriers
  - Suturing & Post-op
  - Post-surgical meds
  - Post-op management and maintenance

# THE AMERICAN BOARD OF PERIODONTOLOGY SAMPLE CHARTING



Caries Symbol:



Furcations:



Open Contact Symbol:



Gingival Margin Symbol:



Lack of KT Symbol:



BOP Symbol: to be placed over CAL recordings



Plaque Symbol: to be placed over PD recordings



# THE AMERICAN BOARD OF PERIODONTOLOGY

## PROTOCOL EVALUATION RATING SCALE DEFINITIONS

**UNSATISFACTORY  
(1)**

**MARGINAL  
(2)**

**SATISFACTORY  
(3)**

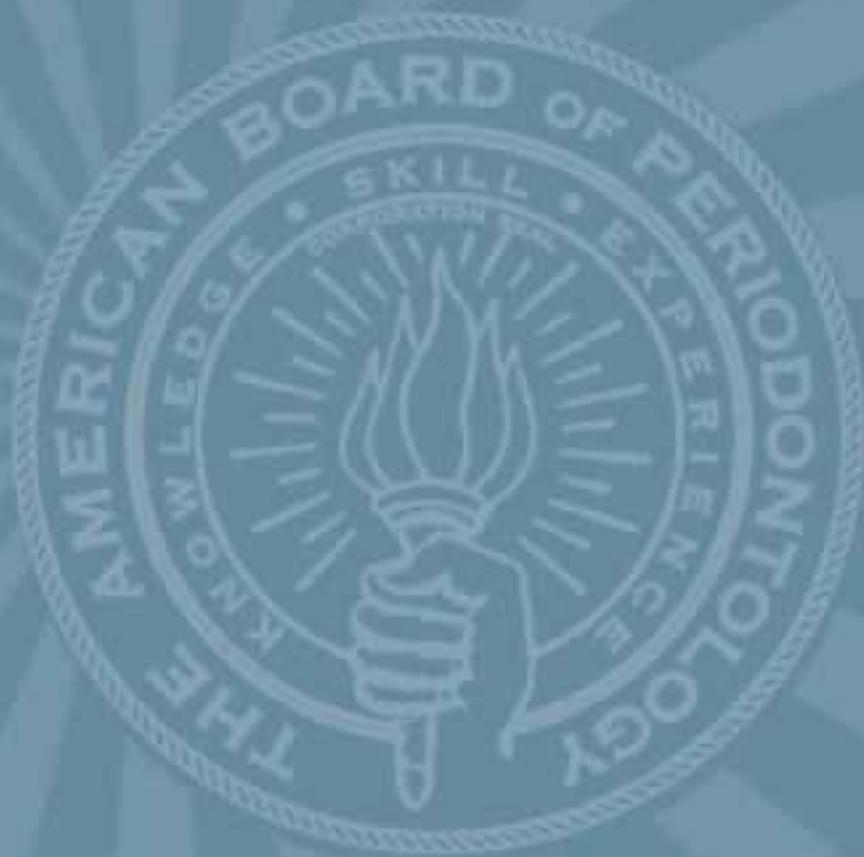
**OUTSTANDING  
(4)**

	<b>UNSATISFACTORY (1)</b>	<b>MARGINAL (2)</b>	<b>SATISFACTORY (3)</b>	<b>OUTSTANDING (4)</b>
<b>Diagnosis (intra-and extra-oral pathoses and Periodontal Dx) (1)</b>	Dx is incorrect or incomplete and potentially harmful.	Dx is incomplete but safe	Dx is correct but not outstanding	Dx is correct and is thoroughly and impressively reasoned
<b>Etiology (2)</b>	Etiology that is incorrect or incomplete and potentially harmful.	Etiology is incomplete but safe	Etiology is correct but not outstanding	Etiology is correct and is thoroughly and impressively reasoned
<b>Prognosis (3) Treatment</b>	Prognosis that is incorrect or incomplete and potentially harmful.	Prognosis is incomplete but safe	Prognosis is correct but not outstanding	Prognosis is correct and is thoroughly and impressively reasoned
<b>Planning (4)</b>	Tx plan is incorrect or incomplete and potentially harmful.	Tx plan is incomplete but safe	Tx plan is correct but not outstanding	Tx plan is correct and is thoroughly and impressively reasoned
<b>Selected Therapy (5)</b>	Selected Therapy is incorrect or incomplete and potentially harmful.	Selected Therapy is incomplete but safe	Selected Therapy is correct but not outstanding	Selected Therapy is correct and is thoroughly and impressively reasoned
<b>Evaluation and Maintenance of Therapy (6)</b>	Evaluation and Maintenance of Therapy are incorrect/incomplete and potentially harmful	Evaluation and Maintenance of Therapy are incorrect/incomplete and safe	Evaluation and Maintenance of Therapy is correct by not outstanding	Evaluation and Maintenance of Therapy are correct and is thoroughly and impressively reasoned



# IMPORTANT POLICIES

- Special Accommodation
- Procedures for Requesting Accommodations
- Sexual Harassment
- Standard of Conduct
- Examiner Disqualification Disclosure
- Non-Discrimination Clause
- English as Official Language Policy
- CE Credits
- Withdrawal
- No Show
- Exam Cancellation
- Handling of Complaints about Candidates for Certification
- Appeal of the Qualifying Exam Failure
- Appeal of the Oral Exam Failure
- Procedures for Submitting an Appeal



## **SPECIAL ACCOMMODATIONS**

Upon timely request, the American Board of Periodontology will make reasonable accommodations to its examination procedures to accommodate candidates with a documented disability. An accommodation will be considered reasonable only if it (1) does not pose an undue financial burden on the Board and (2) does not substantially interfere with assessment of the knowledge or skills that the examination is intended to measure.

## **PROCEDURES FOR REQUESTING ACCOMMODATIONS**

Any request for accommodation arising out of a disability must be made in writing at the time of submission of the application for the Qualifying or Oral Examination unless the candidate demonstrates that the disability occurred after submission of the application. Failure to make a timely request for accommodation waives any right to an accommodation.

A request for accommodation must include a brief description of the disability, a description of the accommodation sought, an explanation of why the accommodation is necessary to address the disability and supporting documentation of the disability from a licensed physician or other health care provider. The Board reserves the right to have the candidate examined, or the candidate's medical records reviewed, at the Board's expense, by a licensed physician designated by the Board.

A separate request for accommodation must be submitted with each application. If a request was made with respect to the Qualifying Examination, a new request must be submitted with respect to the Oral Examination.

The Executive Director will review any request, follow up with the candidate if necessary, and make a recommendation to the Americans with Disabilities Act Committee. The committee will determine what, if any, accommodation to provide. It will notify the candidate of its decision with ten (10) days after the decision is made.

The candidate will have ten (10) days to appeal the decision to the Appeals Committee. The candidate may appeal by writing a letter to the Executive Director explaining why the accommodation offered by the committee is inadequate. Unless the Appeals Committee decides otherwise, no presentation will be permitted other than such letter. The Committee will consider the appeal in a specially convened conference call. It will notify the candidate with ten (10) days after the decision is made. Any questions about the this policy should to addressed to the Board Office.

## **SEXUAL HARASSMENT POLICY**

It is the policy of The American Board of Periodontology that all Directors, Consultants, Examiners, and Employees are responsible for assuring that the work place and examination process is free from sexual harassment. Because of the American Board of Periodontology's strong disapproval of offensive or inappropriate sexual behavior, all Board members, consultants, examiners, and employees must avoid any action or conduct which could reasonably be viewed as sexual harassment, including: (1) unwelcome sexual advances, (2) requests for sexual acts or favors or (3) other communications or physical conduct of a sexually harassing nature.

Any complaint of sexual harassment shall be made to the Executive Director except that if the complaint is directed against the Executive Director, it shall be made to the Chair. All complaints will be addressed promptly and with sensitivity to the privacy interests of both the complainant and the accused individual. If it is deemed appropriate, legal counsel will be consulted.

The American Board of Periodontology will take appropriate corrective action, including disciplinary measures when justified, to remedy all violations of this policy.

## **STANDARD OF CONDUCT**

The ABP may establish, enforce, and update from time to time, as determined by the Board of Directors, a Standard of Conduct for Candidate Certification and Diplomate Recertification. This Standard of Conduct shall set forth the ethical standards required of candidates participating in the certification and Diplomates in the recertification process, the violation of which may result in disciplinary action by the ABP.

## **EXAMINER DISQUALIFICATION DISCLOSURE**

Prior to the examination, Directors and Examiners will review the names of candidates. They will disqualify themselves from any candidate with whom they may have a conflict of interest (i.e. former student, a very close friend, or professional associate). Knowing a candidate or having met a candidate is not reason for disqualification.

## **NON-DISCRIMINATION CLAUSE**

It is the policy of the American Board of Periodontology to evaluate every candidate solely on the merits of the candidate's application and performance. The Board and its examiners and employees shall not discriminate on the basis of race, religion, national origin, gender, sexual orientation, age, or disability.

## ENGLISH AS THE OFFICIAL LANGUAGE

The official language of the American Board of Periodontology is English. Both the Qualifying and Oral Examination are conducted in English. Inability to speak or understand English will not be considered a disability for testing purposes.

## CE CREDITS

The American Board of Periodontology will, on request, grant 6 continuing education credits for taking and passing the Qualifying Examination, 12 continuing education credits for taking and passing the oral examination, and 2 continuing education credits for completion of the Self Study Recertification Program.

## WITHDRAWAL

Candidates who withdraw prior to the Oral Examination and whose eligibility has not expired may transfer their oral examination fee to a subsequent examination within their eligibility period for a reapplication fee set by the Board of Directors. Notification of withdrawal must be submitted in writing to the Board office. Candidates withdrawing with special circumstances (i.e., illness, pregnancy, family death, national disaster) may submit a written request to the Board that the oral examination reapplication fee be waived. The Board will review the request and determine if fee should be waived. Assignment of candidates to a session will be at the sole discretion of the Board.

## NO SHOW

A candidate who fails to appear for the oral examination as scheduled, without prior notification to the Executive Director, will be required to pay the entire examination fee to reschedule the examination. Consideration to waive the fee for candidates who have special circumstances such as illness, death in the family, will be considered by the Board.

## EXAM CANCELLATION

The American Board of Periodontology will make every attempt to administer the Qualifying and Oral Examinations as scheduled. Should the ABP, in its sole discretion, cancel all or part of an Examination, or as a result of events beyond its control be unable to administer an Examination to its completions at the appointed date, time and location, the ABP is not responsible for any expense the candidate may have incurred in connection with the canceled Examination, nor for any expense the candidate may incur for any substitute Examination.

## HANDLING COMPLAINTS ABOUT CANDIDATES FOR CERTIFICATION

The Board will not certify a candidate if it has substantial questions about the ability of the candidate to practice dentistry in a competent manner and with due regard for the interests of patients. When materials that question the competence of a candidate have been brought to the attention of the Board, these materials should be investigated by staff and referred to the Credentials Committee. If after reasonable investigation the Credentials Committee has substantial doubt about the ability of the candidate to practice in the best interest of patients, that Candidate will not be certified.

The Board has the right not to certify a candidate if the candidate (a) has had a license to practice dentistry revoked, Inactive, or restricted in any jurisdiction, b) has been convicted of or completed nolo contendere to any felony or (c) has a physical or psychological condition, including but not limited to substance abuse, that may interfere with the practice of dentistry).

The Board will require each candidate for certification and recertification to complete a statement attesting to the candidate's credentials and providing such additional information and attestations as the Board may request that may bear on the decision to certify or recertify.

## APPEAL OF QUALIFYING EXAMINATION FAILURE

A candidate who has failed the Qualifying Examination may appeal the adverse decision based on equipment failure or technical difficulties at the testing facility. Disagreement with the correctness of an answer to a question on the Qualifying Examination is not grounds for appeal.

## APPEAL OF ORAL EXAMINATION FAILURE

A candidate who has failed the Oral Examination may file an appeal with the Executive Director of Examinations and Professional Affairs. To be valid the appeal must be received by the Executive Director of Examinations and Professional Affairs within thirty (30) days after receipt by the candidate of notice of the adverse decision.

An appeal must contain a statement of the specific reason or reasons that the candidate believes that the decision was improper. It must also include any supporting documentation that the candidate wishes to have considered. Failure to provide a specific reason or reasons as to why the candidate believes the adverse

decision was improper may be grounds for refusal to hear the appeal.

Disagreement with the judgment of the Examiners is not a valid reason for an appeal. Rather, the candidate must present facts tending to suggest that the conduct of the examination was improper or flawed or that some other event occurred that biased the result. Absent improper conduct of the examination or a biasing event, the Appeals Committee will not substitute its judgment for the judgment of the Examiners and will not re-grade any examination.

#### **PROCEDURES FOR SUBMITTING AN APPEAL**

A candidate or Diplomate who has received an adverse decision affecting certification or recertification may appeal the adverse decision by filing a written appeal with the Executive Director of Examinations and Professional Affairs. An “adverse decision affecting certification or recertification” may consist of:

1. Rejection of credentials for eligibility to sit for the Qualifying Examination or the Oral Examination;
2. Receipt of a failing grade on the Qualifying Examination or the Oral Examination;
3. Denial of a request for extension of the eligibility period; or
4. Denial or revocation of certification or recertification – or placement on Inactive status for reasons other than non-payment of annual registration fee.

To be valid, the appeal must be received by the Executive Director within thirty (30) days after receipt by the candidate or Diplomate of notice of the adverse decision. It must be accompanied by the appeals fee set by the Board payable to the American Board of Periodontology. This fee is designed to defray the Board’s administrative and legal costs in considering the appeal.

An appeal must contain a statement of the specific reason or reasons that the candidate or Diplomate believes that the decision was improper. It must also include any supporting documentation that the candidate or Diplomate wishes to have considered. Failure to provide a specific reason or reasons as to why the candidate or Diplomate believes the adverse decision was improper

may be grounds for refusal to hear the appeal.

All appeals will be subject to preliminary review by the Executive Director. Unless the Executive Director determines that an appeal is frivolous or fails to meet applicable procedural requirements, a properly filed appeal will be considered by an Appeals Committee consisting of three individuals who did not participate in the adverse decision. The Appeals Committee shall be appointed by the Executive Director and shall include at least two current Directors of the Board. If possible, the Committee shall not include any Periodontist who might reasonably be regarded as being in competition with the candidate or Diplomate, who was involved in training the candidate or Diplomate, or who is a family member or associate of the candidate or Diplomate.

The Appeals Committee will review the specific grounds for appeal set forth by the candidate or Diplomate. If the Appeals Committee determines that there is no reason to alter the adverse decision, it shall affirm that decision. If the Appeals Committee determines that the adverse decision was improper, it shall reverse or modify the decision. If the Appeals Committee believes that it requires additional information from the candidate or Diplomate, it may request that information either formally or informally.

The Appeals Committee shall notify the candidate or Diplomate in writing of its decision, including the reasons therefor, within thirty (30) days after reaching the decision. The Committee shall endeavor to reach its decision within sixty (60) days after receiving a properly filed appeal – unless it has requested additional information from the candidate or Diplomate. The decision of the Appeals Committee shall be provided to the full Board as information. The decision of the Appeals Committee shall constitute the final decision of the American Board of Periodontology unless the Board determines to reconsider the decision of the Committee.



*This informational packet is published by the American Board of Periodontology to inform prospective candidates about Board policies, requirements and procedures for the examination process, certification, and recertification. Prices, dates and deadlines are subject to change without notice.*

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**APPLICATIONS FOR BOARD EXAMINATIONS  
MAY BE COMPLETED ONLINE AT  
[WWW.ABPERIO.ORG](http://WWW.ABPERIO.ORG)**