



# Coronal Polish Exam for Arizona Residents

## 2015 Exam Application

Valid Through Dec. 31, 2015

This application packet provides information concerning the requirements for the Arizona Coronal Polishing (AZCP) Certificate. The Dental Assisting National Board, Inc. (DANB), under agreement with the Arizona State Board of Dental Examiners (ASBDE), administers the complete certificate program, a service that includes providing exam information, distributing applications, testing, issuing certificates, and handling inquiries.

**Coronal Polishing Definition.** The Arizona Dental Practice Act states: "A dental assistant may polish the natural and restored surfaces of the teeth under the general supervision of a dentist licensed pursuant to this chapter if the assistant has passed an examination approved by the Board" (Section 32-1291B). The ASBDE further defines 'polish': "'Polish' means for the purpose

of A.R.S. Section 32-1291(B) only, a procedure limited to the removal of plaque and extrinsic stain from exposed natural and restored tooth surfaces that utilizes an appropriate rotary instrument with rubber cup or brush and polishing agent. A licensee or dental assistant shall not represent that this procedure alone constitutes an oral prophylaxis."

All inquiries regarding **the Arizona dental practice act and regulations** should be addressed to: Arizona State Board of Dental Examiners, 4205 N. 7th Ave., #300, Phoenix, AZ 85013; 1-602-242-1492.

Inquiries regarding the **Coronal Polish (CP) exam** should be addressed to DANB.

## Arizona State Requirements

To perform coronal polishing procedures in the state of Arizona under the general supervision of a licensed dentist, a dental assistant must hold an Arizona Coronal Polishing Certificate. To qualify, one must:

1. Pass DANB's CP exam (application is Form A in this application packet), **AND**
2. Submit an Arizona Coronal Polishing Clinical Skills Affidavit [application is Form B in this application packet] completed by a licensed dentist or coronal polishing educator/course instructor; **AND**
3. Receive the Arizona Coronal Polishing Certificate from DANB, sent upon successful completion of steps 1 and 2 above.

### Applying For a DANB Exam

#### 3-4 week processing/ mailing time

1. Candidate mails/faxes exam application, documentation (if applicable) and fees to DANB.
2. DANB processes candidate exam application.
3. If the exam application is accepted as complete, DANB mails exam candidate a *Test Admission Notice*.

#### 60-day window to schedule and take exam

4. Candidate schedules exam location, date and time with testing vendor Pearson VUE.
5. Candidate sits for DANB® exam. An unofficial pass/fail exam result will be provided after completing the exam.

#### 2-3 weeks from exam date

6. DANB mails exam candidate official exam results.

### Submitting an Exam Application

Exam applications may be mailed or faxed to DANB. The candidate should read this packet carefully to ensure the completed application is submitted with all required documents and fees.

**Signing and dating the application is required.** By signing and dating the application, the candidate affirms that the application and documentation are accurate and that the candidate agrees to abide by all applicable DANB policies described in this packet, including the *Application Statements* on page 8. The signature also allows DANB to release exam results to state regulatory agencies.

### Payment Instructions

DANB accepts payment by check, money order or credit card (Visa, MasterCard, American Express or Discover). Check or money order payments must be payable to DANB in U.S. dollars and written in English. The application is a contract to test, and the check or credit card authorization is

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the contract to pay. The candidate should put his/her name on the check.

## Returned Checks

If a candidate applies for an exam with a check that is returned by the bank for any reason (including but not limited to nonsufficient funds, stop payment, closed account or refer to maker), DANB will assess a \$25 nonsufficient funds (NSF) fee to the candidate's account and notify the candidate. The candidate will not be allowed to take the exam until a cashier's check or money order for the full application and exam fee plus the \$25 NSF fee has been received. If full payment has not been received within 30 days, the application will be null and void and the candidate's account will remain on finance hold. The candidate must pay \$75 (the \$25 NSF fee and \$50 nonrefundable processing fee) before DANB will remove the finance hold and process any exam application. No new business will be allowed for the candidate until the finance hold has been removed.

## Incomplete Exam Applications

The candidate is responsible for submitting a complete exam application. Incomplete applications are returned to the candidate, and a letter indicating the reasons for the incomplete application will be sent to the candidate and the payer (if different). A refund for the exam fee, minus the \$50 nonrefundable application fee, will be sent within 30 days of notice of the incomplete application. Refunds will be made only to the payer.

An exam application is considered incomplete for reasons including but not limited to:

- Missing information (e.g., candidate and/or payment information)
- Appropriate documentation is not enclosed
- No date or signature
- Insufficient payment
- Expired exam application

## Duplicate Exam Application Policy

If two applications are received for the same exam, completed applications will be accepted, and duplicate payments will be returned, minus the \$50 nonrefundable application fee, within 30 days, after the payment clears.

## Group Testing

Groups of four or more candidates may request to take any DANB exam on the same day, at or around the same time. Download the *Group Testing Form* from [www.danb.org](http://www.danb.org) or contact DANB at 1-800-367-3262 with questions.

## Candidates with Disabilities

DANB exams are designed to provide an equal opportunity for each candidate to demonstrate his/her knowledge-based competency. The exam will be administered to best ensure that it accurately reflects a candidate's aptitude, achievement

levels or other skills intended to be measured, rather than reflecting a candidate's impaired sensory, manual or speaking skills except where those skills are factors the examination purports to measure.

DANB adheres to the provisions outlined in the Americans with Disabilities Act. In accordance with this act, DANB will make every reasonable effort to offer the exams in a manner that is accessible to people with disabilities. If auxiliary aids or alternative arrangements are required, DANB will attempt to make the necessary provisions, unless providing such would fundamentally alter the measurement of skills and knowledge the exam is intended to test, would result in undue burden, or would provide an unfair advantage to the disabled candidate.

To allow sufficient time to make the necessary arrangements for modifications or auxiliary aids, the candidate must submit the *Reasonable Accommodations Request* forms (found on [www.danb.org](http://www.danb.org)) with the required documentation and exam application, specifying exactly what aid or modification is requested by a physician or psychologist. DANB will only accept the forms found on [www.danb.org](http://www.danb.org). DANB reserves the right to authorize the use of auxiliary aids or modifications in such a way as to maintain the exam integrity and security. DANB exams are administered only in the English language. Modifications will not be approved for a candidate who requests accommodations because English is a second language. Contact DANB at 1-800-367-3262 with questions.

## DANB's Nondiscrimination Policy

DANB does not discriminate in application, examination or certification activities on the basis of age, sex, gender identity, marital status, race, color, religion, national origin, sexual orientation or disability.

## Retaking a Passed Exam

DANB certificants/candidates may take and pass DANB national certification exams [CDA®, COA®, CPFDA®, CRFDA®] or component exams [ICE®, RHS®, GC, OA, CP, SE, TA, TF, AMP, IM, TMP, IS, RF] only once. These exams may be retaken if required for certification (the exam was passed longer than five years ago for CDA or COA component exams or three years ago for CPFDA or CRFDA component exams), or if directed to retake the component exam by DANB to recertify or reinstate certification. Any candidate/certificant in violation of this policy will have his/her application denied and returned, and will be assessed the \$50 nonrefundable processing fee.

## Scheduling a DANB Exam

### Receiving the Test Admission Notice

DANB will send the candidate a *Test Admission Notice* within three to four weeks of receiving the completed exam application. The *Test Admission Notice* confirms that the candidate

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is eligible to take the exam and includes instructions to schedule the exam appointment.

The candidate must check the *Test Admission Notice* for any of the following errors and report them to DANB immediately at 1-800-367-3262:

- The exam the candidate registered for is not the one listed
- The candidate's name is spelled incorrectly
- The candidate's ID reflects a different name than the one used to register to test (e.g., married, maiden, hyphenated, mother's last name)

The name on the *Test Admission Notice* must match the ID that the candidate will bring to the test center. The middle name does not need to be spelled out, but the initial must match (e.g., "M" on the ID and "Mary" on the *Test Admission Notice* is acceptable and vice versa).

The candidate will be turned away from testing if the name on the ID does not match the *Test Admission Notice*. The candidate would need to reapply; see the *Request a New Testing Window Due to a Missed Exam* section in this packet for details.

## The 60-Day Testing Window

The candidate must take the exam within the 60-day window listed on the *Test Admission Notice*.

## Scheduling an Exam Appointment

The candidate should schedule the exam appointment as soon as he/she receives the *Test Admission Notice*. The *Test Admission Notice* includes instructions to schedule the exam appointment at a Pearson VUE location. To find the nearest test center, visit [www.vue.com/danb](http://www.vue.com/danb).

Appointments are scheduled on a first-come, first-served basis. Test centers may have limited availability. Changes to test centers may occur without notice. DANB cannot guarantee the availability of specific test center locations, dates or times.

## Exam Appointment Confirmation

After the candidate schedules the exam appointment, he/she will receive a confirmation via email (if the candidate's email address was included on the exam application) or regular mail from Pearson VUE. Candidates should open and read all email and mail from Pearson VUE. There will be important information regarding the appointment.

## Rescheduling an Exam Appointment

The candidate may reschedule an exam appointment or extend the 60-day testing window. Regardless who paid for an exam, only the candidate may reschedule an exam appointment. **To reschedule the exam appointment within**

**the 60-day window**, the candidate must contact Pearson VUE. The candidate may reschedule the exam appointment up to 24 hours before his/her scheduled exam start time at no additional fee. See the *Test Admission Notice* for Pearson VUE contact information.

## Requesting a New Testing Window

If a candidate cannot schedule or reschedule an exam before the end of his/her 60-day testing window and would like to request a new testing window, he/she must complete both steps below:

**STEP 1: Cancel the exam appointment:** If an exam appointment has been scheduled, the candidate must cancel his/her exam appointment with Pearson VUE at least 24 hours before the scheduled exam start time. An exam appointment can be canceled online by visiting Pearson VUE's website, [www.vue.com/danb](http://www.vue.com/danb), or by calling Pearson VUE's toll-free hot line during normal business hours. Failure to cancel an exam appointment will result in forfeiture of the full application/exam fees, and the application is null and void.

**STEP 2: Request a new 60-day testing window:** Mail or fax the *Request a New Testing Window* form to DANB within 60 days (pay \$55 nonrefundable processing fee) or within 61-120 days (pay \$110 nonrefundable processing fee) after the end of your original testing window. A candidate may request a new testing window up to two times. After the second request for a new testing window, a current exam application with any required documentation and full fees must be submitted.

## Requesting a New Testing Window Due to a Missed Exam Appointment

If the candidate arrives more than 15 minutes after an exam appointment start time, the candidate will be accommodated at the discretion of the test center administrator. If the administrator is unable to accommodate the candidate, or if the candidate does not take a scheduled exam because the candidate missed the appointment (for any reason except a valid emergency) or the candidate was denied entry, the candidate may reapply for the exam with a reduced fee using the *Request a New Testing Window Due to a Missed Exam Appointment* form within 60 days of the missed exam appointment (if received after 60 days, the candidate must reapply for the exam with the required documentation and pay the full fees). DANB will mail the form to eligible candidates. A candidate may request a new testing window due to a missed exam appointment one time. If another appointment is missed (for any reason except a valid emergency) or the exam is not taken within the new testing window, a current exam application with full fee must be submitted. Contact DANB at 1-800-367-3262 with questions. If the candidate has had an emergency, please see *Request a New Testing Window Due to an Emergency* below.

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## Requesting a New Testing Window Due to an Emergency

If a candidate misses an exam appointment due to a personal emergency, the candidate must submit a *Request to Receive a New Testing Window Due to an Emergency* form explaining the emergency, including supporting documents. The candidate must submit the request within 60 days of the scheduled exam date. Download the form at [www.danb.org](http://www.danb.org). Call 1-800-367-3262 with any questions about what constitutes an emergency and appropriate supporting documentation. Approved requests will receive a new 60-day testing window at no additional fee.

## Canceling a Testing Window for a Partial Refund

**STEP 1: Cancel the exam appointment:** If an exam appointment has been scheduled, the candidate **must** cancel his/her exam appointment with Pearson VUE at least 24 hours before the scheduled exam start time. An exam appointment can be canceled online by visiting Pearson VUE's website, [www.vue.com/danb](http://www.vue.com/danb), or by calling Pearson VUE's toll-free hotline during normal business hours. Failure to cancel a scheduled exam appointment will result in forfeiture of the full application/exam fees and the application is null and void.

## STEP 2: Request to cancel the 60-day testing window:

Mail or fax the *Request to Cancel a Testing Window* form so that it is received by DANB before the end of the 60-day testing window. DANB will issue a refund minus the \$35 cancellation fee and \$50 nonrefundable application fee (a total of \$85 retained by DANB). DANB will issue the refund to the payer.

## When Pearson VUE Cancels an Exam Appointment

In the event of weather or other emergency, Pearson VUE will attempt to notify candidates by phone of a cancellation and will reschedule at no additional fee.

## Taking a DANB Exam

### What to Bring to the Test Center

#### Bring the *Test Admission Notice* and one form of ID.

The ID must be a currently valid, non-expired government-issued photo and signature-bearing ID, in roman characters. A driver's license, passport, military ID card, state ID card, U.S. government-issued permanent resident card are all acceptable. Test centers may use an electronic fingerprinting, palm vein and/or photographic security system for identification purposes only. Test centers may use a video/audio recording system to enhance exam security. The candidate must not bring any reference materials or notes into any test center area. The candidate will be provided with an erasable noteboard and marker to use during the exam. No visitors or unauthorized individuals will be permitted in any test center area during testing sessions.

## Test Center Environment

The candidate will receive a tutorial before the exam to help the candidate feel comfortable with the computerized format. Time spent on the tutorial will not count as part of the exam time period. The tutorial is not a practice test. The tutorial describes how to mark answers.

There are no breaks during the exam. Candidates may be excused to visit the restroom, one at a time. During the absence, the exam time clock will continue to run. No additional time will be provided. There is no requirement for specific clothing, but it is a good idea to wear comfortable clothing in layers to adjust for minor fluctuations in room temperature. It is also a good idea to wear soft-soled shoes to allow the candidate to leave his/her seat without disrupting others.

## Candidate Behavior Before, During and After an Exam Appointment

**The behavior of each candidate taking the exam will be monitored.** Improper behavior is not acceptable before, during or after an exam appointment. DANB seeks to ensure a fair and equitable testing experience for all individuals and to ensure the security and reliability of the process. *DANB's Disciplinary Policy & Procedures* form, which is available at [www.danb.org](http://www.danb.org), contains examples of improper behavior.

## Exam Security

**The exam is confidential.** Any individual who removes or attempts to remove testing-related materials from the test center, or who attempts to memorize, distribute or otherwise misuse an exam, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purpose, without the prior express written permission of DANB, will be subject to legal action. Any candidate or certificant who engages in improper behavior also will be subject to disciplinary action by DANB, which may include denial or revocation of certification or recertification. ***DANB's Disciplinary Policy & Procedures* document is available at [www.danb.org](http://www.danb.org).**

The test center administrator will notify DANB of anyone who talks during the exam, gives or receives assistance, or otherwise engages or appears to engage in dishonest or improper behavior before, during, or after the exam. Those candidates may be required to cease taking the exam and leave the test center. The test center administrator will send a report to DANB regarding the incident. After reviewing a reported incident, DANB will determine whether there is reason to believe that a candidate has engaged in cheating or other improper behavior, or has otherwise violated the security of the exam. If DANB determines that the incident report is valid, DANB may, at its discretion, pursuant to the procedures set forth in the *DANB's Disciplinary Policy & Procedures* form, take disciplinary actions, including but not limited to the following:

- Order the candidate to retake the exam at a time and place to be determined by DANB

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- Invalidate or refuse to release the score of the candidate
- Deny the candidate's current application for certification
- Require the candidate to wait a specified period of time before reapplying to take the exam
- Revoke the candidate's eligibility to sit for future exams
- Take a combination of any of the above actions or other action that DANB may deem appropriate.

If a test center administrator allows a candidate to take an exam that the candidate is not registered for, those results will not be valid. The original application will be considered null and void, and the full application and exam fees will be forfeited. The candidate will be required to reapply with a new application with required documentation and payment of the full application fees.

## Exam Integrity

To ensure a consistently high-quality testing program, each exam is routinely reviewed for reliability and validity. Each exam question is statistically analyzed and evaluated for performance. DANB exam committees, with final DANB Board approval, establish passing standards (the minimum score required to pass a particular DANB exam) using standard psychometric procedures for criterion-referenced tests. A candidate is expected to perform at or above the Board-established standard to pass each exam.

## After the Exam

### Name/Address Changes

The candidate must notify DANB of address changes or any errors in the candidate's name. Call 1-800-367-3262 or email [danbmail@danb.org](mailto:danbmail@danb.org). A candidate must submit a *Name Change Request* form and required documentation to change a name with DANB. The form is available at [www.danb.org](http://www.danb.org).

### DANB Communications

All communications sent to and from DANB are DANB's property. DANB cannot guarantee that communications will remain confidential; clients have no expectation of privacy with respect to items sent or received. DANB may disclose communications as necessary to comply with legal processes. DANB responds to phone and email messages within two business days.

### Hand Scoring

DANB will hand score an exam on request. The candidate must submit a *Request for Hand Scoring of Exam Results* form and a \$50 hand scoring fee to DANB within 30 days after the official score date printed on the exam results. The form is available on DANB's website at [www.danb.org](http://www.danb.org). Hand scoring results of the exam are completed within 30 days of a request. If the pass/fail status is reversed as a result of the hand scoring, the \$50 fee will be refunded.

## Official Exam Results

The candidate will receive preliminary results at the test center upon completing the exam. DANB presents exam results as a pass or fail. DANB provides sub-content area performance ratings for candidates who receive a fail status, which provide useful information regarding performance in each of the content areas on the exam. Sub-content results are rated as high priority or average priority. Sub-content area performance ratings are a reflection on how well a candidate did in a particular content area of the exam and cannot be used in any way to determine overall exam status. Knowledge of an area of weakness is a useful tool to help plan for further study.

The candidate is not considered to have passed or failed an exam until DANB generates and mails the official exam results approximately two to three weeks after the exam was administered.

Exam results and certificates that are returned because of an undeliverable address will be held for 90 days. DANB will call the candidate to request a new mailing address. If DANB cannot reach the candidate and the 90-day period expires, DANB will destroy the original results. If the candidate contacts DANB with an address change after the 90-day period, DANB will release new results after the candidate submits a *Request for a Duplicate Exam Results* form and/or a *Request for a Duplicate Certificate* form with a \$25 fee for each request.

## Retaking a Failed Exam

If the candidate takes an exam and does not pass, the candidate must reapply for the exam with a new application, required documentation and fee in order to take the exam again. State laws may require additional education after failed attempts. Visit [www.danb.org](http://www.danb.org) for state contact information.

There is no limit on how many times the candidate can re-take a failed exam.

## Release of Exam Results

Exam pass/fail results will not be released to employers or any individuals other than the candidate, except on written request of the candidate. DANB releases exam results or certification verifications to some state regulatory agencies.

## Appealing a Decision

If a candidate wishes to appeal a DANB decision regarding eligibility, administrative or exam content issues, he/she may submit a *Request for Reconsideration Under DANB's Review and Appeal Process* form and a \$25 appeal fee to DANB's Executive Director within 30 days of the date on the DANB correspondence that prompts the candidate to appeal (e.g., date on the letter indicating the candidate's application was incomplete, date on candidate exam results). The

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policy governing requests for reconsideration is available by contacting DANB at 1-800-367-3262.

## Verification of Certificates and Certification

DANB will verify DANB certification and DANB exam pass/fail status and the effective date(s) of certification over the phone to anyone on request, since these items are matters of public record and may be disclosed. DANB will not verify passing status of state exams over the phone, but will verify if a candidate has earned a state certificate or license issued by DANB on behalf of a state board of dentistry. The *Candidate/Certificant Request for Verification* form is available at [www.danb.org](http://www.danb.org). Only a candidate, certificant or employer may request written verification. DANB offers verification on its website. See the *Application Statements* for more details.

## Duplicate Exam Results

Duplicate exam results are available for exams taken within the last five years. The candidate must submit a *Request for Duplicate Exam Results* form and the \$25 fee for each exam results request. Exam results older than five years are not available, although DANB will verify certifications earned and exams passed more than five years ago.

## Duplicate Certificates

Duplicate certificates are available for \$25. Any state certificate or license issued by DANB on behalf of a state board of dentistry, as well as for any national DANB exam where a certificate has been earned is available. Because DANB provides several opportunities for a candidate to correct errors, this \$25 duplicate certificate fee also applies for any reprint of a certificate due to a spelling error. Download the *Request for Duplicate Certificate* form at [www.danb.org](http://www.danb.org).

## Conditional Certificates and Official Exam Results

In some cases, DANB may grant a conditional authorization to test an exam candidate who answered “yes” to background information questions and is in the process of completing court or regulatory agency requirements. Not every person who answers “yes” to a background information question will be placed on conditional status. Conditional status will be offered to an exam candidate only in certain circumstances at DANB’s discretion. A candidate who has been placed on conditional status will receive an official exam result and, if earned, a certificate of knowledge-based competency marked “conditional.” If a person is conditionally certified or has received a conditional certificate of knowledge-based competency or official exam result, this means that the certificate and/or results will remain valid only if certain conditions are met in a timely manner. In many cases, the conditions will include fulfillment of all obligations to a court of law or regulatory agency. Full details about conditional certificates and official exam results and related processes and procedures will be provided to each individual who is placed on conditional status by DANB.

## CPFDA Certification

DANB’s Coronal Polish (CP) exam is one of the components of DANB’s Certified Preventive Functions Dental Assistant (CPFDA) certification. DANB’s CPFDA certification exam is made up of four component exams: Coronal Polish (CP), Sealants (SE), Topical Anesthetic (TA), and Topical Fluoride (TF). By passing the CP exam, Arizona candidates are one step closer to earning CPFDA certification. Currently, the Arizona dental practice act allows or does not prohibit dental assistants to perform all four CPFDA functions. If you want to learn more about CPFDA certification or apply to take the SE, TA and/or TF exams, please visit [www.danb.org](http://www.danb.org) to download a CPFDA application packet.

## Exam Reference Materials

DANB exam committees use the list of textbooks and other reference materials below in constructing the Coronal Polish (CP) exams. These lists do not include all textbooks and materials that are available for the study of dental assisting; they are simply the resources that the Exam Committee subject matter experts have determined to provide the latest information covering the knowledge needed to match or surpass a determined level of competency in the practice of dental assisting. Making the lists available is intended to be helpful to the candidate in preparing for the exams. It is not intended to be an endorsement for any of the publications listed. It is not necessary to use any of these books in order to pass the exam; conversely, reading all of these books will not guarantee that you will pass the exam. Candidates should prepare for DANB’s CP exam using as many different preparatory sources as possible. Candidates can obtain the reference materials listed by contacting the publisher directly or through various bookstores; some are available online.

1. *Clinical Practice of the Dental Hygienist*, 11th edition. Wilkins, E. M. Baltimore: Lippincott Williams & Wilkins.
2. *Dental Assisting: A Comprehensive Approach*, 4th edition. Phinney, D. and Halstead, J. Clifton Park, NY: Thomson Delmar Learning.
3. *Essentials of Dental Assisting*, 5th edition. Robinson, D. and Bird, D. St. Louis: Saunders/Elsevier.
4. *Torres and Ehrlich: Modern Dental Assisting*, 10th and 11th editions. Bird, D. and Robinson, D. St. Louis: Saunders/Elsevier.

# Coronal Polish Exam for Arizona Residents

## Coronal Polish Exam Blueprint

### I. Dental and oral anatomy (8%)

- A. Dental arches
- B. Dentitions
- C. Tooth divisions
- D. Surfaces
- E. Anatomic structures
- F. Tooth anatomy
- G. Universal numbering system

### II. Oral prophylaxis (7%)

### III. Objective of coronal polish (7%)

### IV. Dental deposits (15%)

- A. Dental plaque, dental calculus, materia alba
  - 1. Composition
  - 2. Characteristics
  - 3. Significance
  - 4. Relationship to disease
  - 5. Stages of formation
  - 6. Common locations
- B. Stains
  - 1. Formation
  - 2. Classes
    - a. Extrinsic
    - b. Intrinsic
    - c. Exogenous
    - d. Endogenous

### V. Polishing precautions (15%)

- A. Fulcrum
  - 1. Rules for location
  - 2. Reason for using
- B. Handpiece
  - 1. Speed
  - 2. Pressure
  - 3. Control
- C. Others
  - 1. Adaptation of polishing cup
  - 2. Heat production
  - 3. Removal of tooth structure
  - 4. Aerosol production
  - 5. Demineralization
  - 6. Restorations
  - 7. Tooth sensitivity
  - 8. Implants

### VI. Patient education and recordkeeping (10%)

- A. Patient education and prevention
- B. Recordkeeping
  - 1. Health history
  - 2. Legal requirements

### VII. Abrasives and polishing agents (8%)

- A. Characteristics
- B. Selection
  - 1. Indications
  - 2. Contraindications
- C. Application

### VIII. Polishing technique (20%)

- A. Armamentarium
- B. Positioning (ergonomics)
  - 1. Patient
  - 2. Operator
  - 3. Equipment
- C. Disclosing
  - 1. Purpose
  - 2. Types
  - 3. Application
- D. Establish a pattern/sequence
- E. Stroke (polishing motion)
- F. Flossing
- G. Rinsing
- H. Evaluation

### IX. Infection control/OSHA protocol (10%)

- A. Safety/standard precautions
  - 1. Operator
  - 2. Patient
- B. Cross-contamination
- C. Disinfection of treatment room and equipment

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## Application Statements

Please read the following statements carefully. Candidate's signature on the application indicates understanding and agreement to be legally bound by these statements.

1. I hereby apply to the Dental Assisting National Board, Inc.(DANB) for examination by DANB and issuance of my exam scores to the Arizona State Board of Dental Examiners (ASBDE) in accordance with and subject to the procedures and regulations of DANB and the ASBDE. Under penalty of perjury, I declare that the information provided on my application is true. I have read and agree to the requirements and conditions set forth in DANB's Coronal Polish Exam For Arizona Residents Application Packet covering the administration of the Coronal Polish (CP) exam and DANB policies, including but not limited to *DANB's Code of Professional Conduct*. I agree to disqualification from the exam, to denial of Certification, and to the forfeiture and return to DANB of any certificate granted me by DANB or by DANB on behalf of the ASBDE in the event that any of the answers or statements made by me in this application are false, or in the event that I violate any DANB rules or regulations. I authorize DANB to make whatever inquiries and investigations it deems necessary to verify my credentials or professional standing.
2. I hereby release DANB, its directors, officers, examiners and agents from any and all liability arising out of or in connection with any action or omission by any of them in connection with this application, the certification process, any exam given by DANB, any scoring relating thereto, the failure to issue me a certificate, or any demand for forfeiture or return of such certificate ("Certification Activities"), and I agree to indemnify DANB and said persons and hold them harmless from any lawsuit, complaint, claim, loss, damage, cost or expense, including attorneys' fees, arising out of or in connection with said Certification Activities. I UNDERSTAND THAT THE DECISION AS TO WHETHER I QUALIFY FOR A NATIONAL CERTIFICATION OR CERTIFICATE OF KNOWLEDGE-BASED COMPETENCY RESTS SOLELY AND EXCLUSIVELY WITH DANB AND THAT THE DECISION OF DANB IS FINAL. Notwithstanding the above, should I file suit against DANB, I agree that any such action shall be governed by and construed under the laws of the State of Illinois without regard to conflicts of law. I further agree that any such action shall be brought in the Circuit Court of Cook County in the State of Illinois, or the United States District Court for the Northern District of Illinois; I consent to the jurisdiction of such state and federal courts; and I agree that the venue of such courts is proper. I further agree that, should I not prevail in any such action, DANB shall be entitled to all costs, including reasonable attorneys' fees, incurred in connection with the litigation.
3. I understand that, except as provided below, this application and any information or material received or generated by DANB in connection with this application or the examination process will be kept confidential and will not be released unless I have authorized such release or the release is required by law. I understand that DANB will verify receipt of any DANB exam application and the date received, on request. I further understand and agree that DANB may also provide verification to anyone by phone, by mail or on DANB's website regarding whether I hold any DANB certifications, including the Certified Dental Assistant (CDA), Certified Preventive Functions Dental Assistant (CPFDA), Certified Restorative Functions Dental Assistant (CRFDA), Certified Orthodontic Assistant (COA), Certified Dental Practice Management Administrator (CDPMA), or Certified Oral and Maxillofacial Surgery Assistant (COMSA) certifications; any DANB certificates of knowledge-based competency, including the Radiation Health and Safety (RHS), Infection Control (ICE), Coronal Polish (CP), Sealants (SE), Topical Anesthetic (TA), Topical Fluoride (TF), Anatomy, Morphology and Physiology (AMP), Impressions (IM), Temporaries (TMP) and Isolation (IS); and any state-specific certificates administered by DANB on behalf of a state regulatory body, including the Arizona Radiologic Proficiency Certificate, Arizona Coronal Polishing Certificate, Oregon Radiologic Proficiency Certificate, Oregon Expanded Functions Dental Assistant Certificate and Oregon Expanded Functions Orthodontic Dental Assistant Certificate. Phone and mail verification will be provided to anyone upon request and will consist of oral or written confirmation of whether I hold any of the DANB-administered credentials listed above and the effective dates for each credential. Online verification through DANB's website may consist of online display of my name, the DANB-administered credentials I hold and dates earned, current DANB certification status, and my city and state of residence. My full address will not be posted online by DANB. I further understand and agree that DANB may, from time to time, provide my name and address along with the names and addresses of certificants and those holding DANB certificates of knowledge-based competency to dentists interested in hiring a DANB individual from their area, and to providers of continuing education opportunities. I further understand that this consent will remain in effect unless and until I submit a written request to have this information omitted from release. I understand that if I want to opt out of the online verification process, then I must submit a written request for omission of this information to the following address: DANB Communications Department, 444 N. Michigan Ave., Suite 900, Chicago, IL 60611.
4. I understand that by providing my email address on the application form, I am consenting to receive email messages from DANB and its affiliates related to their products and services or news affecting the dental assisting profession. I understand that DANB agrees not to provide my email address to any third party without my consent, and that I can request removal from DANB's email distribution list by following the directions contained in the *Privacy Policy* section of DANB's *Terms and Conditions of Use* of DANB.org, located at [www.danb.org](http://www.danb.org).
5. I authorize DANB to release my exam results to state regulatory agencies. Individuals cannot opt out of DANB release of exam results to state regulatory agencies. I also authorize DANB to use information from my application and exam(s) for statistical analysis, providing that any personal identification is deleted.
6. I understand that I can be disqualified from taking or continuing to sit for an exam, from receiving exam results and from obtaining certification if DANB determines through proctor observation, statistical analysis or any other means that I was engaged in collaborative, disruptive or other unacceptable behavior during the administration of or following the exam.
7. I understand that the content of all DANB exams is proprietary and strictly confidential information. I hereby agree that I will not disclose, either directly or indirectly, any question or any part of any question from the exam to any person or entity. I understand that the unauthorized receipt, retention, possession, copying or disclosure of any DANB exam materials, including but not limited to the content of any exam question, before, during or after the exam, may subject me to legal action. Such legal action may result in monetary damages and/or disciplinary action including voiding scores and denial or revocation of certification.
8. I understand that for each application submitted, DANB will process the appropriate payment. If I fail to show up for an exam for which I have applied, and there is no documented DANB-accepted emergency, and I failed to comply with DANB cancellation policies, I am still obligated to pay the full exam fee. I further understand that taking the exam and then revoking payment constitutes the wrongful use of DANB products and services and I may be subjected to legal action. I am obligated to pay for the exam whether I pass or fail. I agree not to dispute the exam fee. Passing candidates will not be eligible to retain their scores if the exam fee is not paid in full.





# Coronal Polish Exam for Arizona Residents

## Background Information Policy and Questions

### Background Information Policy

DANB national exam applications contain three background information questions that all exam candidates must answer. These questions require the DANB national exam candidate to disclose if he/she has had any felony convictions within the last five years or is currently serving a sentence for a felony conviction; has ever been disciplined by a regulatory, certifying or examination agency; has ever been investigated or dismissed by an educational institution for cheating or another ethical violation; or has ever been declared mentally incompetent by a court of law. DANB will review each response and make a determination, in consultation with legal counsel, on a case-by-case basis. DANB reserves the right, under extraordinary circumstances, to bring individuals for review under DANB's *Disciplinary Policy & Procedures*.

### Background Information Questions

The candidate must answer each question in the box in the background information section on the exam application. Failure to answer the background information questions will result in an incomplete application.

1. Is your answer "yes" to either of the following?
  - In the last five years, have you been convicted of, or pled guilty or no contest to, a felony or any crime punishable by confinement in a state or federal prison for any length of time?
  - Are you currently serving a sentence of confinement, home detention, parole, probation, or other court-ordered supervision, or are you subject to a reporting requirement (e.g., sex offender or violent offender registry) in connection with a felony conviction, including for any conviction that occurred more than five years ago?

*It is not necessary to report misdemeanor convictions. If you are uncertain whether a conviction was for a felony or a misdemeanor, you must mark "yes."*

2. Have you ever been the subject of any of the following:
  - Suspension, revocation, or voluntary surrender of your dental assisting license, registration, or other state-recognized dental assisting credential?
  - Suspension, revocation, or voluntary surrender of a license, registration, or other state-recognized credential in any profession?
  - Loss of authorization to practice dental assisting or any profession as an employee of the federal government?
  - Loss of authorization to practice dental assisting or any profession in a jurisdiction that does not require registration, licensure, or other recognized employment credential?
  - Disciplinary action by a professional regulatory board, certifying or examination agency, or other professional body?
  - Investigation by or dismissal from an educational institution for cheating or any other an ethical violation?
3. Have you ever been declared mentally incompetent by a court of law?

### Documentation Required if a Candidate Answers "Yes"

If a candidate answers "yes" to any background information question, he/she must attach a signed and dated personal statement describing the circumstances surrounding each occurrence, the offense or reason for the conviction or disciplinary action, the date of the adverse action, the penalties imposed, and the dates when penalties for each occurrence were or will be completed.

The candidate must also provide official documentation related to each occurrence, as described in more detail below:

- For felony convictions (i.e., a "yes" answer to the first question), documentation may include a true copy of every police report, judgment of conviction, sentencing order and termination of probation order, if applicable; documents should show the offense underlying each conviction, the date of conviction, the penalties imposed by the court and evidence that all of the requirements imposed by the court were completed. Any person being held on criminal charges or serving a sentence of confinement, including prison, jail, home detention, or an equivalent mode of confinement, for any offense, must be fully released from confinement before applying for and/or taking a DANB exam or before renewing or reinstating DANB certification.
- For regulatory, credentialing or educational disciplinary action (i.e., a "yes" answer to the second question), documentation may include a true and official statement from the disciplining agency or educational institution describing the offense and penalties imposed and, if applicable, providing evidence of completion or expiration of all penalties, including reinstatement of license or credential
- For a court declaration of mental incompetence (i.e., a "yes" answer to the third question), documentation may include true copies of all relevant court orders and related documents



# 2015 Coronal Polish (CP) Exam Application for Arizona Residents (Form A)

This 2015 application will be accepted through Dec. 31, 2015.  
After Dec. 31, 2015, download a 2016 application packet from [www.danb.org](http://www.danb.org).

### Instructions:

- Carefully read the *Application Statements* (on page 8 of this packet).
- Complete **all items** on the application. (Incomplete applications will be returned and the \$50 nonrefundable application fee retained, in addition to the \$40 nonrefundable certificate fee, if applicable.)
- Determine which forms and fees are required by checking the appropriate box to the right. Failure to submit designated forms and fees will result in an incomplete application.
- Mail/fax the completed application to DANB with the application fee or credit card information. **Note:** Application fees are not refundable.
- A *Test Admission Notice* will be mailed within three to four weeks after DANB receives your application.

### Is this your first time taking the CP Exam?

- Yes:** Submit **Form A** (CP exam application), **Form B** (AZCP Clinical Skills Affidavit/Certificate Application), and your **total fee of \$215** (\$125 exam fee, \$50 nonrefundable application fee and \$40 nonrefundable certificate fee).
- No:** Submit **Form A only** (CP exam application) with your **total fee of \$175** (\$125 exam fee and \$50 nonrefundable application fee). You do not need to resubmit Form B.

### Signature and Date

Must be signed and dated or the application will be returned as incomplete.

I hereby affirm that my answers to all questions are true and correct, I have met all eligibility requirements, and I will comply with all DANB policies and procedures. I further affirm that I have read and understood the *Application Statements* contained on page 8, and I intend to be legally bound by them. I understand that the \$50 application fee is not refundable under any circumstances.

Signature X \_\_\_\_\_ Date X \_\_\_\_\_

### Background Information

Must be filled out completely or the application will be returned as incomplete.

Read the questions in their entirety on page 9. Failure to answer all three questions will result in the application being returned as incomplete. If you checked Yes for any question, make sure to include required documentation.

- No  Yes 1. Regarding felony convictions within the last five years or sentences currently being served for felony convictions
- No  Yes 2. Regarding having ever been disciplined by a regulatory board, certifying or examination agency or educational institution
- No  Yes 3. Regarding ever being declared mentally incompetent by a court of law

### Candidate Information

Must be filled out completely or the application will be returned as incomplete.

I am a U.S. citizen.  Yes  No Non-U.S. citizens will be provided a temporary number by DANB in lieu of a Social Security #.

I work in a state different than the one in which I reside.  Yes  No If yes, what state: \_\_\_\_\_

English is the language I speak at home.  Yes  No I work in a dental office.  Yes  No

I work in a dental office that uses:  digital radiography  automatic processing  manual processing (check all that apply)

Name (must match your ID exactly) \_\_\_\_\_  
(Last) (First) (Middle Name or Initial)

Prior Name (if applicable) \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Numbers: Office(\_\_\_\_) \_\_\_\_\_ Home(\_\_\_\_) \_\_\_\_\_ Cell(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

SSN
____ - ____ - ____

### Payment Information

Must be filled out completely or the application will be returned as incomplete.

Candidate's Name \_\_\_\_\_ Candidate's SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**\$215** (includes \$125 exam fee, \$50 nonrefundable application fee & \$40 nonrefundable certificate application fee). Both forms A and B must be submitted.

**\$175** (includes \$125 exam fee and \$50 nonrefundable application fee). Only Form A should be submitted.

Check/Money Order (payable to the Dental Assisting National Board, Inc. or DANB)

Credit Card Authorization (VISA, MasterCard, Discover & American Express accepted): Amount \$ \_\_\_\_\_

CP Exam 3641 AZCP Certificate 3716
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Credit Card Account Number \_\_\_\_\_ CVV \_\_\_\_\_ Expiration Date: \_\_\_\_ / \_\_\_\_

Cardholder's Name \_\_\_\_\_ Cardholder's Signature X \_\_\_\_\_

Cardholder's Billing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

By signing, the cardholder acknowledges intent to register for the aforementioned DANB exam in the amount of the total shown hereon and agrees to perform the obligations set forth in the cardholder's agreement with the issuer. Furthermore, the cardholder understands that the signature obtained at the exam administration shall be used to indicate receipt of purchase. Candidates who fail to show up for the exam for which they registered and have not cancelled their exam as described in this packet are still required to pay for the exam. (See Application Statements, page 8, for further requirements.)

Mail: DANB 444 N. Michigan Ave., Suite 900 Chicago, IL 60611  
Questions? 1-800-367-3262 or [www.danb.org](http://www.danb.org)

OR

Fax: 312-642-8507

Do not fax twice or you will be charged twice.

# Coronal Polish Exam for Arizona Residents

## APPLICATION CHECKLIST

### Have You:

- Read the instructions and information in this application packet?
- Read and agreed to be bound by Arizona and DANB rules, regulations, policies, and procedures as noted in this application? (See Application Statements, page 8.)
- Filled out the CP Exam Application (Form A) in its entirety?
- Signed and dated the CP Exam Application (Form A)?

### If you are taking the CP for the first time, have you:

- Attached an *AZCP Clinical Skills Affidavit (Form B)*, completed and signed by a licensed dentist or a coronal polishing educator/course provider?

- Enclosed the appropriate exam/certificate fee(s) or provided credit card information?
- Enclosed the *Reasonable Accommodations Request* forms, if needed? Note: These forms can be found on [www.danb.org](http://www.danb.org).
- Made a copy of your entire application packet for your records?
- Addressed your envelope?

**Dental Assisting National Board, Inc. (DANB)**  
**444 N. Michigan Ave., Suite 900**  
**Chicago, IL 60611**

OR prepared your information (credit card payments only) to be faxed?

**Dental Assisting National Board, Inc. (DANB)**  
**Fax: 312-642-8507**

### ***If you have not***

- completed the application in full
- enclosed, signed and dated all appropriate forms (Forms A and B)
- provided payment (check, money order, cashier's check) or payment information (credit card)

***your application will be considered incomplete and will not be processed.***

Incomplete applications will be returned, minus the \$50 nonrefundable application fee and \$40 nonrefundable certificate application fee, if applicable.



# 2015 Arizona Coronal Polishing Clinical Skills Affidavit (Form B)

To be submitted with Form A and total fee of \$215

2015 Form B Valid Through Dec. 31, 2015

**Instructions:**

1. Complete all items on the application.
2. Ensure that a licensed dentist or coronal polishing course educator completes this form.
3. Mail this completed Form B to DANB with the CP Exam Application (Form A) and

the required fee of \$215 (\$125 exam fee, \$50 nonrefundable application fee, and \$40 nonrefundable certificate application fee).

(Note: Application fees are nonrefundable.) **Fees for Forms A and B must be submitted to be considered complete. Incomplete applications will be returned.**

## Candidate Information

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_  
(Last) (First) (Middle Name or Initial)

(Prior Name, if applicable) \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Numbers: Office (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

I work in a:  general dental office  specialty dental practice  other (please specify) \_\_\_\_\_

## Request for Certificate

I hereby request an Arizona Coronal Polishing Certificate upon successful completion of the Coronal Polish (CP) exam. **By signing this form, I understand there is a fee of \$40, along with the CP \$50 nonrefundable exam application fee and \$125 CP exam fee, for a total of \$215, that will be submitted along with the CP Exam Application (Form A). My payment information is included at the bottom of the CP Exam Application (Form A).**

I hereby swear (or affirm) that the above application information is correct. I will comply with all policies, and said answers are made for the purpose of inducing the Dental Assisting National Board, Inc. to issue a certificate to me based on its standards and those of the Arizona State Board of Dental Examiners. Further, I understand that proof of coronal polishing certification, if earned, will be released to the Arizona State Board of Dental Examiners.

Candidate's Signature X \_\_\_\_\_ Date X \_\_\_\_\_

## Clinical Skills Affidavit

**The following sections must be completed by either a licensed dentist or an Arizona coronal polishing course provider/educator.**

Licensed Dentist (Name) \_\_\_\_\_ License No. \_\_\_\_\_ State Issued \_\_\_\_\_

**OR** Course Provider/Educator (Name) \_\_\_\_\_ Educational Institution or Course No. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

*Endorsers must attest to the candidate's ability in the following areas: determine appropriate polishing procedure, evaluate fulcrum placement, identify armamentarium, position rubber cup and remove stain from surfaces of teeth, and explain the coronal polishing portion of a prophylaxis to a patient.*

**Endorser:** In the spaces below, please record the date upon which the candidate completed each requirement:

**Candidate observes coronal polishing as part of oral prophylaxis in at least one (1) patient with permanent dentition:**

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

**Candidate observes coronal polishing as part of oral prophylaxis in at least one (1) patient with primary and/or mixed dentition:**

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

**Candidate polishes coronal surfaces of teeth as part of oral prophylaxis in at least two (2) patients with permanent dentition:**

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

**Candidate polishes coronal surfaces of teeth as part of oral prophylaxis in at least two (2) patients with primary and/or mixed dentition:**

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

I hereby certify that \_\_\_\_\_ has successfully completed the requirements on the dates indicated above.  
Assistant's Name

Dentist's/Educator's Signature X \_\_\_\_\_ Date X \_\_\_\_\_

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