

DSCKE Protocol September 2018

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Schedule

	Time
Check-in	8:30 a.m.
Examination	9:00 a.m. to 12:00 p.m.

Check-in

During check-in, you will be required to show current government issued photo identification. Acceptable forms of government issued photo identification are:

- driver's license,
- passport,
- or provincial photo identification card.

The ID must be in English or French.

Photo identification must show your name exactly as it appears on your application form and must not be expired. If the photo identification does not have an expiry date, it must have been issued within the last 10 years.

DSCKE participants who do not provide government photo identification will not be admitted.

During check-in, you will be scanned with a metal detector wand, fingerprinted, required to raise your pant legs above your ankles, empty and turn all pockets inside-out, and raise shirt sleeves above your wrists prior to entry into the test room.

Prometric staff will inspect eyeglasses, jewelry, and other accessories. These inspections will occur each time you enter the examination room.

You are advised to refrain from wearing jewelry besides wedding rings. Any other jewelry including ornate hair accessories will need to be removed and placed in the locker provided.

You will be provided with scratch paper and a pencil. These items will be collected at the end of the examination.

Format

The Dental Specialty Core Knowledge Examination (DSCKE) is a 3-hour examination consisting of single answer and multi answer multiple choice questions. Questions may include radiographic images, photographs of models, or photographs of patients, periodontal charts, prescriptions, or a patient case history. Patient images should be viewed as if you are facing the patient.

The examination will be administered electronically at Prometric test sites.

The [NDEB's e-Exam Orientation](#) should be viewed prior to taking the DSCKE.

Prometric "Test Drive"

To reduce test anxiety, Prometric offers the ability to take a "test drive": a dry run of the experience you will have on test day. There are additional fees associated with a "test-drive". For information visit www.prometric.com.

Content

The blueprint below shows the content areas and approximate percentage of questions in each area.

DSCKE Blueprint	Approximate % of questions
Evaluation of Scientific Literature	10
Diagnostic Sciences	
Oral Radiology	10
Oral Medicine/Oral Pathology	20
Patient Management	
Prosthodontics, Periodontics, Endodontics	20
Growth and Development/Pediatric Dentistry/Oral Surgery	20
Pharmacology, Therapeutics/Local Anesthesia/Medical Emergencies	20
Total	100%

Sample Questions

One Correct Answer

For questions that indicate "Select ONE correct answer", always choose the MOST appropriate answer for each question.

Sample Question

Bluish-grey discolouration of the crown of a tooth following trauma is due to

- A. external resorption.
- B. pulpal hemorrhage.
- C. discoloured composite restoration.
- D. chromogenic bacteria.

One or More Correct Answer

For questions that have one or more correct answers, indicated by the direction "Select ONE OR **MORE** correct answers", select all answers that are correct. The minimum score for any question is "0" (zero). The maximum score for any question is 3 (three). Part marks will be awarded if some, but not all correct answers are selected, provided no incorrect answer is selected. Marks will be deducted for incorrect responses, but no question will receive a score less than "0" (zero). Some answers are neither definitely correct nor incorrect and have been given a value of "0" (zero). Selecting one of these answers will not affect the score given to a participant. But, if a definitely incorrect answer is selected the participant will receive a "0" (zero) score for the entire question.

The following is an illustration of the scoring system. The score for each answer is given to the left of each answer.

Sample Question

(Select ONE OR MORE correct answers.)

There is radiographic evidence of caries on the

Value		Value	
-1	A. distal of tooth 2.3.	.2	G. distal of tooth 2.6.
-1	B. mesial of tooth 2.4.	.2	H. mesial of tooth 2.7.
0	C. distal of tooth 2.4.	-1	I. distal of tooth 2.7.
.2	D. mesial of tooth 2.5.	-1	J. mesial of tooth 2.8.
.2	E. distal of tooth 2.5.	0	K. distal of tooth 2.8.
.2	F. mesial of tooth 2.6.		

Answer: D,E,F,G,H for full mark.

Case History

Many questions include patient case histories in the format illustrated below.

Using the information provided, answer questions 1 to 10 on the answer score sheet.

Patient Information:

Age:	57	Blood Pressure:	130/86 mmHg
Gender:	Female	Pulse Rate:	80 bpm
Height:	167cm	Respiration Rate:	15/min
Weight:	60kg	Temperature:	37°C

Chief Complaint: "My front tooth hurts."

History of Chief Complaint: Noticed pain for the last 3 days.

Dental History: Irregular visits.

Medical History:

Significant Findings:	None.
Current Medication:	None.
Allergies:	None.

Social/Family History:

Significant Findings:	None.
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Clinical Examination:

Significant Findings:	
Extraoral:	None.
Intraoral:	None.

Periodontal chart

The following represents an example of a periodontal chart that may be used for questions in the ACJ. Each chart will utilize the following notation:

- The upper part of the chart denotes the findings on the vestibular (buccal and/or labial) surfaces of the teeth being discussed for the case. Missing teeth are denoted by a large "X"
- Probing depths, in millimetres, are listed in the next row below the tooth number
- Recession is listed below the pocketing, in millimetres. If there is no number, there is no significant recession
- Bleeding on probing is denoted by "•" and is listed directly below the pocket where bleeding was found
- The middle part of the chart denotes the findings for the lingual surfaces, using the same categories as above
- Mobility and furcation involvement apply to the entire tooth and can be found on the bottom part of the chart
- Mobility for the tooth, if present, is listed as a "1, 2, or 3", using the Miller classification.
- The Class (I, II, III) of furcation involvement (if present) is listed with the surface indicated (B, L, M, D)

This example is a chart of the maxillary second quadrant, with tooth 2.6 missing. The probing depths, in millimetres, are listed, going from mesial on the left, to distal on the right. In this example, there is 3mm of recession all along the buccal of teeth 2.4 and 2.5. No other recession is noted. There is bleeding on probing on the mesiobuccal and distobuccal of teeth 2.5 and 2.7, and all along the lingual of tooth 2.7. No other bleeding is noted. Tooth 2.7 has a buccal furcation Class III and a Class 2 mobility. There are no other mobility or furcation involvements on any other teeth/surfaces.

Vestibular

Tooth	2.3	2.4	2.5	2.6	2.7
Probing depth	3 2 4	4 5 4	4 4 6	X	4 7 6
Recession		3 3 3	3 3 3	X	
Bleeding on probing			• •	X	• •

Lingual

Tooth	2.3	2.4	2.5	2.6	2.7
Probing depth	2 2 2	3 4 4	4 3 5	X	5 5 6
Recession				X	
Bleeding on probing				X	• • •

Mobility					2
Furcation					B-III

Regulations

- You must be punctual for all sessions. If you arrive late for a session you may be denied entry to the examination.
- You cannot bring devices with recording or transmitting/receiving abilities into the examination room.
- Outerwear of any kind is not permitted in the examination room.
- You will be required to read and agree to a Confidentiality and Non-disclosure Agreement before you can begin the examination. If you do not agree, you will not be able to start the examination.

NDEB examination content is confidential. All questions are property of the NDEB. Unauthorized disclosure of examination questions is prohibited under copyright laws. By signing the Confidentiality and Non-disclosure Agreement you agree to maintain the confidentiality of NDEB questions.

- You will have one scheduled break during the examination to use the washroom.
- You will not have access to your locker during the scheduled break.
- You must not attempt to recreate questions or share specific test items with examinees, potential examinees, or study groups.

Misconduct

You must maintain the confidentiality of all NDEB content. You cannot discuss your examination with others or communicate about questions or answers before, during or after an examination.

If at any time you are suspected of compromising the security of the examination, including not complying with the regulations, you will be subject to the NDEB's By-laws regarding misconduct.

Additional information on [misconduct](#) can be found on the NDEB website.

Reference Materials

Reference Texts

A list of reference material recommended in Faculties of Dentistry in Canada can be found in the [Reference Materials & Resources](#) section of the NDEB website. The NDEB also references journal articles, clinical guidelines, and practice standards issued by specialty organizations.

Released Questions

The NDEB publishes a large volume of released questions which are available in the [Reference Material and Resources](#) section of the NDEB website.

Tooth Numbering System

The FDI two-digit tooth numbering system is used in all examinations.

FDI / UNIVERSAL NUMBERING SYSTEM

PERMANENT DENTITION

FDI	1.8	1.7	1.6	1.5	1.4	1.3	1.2	1.1	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	FDI	
Universal	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Universal	
Universal	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	Universal	
FDI	4.8	4.7	4.6	4.5	4.4	4.3	4.2	4.1	3.1	3.2	3.3	3.4	3.5	3.6	3.7	3.8	FDI	
					RIGHT									LEFT				

PRIMARY DENTITION

FDI	5.5	5.4	5.3	5.2	5.1	6.1	6.2	6.3	6.4	6.5	FDI
Universal	A	B	C	D	E	F	G	H	I	J	Universal
Universal	T	S	R	Q	P	O	N	M	L	K	Universal
FDI	8.5	8.4	8.3	8.2	8.1	7.1	7.2	7.3	7.4	7.5	FDI
				RIGHT					LEFT		

Test Accommodations

Test accommodations are granted on an individual basis and are dependent on the nature and extent of the request, documentation provided, and requirements of the examination. Read the NDEB's policies and procedures for [Test Accommodations](#) on the NDEB website.

Compassionate Appeals

If you are ill immediately before or during an examination or experience an unanticipated extenuating circumstance beyond your control that you believe prevented you from demonstrating your ability during the examination you can submit a compassionate appeal to the NDEB Executive Committee.

Compassionate appeals must be submitted in writing within seven days of the examination to appeals@ndeb-bned.ca.

Additional details regarding the submission of a compassionate appeal can be found in the *NDEB By-laws and Policies for Assessments and Examinations*, available on the [NDEB website](#).

Results

The results of the DSCKE examination will be sent by email to participants and Canadian Faculties of Dentistry offering Dental Specialty Assessment and Training Programs normally within six weeks of the examination. Participants must notify the NDEB office of any change of address.

Results will not be released by telephone or fax.

Guidance Standard

To assure a consistent level of difficulty, the NDEB uses test equating and re-scaling procedures to correlate participant raw scores to scores on a reference examination. As the DSCKE is an admission test used by DSATPs, there is no defined passing score but a score of less than 75 indicates that the participant may have significant difficulty in completing a DSATP.

The Examination may contain a number of questions that are being tested and these questions may not contribute to any participant's result.

The results of the DSCKE are used by Faculties of Dentistry in the admission process for the Dental Specialty Assessment and Training Program (DSATP).

Manual Rescore

Within three months of the release of results, participants can request a manual rescore. Two NDEB staff members perform a manual rescore by comparing the participant's answers with the master answer key. The result of the manual rescore will be the final score. In most circumstances, this process confirms that no errors were made during the scanning and electronic scoring process.

Repeats

Each of the NDEB's examinations and assessments can be taken three times, except for the DSCKE which can be taken twice.