



PSI licensure:certification

3210 E Tropicana  
Las Vegas, NV 89121  
www.psiexams.com

Before scheduling  
your examination,  
be sure you understand  
the contents of this bulletin.  
Please retain and use it as a  
reference when contacting PSI.

**Dental Board of California  
Registered Dental Assistant Extended Functions, Dental Sedation Assistant  
Permitholder &  
Orthodontic Assistant Permitholder Examinations**



**CANDIDATE INFORMATION BULLETIN**

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**Please refer to our website to check for the most updated information at [www.psiexams.com](http://www.psiexams.com).**

## EXAMINATION REGISTRATION PAYMENT AND SCHEDULING PROCEDURES

Once a candidate is determined to be eligible, the Board will notify the examination administration contractor, PSI licensure:certification (PSI). PSI will mail a scheduling notice indicating how the candidate may schedule an examination.

Your examination eligibility expires, and your application is deemed abandoned if you fail to take the written examination within one year after being deemed eligible by the Board. This is the date on the eligibility letter the Board sends to you. When your eligibility expires, you will need to reapply to the Board to be considered eligible to take either written examination.

### EXAMINATION FEES

Dental Sedation Assistant Permitholder Examination (\$22.50)

Dental Assistant Extended Functions Examination (\$22.50)

Orthodontic Assistant Examination (\$26.50)

**NOTE: REGISTRATION FEES ARE NOT REFUNDABLE OR TRANSFERABLE**

### FEES

The following fee table lists the applicable fee for the examination. The fee is for each registration, whether you are taking the examination for the first time or repeating it.

In most California testing centers, testing does not take place on the following major holidays:

Memorial Day	Closed May 25, 2020
Independence Day	Closed July 4, 2020
Labor Day	Closed September 7, 2020
Thanksgiving Day	Closed November 26-27, 2020
Christmas Day	Closed December 24-25, 2020
New Years Day	Closed January 1, 2021
Martin Luther King Jr.	Closed January 18, 2021
Memorial Day	Closed May 31, 2021

### INTERNET SCHEDULING

You may schedule for your test by completing the online Test Registration Form. The Test Registration Form is available at PSI's website, [www.psiexams.com](http://www.psiexams.com). You may schedule for a test via the Internet 24 hours a day.

1. Complete the registration form online and submit your information to PSI via the Internet.
2. Upon completion of the online registration form, you will be given the available dates for scheduling your test.
3. You will need to choose a date to complete your registration.
4. Upon successful registration, you will receive a traceable confirmation number.

### TELEPHONE REGISTRATION AND SCHEDULING

For telephone registration, you will need a valid credit card (VISA, MasterCard, American Express or Discover).

1. Complete the Examination Registration Form, including your credit card number and expiration date, so that you will be prepared with all of the information needed to register by telephone.
2. PSI registrars are available at (877) 392-6422, Monday through Friday between 4:30 am and 7:00 pm, and Saturday-Sunday between 6:00 am and 2:30 pm, Pacific Time, to receive the information listed on your Examination Registration Form and to schedule your appointment for the examination.

### FAX REGISTRATION AND SCHEDULING

For Fax registration, you will need a valid credit card (VISA, MasterCard, American Express or Discover).

Complete the Examination Registration Form, including your credit card number and expiration date.

1. Fax the completed form to PSI (702) 932-2666. Fax registrations are accepted 24 hours a day.
2. If your information is incomplete or incorrect, it will be returned for correction.

Please allow 4 business days to process your Registration. After 4 business days, call PSI at (877) 392-6422, Monday through Friday between 4:30 am and 7:00 pm, or Saturday-Sunday between 6:00 am and 2:30 pm, Pacific Time. You may also schedule online by accessing PSI's registration website at [www.psiexams.com](http://www.psiexams.com).

### STANDARD MAIL REGISTRATION AND SCHEDULING

1. Complete the PSI Examination Registration Form (found at the end of the bulletin). Payment of fees may be made by credit card (VISA, MasterCard, American Express or Discover), money order, company check or cashier's check. Make your money order or check payable to PSI and print your social security number on it to ensure that your fees are properly assigned. **CASH AND PERSONAL CHECKS ARE NOT ACCEPTED.**
2. Mail the completed registration form and payment to:

PSI licensure:certification  
ATTN: Examination Registration CA DENTAL BOARD  
3210 E Tropicana  
Las Vegas, NV 89121  
(877) 392-6422 • Fax (702) 932-2666  
[www.psiexams.com](http://www.psiexams.com)

Please allow 2 weeks to process your Registration. After 2 weeks, you may schedule your examination by calling PSI at (877) 392-6422, Monday through Friday between 4:30 am and 7:00 pm, or Saturday-Sunday between 6:00 am and 2:30 pm, Pacific Time. You may also schedule online by accessing PSI's registration website at [www.psiexams.com](http://www.psiexams.com).



## CANCELING AN EXAMINATION APPOINTMENT

You may cancel and reschedule an examination appointment without forfeiting your fee *if your cancellation notice is received 2 days prior to the scheduled examination date*. For example, for a 9:00 a.m. Monday appointment, the cancellation notice would need to be received before 9:00 a.m. on the previous Saturday. You may call PSI at (877) 392-6422.

**Note:** A voicemail or email message is not an acceptable form of cancellation. Please use the PSI Website or call PSI and speak directly to a Customer Service Representative.

## MISSED APPOINTMENT OR LATE CANCELLATION

If you miss your appointment, you will not be able to take the examination as scheduled, further you will forfeit your examination fee, if:

- You do not cancel your appointment 2 days before the scheduled examination date;
- You do not appear for your examination appointment;
- You arrive after examination start time;
- You do not present proper identification when you arrive for the examination.

## EXAMINATION SITE CLOSING FOR AN EMERGENCY

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (877) 392-6422. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You will not be penalized. You will be rescheduled at no additional charge.

## **SPECIAL ACCOMMODATIONS AVAILABLE**

Requests for special testing accommodation must be received by the Board at the time the examination application is submitted to allow for processing. Accommodations that fundamentally alter the measurement of the skills or knowledge the examination is intended to test will not be provided.

## REQUESTING EXAMINATION ACCOMMODATIONS

Accommodations will not be provided at the examination site unless prior approval by the Board has been granted. Reasonable, appropriate, and effective accommodations may be requested from the Board by submitting the "Request for Accommodation of Disabilities" package, which can be obtained from the Board's Web site ([www.dbc.ca.gov](http://www.dbc.ca.gov)).

The Board will contact you once approved with further instructions. Do not call PSI to schedule your examination until you have received written notification from the Board regarding your request for accommodations.

## **EXAMINATION SITE LOCATIONS**

The California examinations are administered at the PSI examination centers in California as listed below:

**AGOURA HILLS**  
30851 AGOURA RD SUITE 302  
AGOURA HILLS, CA 91301  
(818) 851-9266

*FROM THE EAST: TAKE US-101 N/VENTURA FWY WEST TO REYES ADOBE RD (EXIT 38). TURN LEFT ONTO REYES ADOBE RD. TURN RIGHT ONTO AGOURA RD. 30851 AGOURA RD IS ON THE RIGHT.*  
*FROM THE WEST: TAKE US-101 S TO LINDERO CYN RD (EXIT 39). TURN RIGHT ONTO LINDERO CANYON RD. TURN LEFT ONTO AGOURA RD. 30851 AGOURA RD IS ON THE LEFT.*

**ATASCADERO**  
7305 MORRO RD, SUITE 201A  
ATASCADERO, CA 93422  
(805) 462-8983

*FROM US-101 N, TAKE THE CA-41 EXIT- EXIT 219-TOWARD MORRO RD. TURN LEFT ONTO EL CAMINO REAL. Turn LEFT onto CA-41/MORRO RD.*

*FROM US-101 S, TAKE THE MORRO RD/CA-41 EXIT- EXIT 219, TURN RIGHT ONTO CA-41/MORRO RD.*

**BAKERSFIELD**  
5405 STOCKDALE HIGHWAY  
SUITE 103  
BAKERSFIELD, CA 93309  
(661) 735-5351

*FROM INTERSTATE 5-SOUTH, TAKE THE STOCKDALE HIGHWAY EXIT, EXIT 253. TURN RIGHT ONTO STOCKDALE HIGHWAY. END AT 5405 STOCKDALE HIGHWAY.*

*FROM INTERSTATE 5-NORTH TOWARD BAKERSFIELD, KEEP LEFT TO TAKE CALIFORNIA 99 NORTH VIA EXIT 221 TOWARD BAKERSFIELD/FRESNO. TAKE THE CALIFORNIA 58 EAST EXIT TOWARD TEHACHAPI/MOJAVE. TAKE THE EXIT ON THE LEFT TOWARD CALIFORNIA STATE UNIVERSITY/ STOCKDALE HIGHWAY/BRUNDAGE LANE. TURN LEFT ONTO WIBLE ROAD, TURN SLIGHT LEFT ONTO STOCKDALE HIGHWAY. END AT 5405 STOCKDALE HIGHWAY.*

**CARSON**  
17420 AVALON BLVD, SUITE 205  
CARSON, CA 90746  
(310) 400-7393

*FROM CA-91 E/GARDENA FWY TAKE THE AVALON EXIT. OFF RAMP WILL LEAD YOU ONTO ALBERTONI ST. MAKE A RIGHT ONTO AVALON BLVD AND WE ARE LOCATED ON THE RIGHT HANDSIDE (SAME PARKING LOT AS CARL'S JR).*

*FROM CA-91 W TAKE THE AVALON EXIT. MAKE A LEFT ONTO AVALON BLVD. MAKE A U-TURN ON AVALON BLVD AND ALBERTONI ST. WE ARE LOCATED ON THE RIGHT-HAND SIDE. (SAME PARKING LOT AS CARL'S JR).*

**DIAMOND BAR**  
21660 EAST COPLEY DR SUITE 260  
DIAMOND BAR, CA 91765  
(909) 860-8158

*FROM I-10 E, TAKE THE GRAND AVE EXIT, EXIT 38A. TURN RIGHT ONTO S GRAND AVE. TURN RIGHT ONTO GOLDEN SPRINGS DR. TURN LEFT ONTO COPLEY DR.*

*FROM 60 WEST, TAKE GRAND AVE EXIT, EXIT 24B. TURN LEFT ONTO GRAND AVE. TURN RIGHT ONTO GOLDEN SPRINGS DR. TURN LEFT ONTO COPLEY DR. 21660 COPLEY DR, STE 260 IS ON THE LEFT.*



**EL MONTE - SANTA FE SPRINGS**

10330 PIONEER BOULEVARD, SUITE 285  
 SANTA FE SPRINGS, CA 90670  
 (562) 325-8113

FROM THE I-5 NORTH TAKE NORWALK BLVD EXIT #121, TURN RIGHT ONTO NORWALK BLVD. TURN LEFT ONTO IMPERIAL HWY/CA-90. TURN RIGHT ONTO PIONEER BLVD, TESTING CENTER WILL BE ON YOUR RIGHT.

**FRESNO**

351 E. BARSTOW, SUITE 101  
 FRESNO, CA 93710  
 (559) 538-3975

FROM CA-41 S, TAKE THE BULLARD AVE EXIT. TURN LEFT ONTO E BULLARD AVE. TURN RIGHT ONTO N FRESNO ST. PASS THROUGH THE INTERSECTION OF FRESNO AND BASTOW AVE. TAKE THE FIRST DRIVEWAY ON THE RIGHT-HAND SIDE.

FROM CA-41 N, TAKE THE SHAW AVE EXIT TOWARD CLOVIS. TURN RIGHT ONTO E SHAW AVE. TURN LEFT ONTO N FRESNO ST. TURN LEFT INTO THE LAST DRIVEWAY BEFORE BARSTOW AVE. TESTING CENTER IS IN THE OFFICE COMPLEX ON THE SW CORNER OF BARSTOW AND FRESNO ST.

**IRVINE**

8 CORPORATE PARK, SUITE 200  
 IRVINE, CA 92606  
 (949) 418-9653

FROM I-405 S - USE THE 2ND LANE FROM RIGHT TO TAKE EXIT 7 FOR JAMBOREE RD, THEN USE THE LEFT 2 LANES TO TURN LEFT ONTO JAMBOREE RD. GO ABOUT 1.5 MILES THEN TURN RIGHT ONTO BECKMAN AVE. TAKE THE FIRST RIGHT ONTO CORPORATE PARK. 8 CORPORATE PARK IS THE SECOND BUILDING ON THE RIGHT.

FROM I-5 S - TAKE EXIT 100 FOR JAMBOREE RD. USE THE 2ND FROM RIGHT LANE TO TURN RIGHT ONTO JAMBOREE RD. TAKE THE RAMP TO JAMBOREE RD THEN KEEP LEFT AT THE FORK TO CONTINUE ONTO JAMBOREE RD. GO ABOUT 2.2 MILES THEN TURN LEFT ONTO BECKMAN AVE. TAKE THE FIRST RIGHT ONTO CORPORATE PARK. 8 CORPORATE PARK IS THE SECOND BUILDING ON THE RIGHT.

ONCE PARKED, PROCEED THROUGH THE FRONT ENTRANCE AND TAKE THE ELEVATOR TO THE SECOND FLOOR. THE TEST CENTER IS IN SUITE 200.

**LAWNDALE**

THE BAYTOWER CORPORATE CENTER SUITE 330  
 15901 HAWTHORNE BLVD  
 LAWNDALE, CA 90260  
 310-793-1200

FROM I-5S, MERGE ONTO CA-110S, WHICH BECOMES I-110S. MERGE ONTO I-105W. TAKE THE I-405S/I-405N EXIT AND MERGE ONTO I-405S. TURN RIGHT ONTO INGLEWOOD AVE. TURN LEFT ONTO MANHATTAN BEACH BLVD. TURN RIGHT ONTO HAWTHORNE BLVD.

**REDDING**

2861 CHURN CREEK, UNIT C  
 REDDING, CA 96002  
 (530) 221-0945

FROM I-5 S, TAKE THE CYPRESS AVENUE EXIT (677). TURN RIGHT ONTO E. CYPRESS AVE. TURN RIGHT ON CHURN CREEK RD.

FROM I-5 N TOWARDS SACRAMENTO, TAKE THE CYPRESS AVE EXIT (677). TURN LEFT ONTO E. CYPRESS AVE. TURN RIGHT ONTO CHURN CREEK RD.

FROM 299 E TOWARDS REDDING, START GOING WEST ON CA-299. MERGE ONTO I-5 S RAMP ON THE LEFT TOWARDS SACRAMENTO. TAKE THE CYPRESS AVE EXIT (677). TURN LEFT ONTO E. CYPRESS AVE. TURN RIGHT ONTO CHURN CREEK RD.

FROM 299 W TOWARDS REDDING. START GOING EAST ON CA-299 TOWARDS WEAVERVILLE/REDDING. FROM 299 EAST TURN RIGHT ONTO CA-273/CA-299 E/MARKET STREET. TURN LEFT ONTO CA-299-E. MERGE ONTO I-5 S VIA EXIT 2A TOWARDS RED BLUFF/SACRAMENTO. TAKE THE CYPRESS AVE EXIT (677). TURN LEFT ONTO E. CYPRESS AVE. TURN RIGHT ONTO CHURN CREEK RD.

**RIVERSIDE**

7888 MISSION GROVE PARKWAY S., SUITE 130  
 RIVERSIDE, CA 92508  
 (951) 565-8037

FROM THE CA-91W TOWARD RIVERSIDE/BEACH CITIES, TAKE THE CENTRAL AVENUE EXIT TOWARD MAGNOLIA CENTER. TURN LEFT ONTO CENTRAL AVE. CENTRAL AVE BECOMES ALESSANDRO BLVD. VEER TO THE RIGHT, THEN STAY STRAIGHT TO GO ONTO TRAUTWEIN RD (YOU WILL PASS COMMUNICATIONS CENTER DR). TURN LEFT ONTO MISSION GROVE PKY W.

FROM THE HIGH DESERT/SAN BERNARDINO AREA 215 S, WHERE THE 60 FWY, 91 FWY AND THE 215 FWY SPLIT, TAKE 215S (SIGNS FOR THE 60 EAST INDIO). TAKE EXIT 27C FOR ALESSANDRO BLVD, TURN RIGHT ONTO E ALESSANDRO BLVD, TURN LEFT ONTO MISSION GROVE PKWY S.

**SACRAMENTO**

8950 CAL CENTER DR, SUITE 158  
 SACRAMENTO, CA 95826  
 (916) 476-5926

FROM US-50 E: USE THE RIGHT TWO LANES TO TAKE EXIT 11 FOR WATT AVE. USE THE RIGHT 2 LANES TO TURN RIGHT ONTO WATT AVE. USE THE LEFT LANE TO TURN LEFT AT THE FIRST CROSS STREET ONTO FOLSOM BLVD. USE THE LEFT TWO LANES TO TURN LEFT ONTO MANLOVE RD. TURN LEFT ONTO CAL CENTER DR. BUILDING 8950 WILL BE ON THE LEFT.

FROM US-50 W: USE THE RIGHT TWO LANES TO TAKE EXIT 11 FOR WATT AVE. USE THE LEFT 2 LANES TO TURN LEFT ONTO WATT AVE. USE THE LEFT LANE TO TURN LEFT AT THE FIRST CROSS STREET ONTO FOLSOM BLVD. USE THE LEFT TWO LANES TO TURN LEFT ONTO MANLOVE RD. TURN LEFT ONTO CAL CENTER DR. BUILDING 8950 WILL BE ON THE LEFT.

**SAN DIEGO**

5440 MOREHOUSE DRIVE, SUITE 2300  
 SAN DIEGO, CA 92121  
 (858) 550-5940

FROM I-805 S, TAKE THE SORRENTO VALLEY RD/MIRA MESA BLVD EXIT. TURN LEFT ONTO MIRA MESA BLVD, TURN LEFT ONTO SCRANTON ROAD. TURN RIGHT ONTO MOREHOUSE DRIVE.

FROM I-805 N TOWARD LOS ANGELES, TAKE THE MIRA MESA BLVD/VISTA SORRENTO PKWY EXIT. TURN RIGHT ONTO MIRA MESA BLVD. TURN LEFT ONTO SCRANTON RD. TURN RIGHT ONTO MOREHOUSE DR.

ADDITIONAL PARKING CAN BE FOUND (on top of the AT&T building) BY CONTINUING ON MOREHOUSE PAST OUR BUILDING AND TURNING LEFT AT THE NEXT DRIVEWAY UP THE HILL

**SAN FRANCISCO**

150 EXECUTIVE PARK BLVD., STE 2400  
 SAN FRANCISCO, CA 94134  
 (415) 844-0008

I-80 W BECOMES US-101 S. TAKE EXIT 429 A TOWARD MONSTER PARK/TUNNEL AVE. TAKE THE RAMP TOWARD 3COM PARK. TURN RIGHT ONTO ALANNA RD. TURN LEFT ONTO EXECUTIVE PARK BLVD.

**SANTA CLARA**

2936 SCOTT BLVD  
 SANTA CLARA, CA 95054  
 (408) 844-0008

FROM US-101 N, TAKE THE SAN TOMAS EXPWY/MONTAGUE EXPWY EXIT- EXIT 392. TAKE THE SAN TOMAS EXPWY RAMP. MERGE ONTO SAN TOMAS EXPY/CR-G4. TURN LEFT ONTO SCOTT BLVD.

FROM I-880 S TOWARD SAN JOSE, TAKE THE MONTAGUE EXPWY EXIT (7). TAKE THE MONTAGUE EXPWY WEST RAMP. MERGE ONTO MONTAGUE EXPY/CR-G4 E. TURN LEFT ONTO E TRIMBLE RD. E TRIMBLE RD BECOMES DE LA CRUZ BLVD. TURN SLIGHT RIGHT ONTO CENTRAL EXPY/CR-G6 W. TURN SLIGHT RIGHT ONTO SCOTT BLVD.





## SANTA ROSA

160 WIKIUP DRIVE, SUITE 105  
SANTA ROSA, CA 95403  
(707) 791-3113

FROM US-101 N, TAKE MARK WEST SPRINGS/RIVER ROAD EXIT. TURN RIGHT ON MARK WEST SPRINGS. TURN LEFT AT OLD REDWOOD HIGHWAY. TURN RIGHT ON WIKIUP DRIVE. FIRST DRIVEWAY ON RIGHT.

FROM US-101 S, TAKE MARK WEST SPRINGS/RIVER ROAD EXIT. TURN LEFT ON MARK WEST SPRINGS. TURN LEFT AT OLD REDWOOD HIGHWAY. TURN RIGHT ON WIKIUP DRIVE. FIRST DRIVEWAY ON RIGHT.

## UNION CITY

32960 ALVARADO-NILES RD, SUITE 650  
UNION CITY, CA 94587  
(510) 901-7992

FROM I-880 N - AT EXIT 23, TAKE RAMP RIGHT AND FOLLOW SIGNS FOR ALVARADO NILES RD. TURN RIGHT ONTO ALVARADO NILES RD. AFTER ABOUT A MILE, MAKE A U-TURN AT DOWE AVE. TAKE THE FIRST RIGHT INTO THE OFFICE PARK AND THEN TAKE THE FIRST LEFT ONCE ON THE PROPERTY. SUITE 650 WILL BE IN THE FIRST BUILDING ON YOUR RIGHT. FROM I-880 S - AT EXIT 23, TAKE RAMP RIGHT AND FOLLOW SIGNS FOR ALVARADO NILES RD. TURN LEFT ONTO ALVARADO NILES RD. AFTER ABOUT A MILE, MAKE A U-TURN AT DOWE AVE. TAKE THE FIRST RIGHT INTO THE OFFICE PARK AND THEN TAKE THE FIRST LEFT ONCE ON THE PROPERTY. SUITE 650 WILL BE IN THE FIRST BUILDING ON YOUR RIGHT.

## VENTURA

4245 MARKET ST, SUITE 208  
VENTURA, CA 93003  
(805) 650-5220

FROM US-101N, TAKE THE TELEPHONE ROAD EXIT 65. TURN LEFT ONTO TELEPHONE ROAD. TURN RIGHT ONTO MARKET STREET.

## VISALIA

3400 W MINERAL KING AVE, SUITE D  
VISALIA, CA 93291  
(559) 627-6700

FROM CA-99N, MERGE ONTO CA-198E VIA EXIT 96 TOWARD VISALIA/SEQUOIA NAT'L PARK. TAKE THE EXIT TOWARD DEMAREE STREET. MERGE ONTO W NOBLE AVENUE. TURN LEFT ONTO S COUNTY CENTER DRIVE. TAKE THE 1<sup>ST</sup> LEFT ONTO W MINERAL KING AVENUE.

## WALNUT CREEK

175 LENNON LANE, SUITE 203  
WALNUT CREEK, CA 94598  
(925) 906-9165

FROM I-5N, KEEP LEFT TO TAKE I-580W TOWARD TRACY/SAN FRANCISCO. MERGE ONTO I-680N VIA EXIT 44B TOWARD SACRAMENTO/WALNUT CREEK/CONCORD. TAKE THE YGNACIO VALLEY ROAD EXIT AND TURN RIGHT. TURN LEFT ONTO LENNON LANE.

## REPORTING TO THE EXAMINATION SITE

**Please DO NOT wear scrubs to take the WRITTEN portion(s) of your exam(s). Pocketed clothing is not permitted during the WRITTEN portion(s) of the exam(s).**

On the day of the examination, you must arrive at least 30 minutes prior to your scheduled appointment time. This allows time for check-in and identification verification and provides time to familiarize yourself with the examination process. If you arrive late, you may not be admitted to the examination site and you may forfeit your examination registration fee. Even though candidates will be thumb printed, you are still required to comply with any identification requirements established by the appropriate regulatory entity.

## REQUIRED IDENTIFICATION AT EXAMINATION SITE

You must provide 1 form of identification, either:

- Non-expired government issued driver's license
- Non-expired government issued identification card (state, military)
- Non-expired passport
- **U.S. issued passport card**
- Non-resident alien card
- Non-expired Mexican Consulate Identification
- Employment Authorization Card (EAC)

If you cannot provide the required identification, you must call (877) 392-6422 at least 3 weeks prior to your scheduled appointment to arrange a way to meet this security requirement. Failure to provide all of the required identification at the time of the examination without notifying PSI is considered a missed appointment, and you will not be able to take the examination.

## CALIFORNIA LAW SECURITY PROCEDURES

Section 123 of the California Business and Professions Code states: It is a misdemeanor for any person to engage in any conduct which subverts or attempts to subvert any licensing examination or the administration of an examination, including, but not limited to:

- Conduct which violates the security of the examination materials;
- Removing from the examination room any examination materials without authorization;
- The unauthorized reproduction by any means of any portion of the actual licensing examination;
- Aiding by any means the unauthorized reproduction of any portion of the licensing examination;
- Paying or using professional or paid examination-takers for the purpose of reconstructing any portion of the licensing examination;
- Obtaining examination questions or other examination material, except by specific authorization either before, during, or after an examination; or
- Selling, distributing, buying, receiving, or having unauthorized possession of any portion of a future, current, or previously administered licensing examination.
- Communicating with any other examinee during the administration of a licensing examination.
- Copying answers from another examinee or permitting one's answers to be copied by another examinee.
- Having in one's possession during the administration of the licensing examination any books, equipment, notes, written or printed materials, or data of any kind, other than the examination materials distributed, or otherwise authorized to be in one's possession during the examination.
- Impersonating any examinee or having an impersonator take the licensing examination on one's behalf.

Nothing in this section shall preclude prosecution under authority provided for in any other provision of law. In addition to any other penalties, a person found guilty of violating this section, shall be liable for the actual damages sustained by the agency administering the examination not to exceed ten thousand dollars (\$10,000) and the costs of litigation.



## IMPORTANT INFORMATION ABOUT TAKING AN EXAMINATION

6. All candidates will have their thumbprint taken during examination check-in. The thumb print must be matched after candidates return from a restroom break and any time the candidate leaves and returns to the test site after check-in.
7. The temperature in the testing room is maintained at a moderate level. Candidates are advised to layer clothing. Acceptable layered clothing includes lightweight shirts, sweaters, and pullovers without pockets or hoods. These items must be worn upon check-in, while you wait to enter the testing room, and during your initial seating for the examination. If the layered item is removed during the examination, you will be required to store it in the lobby while time continues to count down on your examination. Outerwear (coats, heavy jackets, vests, shawls, scarves, etc.) is not allowed in the testing rooms.
8. There are timing mechanisms available in the testing room and on the computer console to help candidates keep track of time during the test administration. Candidates are not permitted to bring watches or other timekeeping devices into the testing rooms.
9. Only one candidate will be allowed to take a restroom break at a time. Candidates are required to sign out when leaving and returning to the testing room. If a candidate's restroom break takes longer than 5 (five) minutes, a proctor will check on the candidate and will notify the applicable regulatory entity of the occurrence. The regulatory entity will investigate and take appropriate action.
10. The following is a non-exhaustive list of personal items that are not permitted in the testing rooms:

Purses	Briefcases/daypacks/luggage
Cellular phones	Pagers
Drinks (including water)	Food/candy/snacks/gum
Good luck items	Luggage
Calculators	Reading materials
Textbooks	Notes
Any recording device	Smart devices
Electronic devices	Headphones or earphones/earbuds
Personal pens or pencils	Therapeutic items
Cameras	Over-the-counter medication
Weapons	Fashion scarves
Hats/baseball caps/visors*	Sunglasses**
Bulky, large or noisy jewelry***	Prescription drugs****

\*Headwear worn for religious purposes is subject to inspection.

\*\*Prescription and non-prescription eyeglasses may not be worn for the photo. Eyeglasses subject to inspection.

\*\*\*Jewelry that is allowed into the examination room is subject to inspection.

\*\*\*\*Drugs that are medically necessary during the pendency of the examination may be brought into the examination site, in a container bearing a proper prescription label with the name of the candidate and of the drug; any such

medication is subject to examination by a proctor upon check-in.

Examination proctors will have considerable discretion to refuse permission of clothing and/or items that compromise the integrity or security of the examination.

During the check-in process, all candidates will be asked if they possess any of the prohibited items and all candidates will be asked to empty their pockets. If prohibited items are found during check-in, candidates must return these items to their vehicle or other place of safekeeping. Neither PSI nor the Department of Consumer Affairs will be responsible for the items. Any candidate possessing prohibited items in the testing room will have his or her examination results invalidated, and PSI will notify the appropriate regulatory entity of the occurrence.

11. Shoes must be worn at all times and feet are not permitted on the chairs. Feet must remain on the floor during examinations.
12. Copying any portion of the examination content by any means, or communicating examination content for the purpose of aiding its unauthorized reproduction, whether before, during, or after the examination, is a violation of PSI security policy and existing law. Either one may result in the disqualification or invalidation of examination results, the denial of your license, and may result in criminal prosecution.
13. If a candidate is asked by a proctor to step into the lobby during your examination, the proctor will suspend the candidate's examination, so all remaining test time will be retained.

Only candidates, and those individuals with prior regulatory entity approval, are allowed to be present in the testing sites.

14. If candidates require that an exception be made to ANY of the abovementioned security procedures, candidates must contact their regulatory entity PRIOR to the date of their examination. The regulatory entity must provide the exception to PSI. NO EXCEPTIONS WILL BE MADE ON THE DAY OF THE EXAMINATION.

### TAKING THE EXAMINATION BY COMPUTER

The examination will be administered via computer. You will be using a mouse and computer keyboard.

#### IDENTIFICATION SCREEN

You will be directed to a semiprivate testing station to take the examination. When you are seated at the testing station, you will be prompted to confirm your name, identification number, and the examination for which you are registered.



## TUTORIAL

Before you start your examination, an introductory tutorial is provided on the computer screen. The time you spend on this tutorial, up to 15 minutes, DOES NOT count as part of your examination time. Sample questions are included following the tutorial so that you may practice answering questions, and reviewing your answers.

## TEST QUESTION SCREEN

The “function bar” at the top of the test question screen provides mouse-click access to the features available while taking the examination.



The screenshot shows a test interface with a top navigation bar containing icons for Mark, Comments, Goto, Help, and End. Below this is a status bar with the following information: Question: 3 of 40, Answered: 2, Unanswered: 1, Marked: 0, View: All, and Time Left(Min): 359. The main question area displays question 3: "What do the stars on the United States of America's flag represent?". Below the question is a text box for the answer and a prompt "(Choose from the following options)". There are four radio button options: 1. Presidents, 2. Colonies, 3. States, and 4. Wars. At the bottom of the question area are two buttons: "<< Back" and "Next >>".

One question appears on the screen at a time. During the examination, minutes remaining will be displayed at the top of the screen and updated as you record your answers.

## EXPERIMENTAL QUESTIONS

In addition to the number of questions per examination, a small number of five to fifteen “experimental” questions may be administered to candidates during the examinations. These questions will not be scored and the time taken to answer them will not count against examination time. The administration of such non-scored experimental questions is an essential step in developing future licensing examinations.

## EXAMINATION RESULTS

You will receive the results of your Written Examination at the PSI test center. The results will also be sent to the Board.

If you fail the written examination, you will receive a failed score report and an application to retake the examination.

Licenses will not automatically be issued once you pass both examinations. The Board must first complete its criminal history investigation of each applicant.

## THE DENTAL SEDATION ASSISTANT PERMITHOLDER EXAMINATION PLAN

**Patient Monitoring (40%)** - This area assesses the candidate's ability to monitor patients undergoing conscious sedation or general anesthesia utilizing data from noninvasive instrumentation (i.e., pulse oximeters, electrocardiograms, capnography, blood pressure, pulse, and respiration rate monitoring devices) and visual signs and symptoms of patient's physiological functioning.

Job Task	Associated Knowledge Statements
Monitor patient by utilizing physical and clinical signs related to levels of anesthesia. (8%)	<ul style="list-style-type: none"> <li>▪ Knowledge of physical signs and symptoms of cardiovascular functions related to levels of anesthesia.</li> <li>▪ Knowledge of physical signs and symptoms of respiratory functions related to levels of anesthesia.</li> <li>▪ Knowledge of physical signs and symptoms of central and peripheral nervous system related to levels of anesthesia (i.e., levels of consciousness, etc.).</li> <li>▪ Knowledge of physical signs and symptoms of metabolic functions related to levels of anesthesia.</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to monitoring a sedation patient.</li> </ul>
Monitor patient by utilizing data from noninvasive devices related to levels of anesthesia. (32%)	Routine Physiological Changes (18%)
	<ul style="list-style-type: none"> <li>▪ Knowledge of noninvasive devices and data utilized to monitor cardiovascular functions related to levels of anesthesia (i.e., EKG, BP monitor, etc.).</li> <li>▪ Knowledge of noninvasive devices and data utilized to monitor respiratory functions related to levels of anesthesia (i.e., pulse oximeter, capnography, precordial stethoscope, etc.).</li> <li>▪ Knowledge of noninvasive devices and data utilized to monitor metabolic functions related to levels of anesthesia (i.e., capnography, etc.).</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to monitoring a sedation patient.</li> </ul>
	Dental Sedation Emergencies and Complications (14%)
	<ul style="list-style-type: none"> <li>▪ Knowledge of physical signs and symptoms indicating complications or a medical emergency related to sedation (i.e., airway, respiratory, cardiovascular, neurological). (BPC p.186, (f)(1))</li> <li>▪ Knowledge of noninvasive device data indicating complications or a medical emergency.</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to monitoring a sedation patient.</li> </ul>

**Drug Identification and Draw (30%)** - This area assesses the candidate's ability to identify and draw drugs, limited to identification of appropriate medications, ampule and vial handling in preparation for drug and medication draw, and withdrawing drugs of correct amount as verified by the supervising licensed dentist.

Job Task	Associated Knowledge Statements
Identify and verify drugs and medications ordered by the licensed provider. (20%)	<ul style="list-style-type: none"> <li>▪ Knowledge of overview (pharmacology, contraindications, adverse reactions and characteristics, etc.) of classes of drugs and medications used in contemporary sedation and general anesthesia.</li> <li>▪ Knowledge of overview (pharmacology, contraindications, adverse reactions and characteristics, etc.) of classes of drugs and medications used in contemporary medical emergency treatment (i.e., reversal agents, oxygen, epinephrine, etc.).</li> <li>▪ Knowledge of procedures to identify and verify drugs and medications ordered (i.e., expiration date, concentration, generic versus brand name, etc.).</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to identifying and verifying drugs.</li> </ul>



<p>Draw drugs and medications ordered by the licensed provider. (10%)</p>	<ul style="list-style-type: none"> <li>▪ Knowledge of ampule and vial handling in preparation for drug and medication draw.</li> <li>▪ Knowledge of techniques and measurement for drug and medication drawing and syringe labeling.</li> <li>▪ Knowledge of characteristics of syringes and needles including use, types, gauges, lengths, and components.</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to drawing drugs and medications.</li> </ul>
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**Adding Drugs, Medications and Fluids to Intravenous Lines (22%)** - This area assesses the candidate's ability to add drugs, medications, and fluids to intravenous lines using a syringe, provided that a supervising licensed dentist is present at the patient's chairside, limited to determining patency of intravenous line, selection of injection port, syringe insertion into injection port, occlusion of intravenous line and blood aspiration, line release and injection of drugs for appropriate time interval.

Job Task	Associated Knowledge Statements
<p>Add drugs, medications, and fluids to intravenous lines using a syringe. (12%)</p>	<ul style="list-style-type: none"> <li>▪ Knowledge of procedures and techniques for adding drugs, medications, and fluids to IV lines, including infusion and IV bolus, drug amounts and time intervals between doses.</li> <li>▪ Knowledge of armamentaria for adding drugs, medications and fluids to IV lines (i.e., injection ports, syringe types, etc.).</li> <li>▪ Knowledge of scope of practice and supervisory requirements related to administering drugs, medications and fluids.</li> </ul>
<p>Determine patency of intravenous line. (10%)</p>	<ul style="list-style-type: none"> <li>▪ Knowledge of techniques to evaluate patency of IV lines.</li> <li>▪ Knowledge of recognition and management of IV related complications (patency, air in line, etc.).</li> <li>▪ Knowledge of armamentaria for IV set-ups, including types of fluid, IV lines, and connectors.</li> </ul>

**Removal of intravenous lines (8%)** - This area assesses the candidate's ability to remove intravenous lines.

Job Task	Associated Knowledge Statements
<p>Remove intravenous lines. (8%)</p>	<ul style="list-style-type: none"> <li>▪ Knowledge of signs and symptoms of complications associated with IV site during removal.</li> <li>▪ Knowledge of procedures (timing, indications, etc.) for the removal of IV lines.</li> </ul>

## WRITTEN EXAMINATION REFERENCES

Following is a list of publications that may help you prepare for the written exam. The list does not include all dental assisting textbooks nor is it intended to be an endorsement of the publications listed.

Dental Practice Act, Business and Professions Code, Sections 123, 1740-1777

Davis, K. (2008), *Training Manual for Anesthesia Assisting in the Oral and Maxillofacial Surgery Office, 5<sup>th</sup> edition*. Burlington, NC: PIP Printing and Marketing Services.

American Association of Oral and Maxillofacial Surgeons. (2009). *Study Guide: Dental Anesthesia Assistant National Certification Examination*.

Mosby, S.F. (2003). *Sedation: A Guide to Patient Management, 4<sup>th</sup> edition*. St. Louis, MO: Mosby.

Stoelting, R. K. & Miller, R. D. (2000) *Basics of Anesthesia, 4<sup>th</sup> edition*. New York: Churchill Livingstone.

# THE DENTAL ASSISTANT EXTENDED FUNCTIONS EXAMINATION PLAN

**I. Patient Treatment and Care (40%):** This area assesses the candidate’s ability to review the patient’s dental health by assessing medical and dental history; to note and chart the oral cavity; and, to provide instruction regarding oral hygiene, preoperative care, and postoperative care.

Task Statements	Knowledge Statements
3 Inspect patient’s oral condition with mouth mirror.	10 Knowledge of types of plaque, calculus, and stain formations of the oral cavity and their etiology.
4 Chart existing oral conditions and diagnostic findings at the direction of the licensed provider.	11 Knowledge of conditions of the tooth surfaces (e.g., decalcification, caries, stains, and fracture lines) and how to document them.
7 Observe for signs and conditions that may indicate abuse or neglect.	12 Knowledge of effects of substance abuse on patient’s physical condition including oral tissues.
11 Conduct preliminary myofunctional evaluation of the head and neck. (EF2)	13 Knowledge of effects of nutrition and malnutrition on the oral cavity.
12 Perform and complete Oral Health Assessments under the direction of a dentist, RDH, or RDHAP. (EF2)	14 Knowledge of effects of smoking and smokeless tobacco on oral tissue.
	17 Knowledge of legal requirements and ethical principles regarding patient confidentiality.
	18 Knowledge of types of dental conditions of hard and soft tissue and how to identify and document them.
	19 Knowledge of basic oral and dental anatomy (e.g., nomenclature, morphology, and tooth notation).
	20 Knowledge of legal requirements and ethical principles regarding mandated reporting (abuse and neglect).
	22 Knowledge of the RDA/RDAEFs legal and ethical responsibilities to report violations of the state dental practice act, administrative rules or regulations to the proper authorities.
	25 Knowledge of requirements for the supervision of RDAs and RDAEFs related to different dental procedures.
	26 Knowledge of scope of practice for RDAs and RDAEFs related to initial patient assessment.
	27 Knowledge of techniques and procedures for performing an extra-oral and intraoral examination of the hard and soft tissues to identify pathology and abnormalities.

**II. Dental Procedures: Direct and Indirect Restorations (45%):** This area assesses the candidate’s knowledge of materials, techniques, procedures, and scope of practice regarding direct and indirect restoration dental procedures.

Task Statements	Knowledge Statements
24 Place and contour direct restorations. (EF2)	50 Knowledge of RDA and RDAEF scopes of practice related to direct restorations.
25 Adjust, finish, and polish direct restorations. (EF2)	51 Knowledge of RDA and RDAEF scopes of practice related to indirect restorations.
26 Perform preliminary adjustment of permanent indirect restorations prior to cementation. (EF2)	52 Knowledge of RDA and RDAEF scopes of practice related to final impressions.
27 Cement permanent indirect restorations. (EF2)	53 Knowledge of types of direct restorative materials and the techniques and procedures for their application, placement, and contouring.
28 Perform final adjustment of permanent indirect restorations after cementation. (EF2)	54 Knowledge of techniques and procedures for adjusting, finishing, and polishing direct restorative materials.
29 Take final impressions for permanent indirect restorations and toothborne removable prostheses. (EF 1/2)	55 Knowledge of techniques and procedures for identifying and adjusting occlusal, marginal, and contact discrepancies.
30 Place retraction cord for impression procedures.	56 Knowledge of the types of luting agents and the techniques and procedures for applying them in the placement of permanent indirect restorations.
	57 Knowledge of techniques and procedures for making final adjustment of permanent indirect restorations after cementation.
	58 Knowledge of materials and techniques for taking final impressions.
	59 Knowledge of techniques for gingival cord retraction, tissue management, and cord removal.

**III: Dental Specialty Procedures (15%):** This area assesses the candidate’s knowledge of materials, techniques, procedures, and scope of practice regarding dental specialty procedures (endodontic and prosthetic appliances).

<b>Task Statements</b>		<b>Knowledge Statements</b>	
60	Select, size, and fit endodontic master point and accessory points.	105	Knowledge of techniques and procedures for fitting master point and accessory points.
61	Cement endodontic master and accessory points.	106	Knowledge of techniques and procedures for cementing endodontic master and accessory points.
72	Take final impressions for toothborne prosthetic appliances.	107	Knowledge of scope of practice for RDA and RDAEFs related to dental specialty procedures.
		119	Knowledge of materials and techniques for taking final impressions for toothborne prosthetic appliances.

# THE ORTHODONTIC ASSISTANT EXAMINATION PLAN

**1. General Orthodontic Knowledge (16%)** - This area assesses the candidate's knowledge of general orthodontic and dental practices.

Job Task		Associated Knowledge Statements
1.	T1. Select size and type of orthodontic bands. T2. Fit orthodontic bands. T7. Preposition orthodontic brackets.	K1. Knowledge of basic dental anatomy and nomenclature K2. Knowledge of sizes, types, and material characteristics of orthodontic bands and attachments. K3. Knowledge of theory of band positioning and tooth movement. K3.1 Knowledge of theory of bracket positioning and tooth movement.

**2. Orthodontic Bands and Cement Removal (23%)** - This area assesses the candidate's ability to size, fit, cement and remove orthodontic bands. This area also assesses the candidate's ability to remove excess cement.

Job Task		Associated Knowledge Statements
2A.	T1. Select size and type of orthodontic bands. T2. Fit orthodontic bands. T3. Cement orthodontic bands.	K1. Knowledge of basic dental anatomy and nomenclature. K2. Knowledge of sizes, types, and material characteristics of orthodontic bands and attachments. K3 Knowledge of theory of band positioning and tooth movement. K4. Knowledge of alignment, adaptation, and contouring of bands for fit. K5. Knowledge of armamentaria and procedures for fitting and cementing orthodontic bands. K6. Knowledge of orthodontic banding cements and adhesive materials.
2B.	T4. Remove orthodontic bands.	K7. Knowledge of armamentaria for removal of orthodontic bands. K8. Knowledge of methods, procedures, and techniques for removal of orthodontic bands.
2C.	T10. Remove excess cement with a hand instrument or ultrasonic scaler from supragingival surfaces of teeth undergoing orthodontic treatment.	K21. Knowledge of methods, techniques, and procedures for using an ultrasonic scaler for the removal of cement (i.e., tips, types, maintenance, etc.).
		K22. Knowledge of methods, techniques, and procedures for using hand instruments for the removal of cement (i.e., finger rest, types, maintenance, etc.). K23. Knowledge of scope of practice limitations related to removal of cement (supragingival only)

**3. Orthodontic Brackets (38%)** - This area assesses the candidate's ability to place and remove orthodontic brackets.

Job Task		Associated Knowledge Statements
3A.	T5. Prepare teeth for bonding. T6. Select orthodontic brackets. T7. Preposition orthodontic brackets. T8. Cure orthodontic brackets.	K9. Knowledge of chemistry and characteristics of etchant, priming, and bonding materials (i.e., hydrofluoric acid, etc.). K10. Knowledge of material selection for etching, priming, and bonding related to specific bonding surfaces. K11. Knowledge of armamentaria for tooth etching, priming, prepositioning, and bonding. K12. Knowledge of procedures for tooth etching and priming (application and time factors). K13. Knowledge of bracket selection according to tooth identification. K14. Knowledge of methodologies and procedures for placing bonding materials on and



Job Task		Associated Knowledge Statements
		<p>prepositioning of orthodontic brackets.</p> <p>K15. Knowledge of methods for curing orthodontic brackets.</p> <p>K16. Knowledge of types and characteristics of brackets and attachments.</p> <p>K17. Knowledge of scope of practice limitations related to the positioning and curing of orthodontic brackets.</p>
3B.	T9. Remove orthodontic brackets and attachments.	<p>K18. Knowledge of armamentaria for bracket and attachment removal.</p> <p>K19. Knowledge of method, procedures, and techniques for brackets and attachment removal.</p> <p>K20. Knowledge of scope of practice limitations related to removal of brackets and attachments (bonding materials).</p>

**4. Orthodontic Archwires (23%)** - This area assesses the candidate's ability to place and ligate archwires.

Job Task		Associated Knowledge Statements
4.	T11. Place and ligate archwires.	<p>K24. Knowledge of types of archwire materials and characteristics.</p> <p>K25. Knowledge of armamentaria and techniques used for placing and ligating archwires (i.e., full slot engagement, etc.).</p> <p>K26. Knowledge of procedures for placement of archwire previously adjusted by the dentist.</p> <p>K27. Knowledge of ligature systems, purpose and types (including elastic, wire, and self-ligating).</p>

## WRITTEN EXAMINATION REFERENCES

Following is a list of publications that may help you prepare for the written exam. The list does not include all dental assisting textbooks nor is it intended to be an endorsement of the publications listed.

Bird, D. L. & Robinson, D. S. (2011). Modern Dental Assisting, 10th Edition



DENTAL BOARD - SEDATION/ORTHODONTIC ASSISTANT WRITTEN EXAMINATIONS REGISTRATION FORM

Before you begin. . .

Read the Candidate Information Bulletin before filling out this registration form. You must provide all information requested and submit the appropriate fee. PLEASE TYPE OR PRINT LEGIBLY. Registration forms that are incomplete, illegible, or not accompanied by the proper fee will be returned unprocessed. Registration fees are not refundable.

1. Legal Name: [Grid for Last Name] [Grid for Jr/III]

[Grid for First Name] [Grid for Middle Name]

2. Candidate ID: [Grid]

3. Mailing Address: [Grid for Number, Street] [Grid for Apt/Ste]

[Grid for City] [Grid for State] [Grid for Zip Code]

4. Telephone: Home [Grid] - [Grid] - [Grid] Office [Grid] [Grid] - [Grid]

5. Email: \_\_\_\_\_@\_\_\_\_\_

6. Examination: (select one) [ ] Dental Sedation Assistant Permitholder Examination (\$22.50) [ ] Dental Assistant Extended Functions Examination (\$22.50) [ ] Orthodontic Assistant Examination (\$26.50)

7. Total Fee \$\_\_\_\_\_. Pay by credit card, money order, company check or cashier's check. Make check or money order made payable to PSI. Cash and personal checks are not accepted.

If paying by credit card, check one: [ ] VISA [ ] MasterCard [ ] American Express [ ] Discover

Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Verification No: \_\_\_\_\_ The card verification number may be located on the back of the card (the last three digits on the signature strip) or on the front of the card (the four digits to the right and above the card account number).

Billing Street Address: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Cardholder Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

8. Affidavit: I certify that the information provided on this registration form (and/or telephonically to PSI) is correct. I understand that any falsification of information may result in denial of registration. I have read and understand the candidate information bulletin.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

When you have finished this form in its entirety, please mail the form, along with the appropriate fees, to the address below.

PSI licensure:certification \* ATTN: Examination Registration CA DENTAL BOARD 3210 E Tropicana \* Las Vegas, NV \* 89121 Fax (702) 932-2666 \* (877) 392-6422 \* TTY (800) 735-2929 www.psiexams.com



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Fax (916) 263-2140  
www.dbc.ca.gov



## STATE OF CALIFORNIA NOTICE OF ELIGIBILITY

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You are eligible to participate in the California Dental Assistant Examination. Your address label contains important date information. In the upper left corner of the address label (above your name) is the date your application for examination was approved; following that is the date by which you must take your examination. You must take your examination by the date specified on the label, or you will need to reapply (see *Expiration of Examination Eligibility* in this bulletin).

Note: Your name below must match exactly the one required form of identification you must bring to the testing site.

This bulletin is designed to provide you with information regarding examination procedures and content areas. To schedule your examination, please refer to the instructions in this bulletin

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