

Colorado Dental Jurisprudence Examination

(Revised as of November 2008)

This is an open book, mail-in examination covering the Dental Practice Law, Board Rules and Regulations and Board Policies. The most current copy of these documents can be found at <http://www.dora.state.co.us/dental/>. You must complete this exam and include the answer sheet with your application packet. The answer sheet is found at the end of the test.

The test consists of 40 True-False questions. All questions are weighted equally and are worth 2.5 points. You must correctly answer 28 of the 40 test items (70% right) to pass this Board-approved jurisprudence examination. If you do not pass, you will be required to retake the test until you pass. Do not call Board staff if you cannot locate the answer to the questions. This is an examination and staff cannot help you.

1. Every licensed dentist and dental hygienist shall furnish the Dental Board with a change of business or permanent address within sixty days (60) of any change.
2. A dentist or dental hygienist is required to report to the Board within 90 days any final disposition, surrender of a license, or any adverse action taken against a license.
3. When the Board subpoenas a complete patient record, it is acceptable for the licensed dentist or dental hygienist to compile and send only a legible summary for a specific patient with the patient's radiographs.
4. A dental hygienist may be the proprietor of a place where supervised or unsupervised dental hygiene is performed and may purchase, own, or lease equipment necessary to perform supervised or unsupervised dental hygiene.
5. A licensed dentist may perform medical immobilization with or without receipt of training beyond basic dental education.
6. No dental procedure that will contribute to or result in an irremediable alteration of the oral anatomy may be assigned to anyone other than a licensed dentist.
7. The Board has the authority to arbitrate or adjudicate fee disputes between a licensee and a patient.
8. An inactive licensee may provide uncompensated dental care.
9. A dentist or dental hygienist who fails to pay the registration fee and allows their license to expire shall be subject to penalties.

10. When a dentist uses an assistant to construct a full denture, the dentist must first certify that the patient has no pathologic condition that requires surgical correction or other treatment prior to complete denture service.
11. It is required that all unlicensed dental personnel complete at least 4 hours of education and training before being allowed to expose patients to ionizing radiation.
12. Diagnosis and treatment planning may not be assigned to any dental hygienist or dental assistant.
13. The dentist shall conduct a biennial inventory of all controlled substances stocked in the office.
14. Monitoring and dismissal of a patient during anesthesia/sedation procedures may be delegated under direct supervision to a dental hygienist or a dental assistant.
15. The final actions of the Board taken pursuant to the statute for disciplinary action shall be open to the public and may be posted on the DORA website.
16. All dental licensees, including dentists who hold inactive and retired licenses, must carry malpractice insurance to maintain licensure.
17. A licensee may be disciplined for refusing to make records, including x-rays, available to a patient upon receipt of a proper written request.
18. All personnel who render patient care services in a dental setting where anesthesia/sedation is administered must have proof of current basic life support (BLS) knowledge and skills.
19. Failure to utilize generally accepted standards of infection control procedures may constitute an act of grossly negligent dental or dental hygiene practice.
20. Each dentist shall pay an additional fee to fund the peer assistance program.
21. A licensee's failure to report a dental malpractice judgment or settlement to the Board by the licensee within thirty days is cause for disciplinary action.
22. When dispensing or administering a schedule II, III, IV, or V drug the dentist must maintain two sets of records; one in the patient's record, and

- a second in a record which must be kept separate from the individual patient's record.
23. If, based on credible evidence in a written complaint, it appears to the Board that a licensee is acting in a manner that is an imminent threat to the health and safety of the public then the Board may issue an order to cease and desist such activity.
 24. A dentist's or dental hygienist's license, or a copy thereof, shall be available on the premises where the dentist or dental hygienist practices.
 25. Duplicate copies of Laboratory Work Orders must be retained for five years by both the dentist and the unlicensed person (lab) to whom it was furnished.
 26. A dentist who has a retired Colorado license may provide dental services on a voluntary basis in Colorado to the indigent provided it's on a limited basis and no fee is charged.
 27. An applicant for reinstatement of a dental license who has not practiced at least one year out of the preceding six years must demonstrate to the Board how they have maintained their professional ability, knowledge and skills.
 28. A licensed dental hygienist can administer local anesthesia under direct supervision of a licensed dentist only if the specific education requirements have been met and the licensee has submitted certification or proof to the Board.
 29. In order to administer and induce conscious analgesia solely by means of nitrous oxide/oxygen inhalation techniques, a dentist shall complete an approved course with a minimum of 12 hours including 4 patient contact hours.
 30. Any claim to furnish, supply, construct, reproduce or repair any prosthetic denture, bridge, appliance, or other structure to be worn in the human mouth or upon the jaws, maxillofacial area, or adjacent and associated structure is considered practicing dentistry.
 31. Consent involving solely the presentation or description of a listing of various behavior management techniques is considered to constitute informed consent for medical immobilization.
 32. Prescriptions for controlled substances shall include either original signature or rubber stamp signatures from the prescribing dentist.

33. General or indirect supervision allows certain procedures to be performed without the presence of a dentist on the premises but requires the prior knowledge and consent of the dentist.
34. Dental assistants may scale supragingivally, but may not scale subgingivally as it pertains to the practice of dental hygiene.
35. During medical immobilization, parents or legal guardians cannot be denied access to the patient during treatment in the dental office unless the health and safety of the patient, parent or guardian, or dental staff would be at risk. In this instance, the parent or guardian must be informed of the reason they are denied access and both the incident and reason for denial must be documented in the patient record.
36. A generator of infectious waste is required to develop and implement a management plan appropriate to their facility and this plan must be available to the licensing Board.
37. A licensee may advertise that his or her regular business practice is to waive patient deductibles or co-payments.
38. The placement and removal of local therapeutic agents for treatment of periodontal pockets may be assigned to dental hygienists and dental assistants but only under the direct supervision of a Colorado licensed dentist.
39. If the Board has reasonable cause to believe that a person licensed to practice dentistry or dental hygiene in this state is unable to practice with reasonable skill and safety to patients, the Board may require the licensed to submit to mental or physical examinations.
40. Anesthesia permits are valid for a period not to exceed 4 years.

Colorado Dental Jurisprudence Examination

Applicant's Name (please print)

Type of Application (Dental/Dental Hygiene)

Applicant's Mailing Address (please print)

Instructions: Review the Dental Practice Law, Board Rules and Regulations and Board Policies carefully. Read each question and mark the corresponding box below to indicate if the question is true or false. Sign and date this score sheet and submit along with your application.

	<u>True</u>	<u>False</u>		<u>True</u>	<u>False</u>		<u>True</u>	<u>False</u>
1.	<input type="checkbox"/>	<input type="checkbox"/>	15.	<input type="checkbox"/>	<input type="checkbox"/>	29.	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	16.	<input type="checkbox"/>	<input type="checkbox"/>	30.	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	17.	<input type="checkbox"/>	<input type="checkbox"/>	31.	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	18.	<input type="checkbox"/>	<input type="checkbox"/>	32.	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	19.	<input type="checkbox"/>	<input type="checkbox"/>	33.	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	20.	<input type="checkbox"/>	<input type="checkbox"/>	34.	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>	21.	<input type="checkbox"/>	<input type="checkbox"/>	35.	<input type="checkbox"/>	<input type="checkbox"/>
8.	<input type="checkbox"/>	<input type="checkbox"/>	22.	<input type="checkbox"/>	<input type="checkbox"/>	36.	<input type="checkbox"/>	<input type="checkbox"/>
9.	<input type="checkbox"/>	<input type="checkbox"/>	23.	<input type="checkbox"/>	<input type="checkbox"/>	37.	<input type="checkbox"/>	<input type="checkbox"/>
10.	<input type="checkbox"/>	<input type="checkbox"/>	24.	<input type="checkbox"/>	<input type="checkbox"/>	38.	<input type="checkbox"/>	<input type="checkbox"/>
11.	<input type="checkbox"/>	<input type="checkbox"/>	25.	<input type="checkbox"/>	<input type="checkbox"/>	39.	<input type="checkbox"/>	<input type="checkbox"/>
12.	<input type="checkbox"/>	<input type="checkbox"/>	26.	<input type="checkbox"/>	<input type="checkbox"/>	40.	<input type="checkbox"/>	<input type="checkbox"/>
13.	<input type="checkbox"/>	<input type="checkbox"/>	27.	<input type="checkbox"/>	<input type="checkbox"/>			
14.	<input type="checkbox"/>	<input type="checkbox"/>	28.	<input type="checkbox"/>	<input type="checkbox"/>			

I hereby certify that I have read the Dental Practice Law, Board Rules and Regulations and Board Policies and completed the Jurisprudence Examination pursuant to C.R.S. 12-35-119(1)(b), 12-35-120(2)(e), 12-35-127(1)(c) and 12-35-127(3)(a).

Signature

Date