

**NORTH EAST REGIONAL BOARD
OF DENTAL EXAMINERS, INC.**



**MANUAL FOR
THE
*LOCAL ANESTHESIA EXAMINATION
FOR DENTAL HYGIENISTS***

2010

EXTREMELY IMPORTANT

With your application, you **must** send:

1. Proof of graduation from a dental hygiene program, or proof that one is expected to graduate. **This must be one of the following:** a copy of a diploma, an official transcript, a letter from your program director, or the certification of completion included in the back of this manual (for students who have not yet graduated). To avoid delays, send your proof of graduation with the application. **A dental hygiene license is not considered proof of graduation. DO NOT SEND a copy of a dental hygiene license.**
2. Documentation of any name changes. If your diploma was issued under another name than what you are currently using, or if you previously took the NERB examinations under another name, **you must provide documentation of the name change. This must be a copy of either a marriage license or court order reflecting the name change.**
3. Payment of \$130, by money order or cashier's check.

Only send the documentation required above; nothing else will be accepted. DO NOT SEND copies of your National Board Certificate, NERB Certificate, Dental Hygiene License, Continuing Education Certificates, Certification of Completion of a Local Anesthesia course, CPR card, driver's license, or social security card. **Failure to enclose the required documentation will delay processing of your application.**

Remember to sign your application. Unsigned applications will be returned.

WHEN YOU TAKE THE EXAMINATION, you must have **two** forms of identification, one with a recent picture and **both** with signatures. **Acceptable forms of identification** include: driver's license, passport, military ID, employee ID, and even a credit card (if signed). If your name has recently changed due to marriage, divorce, or other legal reasons, you **must** provide a copy of the marriage certificate or court documents.

An out-of-state driver's license, a school ID, or other invalid forms of ID, will not be accepted. An expired driver's license or other expired ID (even if it expired the day before the exam) will not be accepted. **All forms of ID must be current.**

GENERAL INFORMATION

The Local Anesthesia Examination for Dental Hygienists (LA Exam) is a 50 question multiple-choice computer-based examination administered at a Prometric testing site. This examination is a part of the requirements for certification of dental hygienists to administer local anesthesia in some states. It is the responsibility of the candidate to determine if local anesthesia administration by dental hygienists is permitted by state regulations in the state where the candidate wishes to practice and if the candidate meets other requirements for such certification.

ELIGIBILITY FOR THE EXAMINATION

Graduation or being in the senior or final year of a dental hygiene program accredited by

the American Dental Association Commission on Dental Accreditation (ADA/CODA) or by the Commission on Dental Accreditation of Canada (CDAC) is required.

APPLICATION PROCESS

Applicants must submit a completed application, appropriate fee and documentation of graduation or pending graduation from an accredited dental hygiene program. Following receipt of a notice of authorization from the NERB, appointment for the LA Exam is made by calling the Prometric National Registration Number (1-800-797-1813) or via their website: www.2test.com. Prometric, a part of the Thomson Corporation, operates computer testing centers across the U.S. and Canada identified as Prometric Testing Centers and within Sylvan Learning Centers. A current listing of locations for testing sites can be found on the internet at www.2test.com.

Should it be necessary to cancel and/or reschedule the appointment the applicant must contact the Prometric website: www.2test.com or the National Prometric Registration Center at 1-800-797-1813 **no later** than noon, local test center time, on the second business day before the day of the test. Do not call the local Prometric center to cancel and/or reschedule an appointment. For example:

Appointment:

Monday
Tuesday
Wednesday

Cancel no later than:

Friday before noon, previous week
Saturday before noon, previous week
Monday before noon, same week

If the LA Exam is failed, a new application for re-examination must be filed and a new authorization must be received prior to scheduling an appointment with Prometric for the retake. All NERB rules for application procedures apply.

THE EXAMINATION

CONTENT

The LA Exam consists of 50 multiple choice questions offered through Prometric Testing Centers. Besides the 50 test questions, some additional unidentified pilot test questions may be added to the examination for evaluation for future testing but they do not affect the score. Appropriate additional time is provided for these items. The time allotted for the actual examination is 55 minutes.

All questions should be answered, as any question not answered is counted as incorrect. During the examination, questions may be skipped, marked and returned to before completing the examination. However, **once the LA Exam is completed and the candidate locks out of the examination, she/he will not be able to return to the examination.** The time indicated on the

computer screen is the amount of time remaining for completion of the examination. There is no specific time limitation for each item.

Disciplines and Subject Matter Addressed in the Local Anesthesia Examination

- a. Anatomy and neurophysiology
- b. Pharmacology of anesthetic agents and vasoconstrictors
- c. Local anesthetic technique
- d. Topical anesthetics
- e. Infection control
- f. Prevention, recognition and management of complications

TEST CONSTRUCTION

The test construction maximizes input from across the United States and avoids emphasis on any concept or procedure that may have limited applicability. The Examination Committee, which is responsible for test development, consists of equal numbers of examiners and educators. In addition, special consultants review the Exercise before it is finalized. Because of the NERB's broad-based approach to test development, no single textbook or publication can be used as a reference. Every effort is made to ensure that the examination is based on concepts taught and accepted by educational institutions accredited by the American Dental Association or Canadian Commissions on Dental Accreditation. Any current textbook relevant to the subject matter of the examination utilized in such institutions should be suitable as a study reference.

EXERCISE STANDARDS

The rules for conduct of the examination as established by Prometric must be followed. Violation of these rules constitutes a violation of the Standards for the LA Exam and may result in failure of the examination.

1. **Extraneous materials.** Only those materials distributed or authorized by Prometric may be brought to the Prometric Center. Use of unauthorized materials will result in failure of the Examination. No textbooks or study materials are permitted at the Prometric Testing Center at any time.
2. **Time schedule.** Fifty five minutes is the total time allowed for the actual LA Exam. Once a candidate has completed and locked out of examination, the candidate may not re-enter the LA Exam.
3. **Timely arrival.** The date and appointment schedule established by Prometric must be adhered to as confirmed. Failure to do so will result in forfeiture of the examination fee.
4. **Behavior at the Prometric Testing Center.** Unseemly behavior of the candidate or improper behavior toward personnel at the Prometric Testing Center will result in failure of the Examination and forfeiture of the examination fee.
5. **Examination security.** Security measures established by the NERB and Prometric must be followed. Failure to do so may result in failure of the Exercise.
6. **Recording of test items.** The recording of test items is prohibited.
7. **Identification.** Candidates must present two forms of identification, one with a recent photograph and both with signatures to gain admission to the examination at a Prometric Testing Center. Acceptable forms of ID include: Driver's License, Passport, Military ID and Employee ID. Both forms of ID must have the same name as that used to register for the examination. If a candidate's name has recently changed due to marriage, divorce, or other legal reasons, the candidate must provide a copy of a marriage certificate or court document so stating to assure entry to the testing center. Out of date driver's licenses or other invalid forms of ID will not be accepted.

THE APPLICATION

Applications may be obtained by contacting the NERB Central Office. A fully executed application complete with appropriate documentation and fee is required for the LA Exam. Written acknowledgement of receipt of an application by the NERB will be forwarded, provided that the supplied green post card, complete with the candidate's return address and proper postage, has been submitted with the application. Telephone confirmation is **not provided** under any circumstances.

The social security number must be recorded accurately and legibly on the application form. The social security number becomes the candidate's permanent identification number. Records of the applicant maintained by both the North East Regional Board of Dental Examiners, Inc.

and the licensing jurisdiction are identified by social security number. **Applications which do not reflect the social security number will be returned as incomplete.**

The application must be signed by the candidate as appropriate. Applications which are not signed will be returned to the candidate as incomplete.

All applications with incorrect or missing information (e.g. signature, social security number, proof of graduation, etc.) will be returned to the applicant.

THE FEE

One Examination

\$130.00

(The fee includes \$80.00 for the examination and a \$50.00 Prometric fee for computerized administration)

All returned applications are subject to an administrative fee of \$25.00, which is automatically withheld.

Payment submitted must be for the exact amount and by **cashier's check or money order** payable to "NERB" with the applicant's social security number written in the lower left hand corner.

PERSONAL CHECKS WILL NOT BE ACCEPTED AND WILL BE RETURNED TOGETHER WITH THE APPLICATION TO THE APPLICANT. The NERB is not responsible for a missed deadline date if an application is returned.

A request for a refund of fee is not granted after the date the LA Exam application is **received** by the NERB.

Failure to appear for the LA Exam results in forfeiture of the entire examination fee. Under extenuating circumstances, a request for the examination fee to be deferred to a later time will be considered on an individual basis. Requests must be made in writing to the Secretary-Treasurer of NERB and **must** include original documentation in support of the request. Notification will be sent immediately after a determination is made by the NERB. Should a fee deferral be granted, the terms and conditions for future examination as set by the NERB will be included.

THE SCORING SYSTEM AND SCORE RELEASE

The LA Exam consists of 50 graded questions and the score for this exercise is based on the percent of questions answered correctly. A final score of 75 or higher is a passing score.

SCORE RELEASE

Notification of earned test scores will be sent to candidates by first class mail three days after these scores have been issued to the participating licensing jurisdictions.

The LA Exam scores are reported monthly to all NERB licensing jurisdictions except for that period when a new version of the LA Exam is released. The LA Exam scores may also be released to other licensing jurisdictions upon the written request of the candidate.

A written critique of performance in the Local Anesthesia Examination is furnished to the candidate together with the exercise score. In order to maintain the security of the examination, this critique is issued in lieu of a review of actual examination papers or electronic records.

Scores are **not** released to candidates or their representatives by telephone, facsimile or e-mail. The individual scores of a candidate are **not** released by the NERB to the school of graduation unless authorized by the candidate upon application for examination. Scores are not released at any time, except to the candidate and the NERB participating licensing jurisdictions unless written authorization is received from the candidate.

Scores will be furnished to non-participating licensing jurisdictions upon receipt of a written request signed by the candidate and sent to the NERB. Such request **must** include the following:

1. Candidate's name, mailing address and telephone number,
2. Candidate's name at time of examination,
3. Candidate's social security number,
4. Year in which the LA Examination was completed,
5. Address to which the results are to be sent,
6. Money order in the sum of \$25.00 per each address to where the scores are to be forwarded.

SPECIAL TESTING PROVISIONS

The NERB will administer the LA Exam to an individual with a documented physical and/or learning disability, which impairs sensory, manual or speaking skills in a place and manner accessible to persons with disabilities or will offer alternative accessible arrangements for such individuals. Efforts will be made to ensure that the examination results accurately reflect the individual's aptitude or achievement level rather than reflecting the individual's impaired sensory, manual or speaking skills, except where those skills are factors the examination purports to measure.

The NERB will provide appropriate modifications or auxiliary aids for such persons with impaired sensory, manual or speaking skills unless providing such auxiliary aids would fundamentally alter the measurement of the skills or knowledge the examination is intended to test. To ensure that auxiliary aids or other requested modifications exist and can be provided, candidates with a disability requesting such modification or auxiliary aid must:

1. **Submit in writing, together with the application,** a request for the auxiliary aid or modifications stating the exact auxiliary aid or modification(s) needed.
2. **Provide documentation of the need for the auxiliary aid or modification,** indicating any specific portion of the examination for which such auxiliary aid or modification will be needed.

3. **Provide a letter from the appropriate health care professional** documenting the disability which must be received by the NERB 45 days prior to the date of the examination.

In providing such auxiliary aids or modifications, the NERB reserves the ultimate discretion to choose between effective auxiliary aids or modifications and reserves the right to maintain the security of the examination.

All information obtained regarding any physical and/or learning disability of a candidate will be kept confidential with the following exceptions:

1. Authorized individuals administering the examination may be informed regarding any auxiliary aid or modification; and
2. First aid and safety personnel at the test site may be informed if the disability might require emergency treatment.

The NERB reserves the right to administer the Local Anesthesia Examination in an alternative form other than by computer and will arrange with the candidate on an individual basis.

VERIFICATION PROCEDURE

1. Verification is a procedure whereby the electronic data from which the examination score was generated are re-checked for any irregularities or errors which may have occurred in establishing the score. Verification is **not** a review of the examination process or candidate performance. A listing of specific candidate errors is **not** included in the verification process.
2. A candidate may request a verification of his/her scores. Such a request must be made in writing and include the candidate's name, social security number, site of the examination, date of the examination, and current address. The written request must be accompanied by a cashier's check or money order in the amount of twenty-five dollars (\$25.00) payable to the NERB, sent by certified mail, addressed to:

Director of Examinations
The North East Regional Board of Dental Examiners, Inc.
8484 Georgia Avenue, Suite 900
Silver Spring, MD 20910

3. To preserve the integrity of future examinations, the review of examination data by a candidate or a representative of the candidate shall not be permitted at any time.
4. The Director of Examinations, or his/her designee, shall perform the verification and notify the candidate of the results, usually within ten (10) business days of the request at the NERB Central Office.

CANDIDATE APPEALS PROCEDURE

1. A Candidate Appeal may be generated if the candidate believes that his/her examination results was/were adversely affected by extraordinary conditions during the examination, which affected the final outcome of the candidate's examination. Appeals are reviewed on the basis of the facts surrounding the administration of the examination. The appeals process is the final review authority and if the appeal is denied, there is no further review process within the NERB.

All reviews of Candidate Appeals include the **VERIFICATION PROCEDURE** described above, and are based on a reassessment of the documentation of the candidate's performance on the examination. The review is limited to a determination of whether or not there exists substantial evidence to support claims of extraordinary or adverse conditions during the examination. The review will not take into consideration other documentation that is not part of the examination process. Opinions of the candidate, faculty members, colleagues and records of academic achievement are not considered in determining the results of the examination and do not constitute a factual basis for an appeal. Consideration can only be given to documents, electronic or otherwise that were submitted during the examination and remain in the possession of the NERB or Prometric.

2. Any candidate receiving a failing score on a NERB examination may, on one's own behalf, submit a candidate appeal of that failing score.
3. A **candidate appeal** must be made **in writing**, accompanied by an administrative fee in the form of a cashier's check or money order in the amount of seventy five dollars (\$75.00) payable to the NERB, sent by certified mail, addressed to:

Candidate Appeals Panel
The North East Regional Board of Dental Examiners, Inc.
8484 Georgia Avenue, Suite 900
Silver Spring, MD 20910

The NERB will only consider a candidate appeal which is typewritten or clearly printed and sent by certified mail. Candidate appeals received in any other format will not be accepted or considered. Furthermore, the NERB will not commence any review of a candidate appeal that does not comply with these procedural requirements.

4. The written candidate appeal must contain all of the following information submitted in the proper format:
 - a. date of the examination
 - b. the examination site
 - c. the name of the candidate
 - d. the current address of the candidate
 - e. telephone number(s) of the candidate
 - f. social security number of the candidate
 - g. **the factual basis for the appeal**

- h. a cashier's check/money order payable to the NERB in the amount of seventy five dollars (\$75.00).

The information contained in a, b, c, d, e and f must be submitted on the form designated **Face Sheet for Candidate Appeal**, or a reproduction thereof, in Exhibit A of this Examination Manual.

The factual basis for the appeal **must be on a separate piece of paper** utilizing the form contained in Exhibit B in this Examination Manual, or a reproduction thereof. Additional sheets may be included, if necessary, and identified only by the candidate's social security number. The factual basis for the appeal must be submitted together with the completed **Face Sheet for Candidate Appeal**, or reproduction thereof.

5. The candidate appeal must be received by the NERB **no later than 30 days** following the official date on which the scores were mailed to the participating state dental boards as determined by the NERB and published on the NERB web site (www.nerb.org).
6. Should a candidate apply for re-examination during the pending appeal, the review shall be terminated, the appeal dismissed and the appeal cannot be re-instituted at a later date.
7. Upon receipt at the NERB Central Office of a candidate appeal that conforms in form and content to the requirements cited above, an appeal number shall be assigned to the appeal. To maintain anonymity, a copy of the **factual basis for the appeal identified by the candidate's social security number** submitted by the candidate, as well as the assigned appeal number will be forwarded to all members of the Candidate Appeals Panel with pertinent examination documentation. The original appeal correspondence provided by the candidate will stay on file in the NERB Central Office, identified by the assigned appeal number.
8. The members of the Candidate Appeals Panel, other than the Chairman, shall complete a review of the candidate's **factual basis for the appeal** along with the pertinent examination documentation. Upon completion of the review, each of the initial reviewing members shall identify with specificity the following elements of review in written correspondence to the Chairman of the Candidate Appeals Panel. The written correspondence must be formatted as follows:
 - a. A STATEMENT SUMMARIZING EACH ALLEGATION OF THE APPEAL submitted by the candidate.
 - b. FACTS WHICH THE **REVIEWING CANDIDATE APPEALS BOARD MEMBER** IDENTIFIES IN REVIEWING EACH ALLEGATION OF THE CANDIDATE'S APPEAL contained in the file. It must also include facts obtained in the review of NERB Examination procedures, or contained in the appropriate Candidate Manual for the Examination.
 - c. CONCLUSIONS OF THE VALIDITY OF THOSE ALLEGATIONS regarding the failure of the NERB, or its agents, to follow the procedures of the examination as set forth and adopted by the NERB.

The written correspondence will be placed by each respective reviewing member in a sealed envelope containing the appeal number on its face and mailed to the Chairman of the Candidate Appeals Panel.

Upon receipt of written correspondence from both reviewing members, the Chairman of the Candidate Appeals Panel will review the reviewing members' findings and conclusions.

- a. If the Chairman of the Candidate Appeals Panel finds that agreement exists between the reviewing members, he/she will draft a letter notifying the anonymous candidate of the decision of the Candidate Appeals Panel. This letter will be sent by e-mail or disk to the NERB Central Office where it will be reformatted and sent to the candidate by certified mail, return receipt requested, at the address provided by the candidate with his/her appeal letter.
 - b. In the event that the Chairman of the Candidate Appeals Panel finds that the sealed responses result in disparate conclusions as to the action recommended, he/she will review all the information contained under review. The Chairman of the Candidate Appeals Panel will then document his/her findings in a written document and will become the third reviewer in the appeals process. The Chairman of the Candidate Appeals Panel will draft a majority opinion and draft a letter notifying the anonymous candidate of the decision of the Candidate Appeals Panel. This letter will be sent by e-mail or disk to the NERB Central Office where it will be reformatted and sent to the candidate by certified mail, return receipt requested, at the address provided by the candidate with his/her appeal letter.
9. The Candidate Appeals Panel will make every effort to initially review each candidate appeal within fourteen (14) days of its receipt at the Central Office. Should there not be sufficient factual basis, in the judgment of the Candidate Appeals Panel, the appeal shall be dismissed and the candidate should be notified of the decision of the Candidate Appeals Panel within ten (10) working days thereafter.
 10. Additional reviewers meeting the criteria established for reviewing members may be designated for further review of the appeal should the Chairman of the Candidate Appeals Panel determine, in his/her judgment, that the appeal merits further review.
 11. Further review of the appeal and whatever investigation is deemed appropriate should be completed within sixty (60) days of the receipt of the appeal by the Central Office and may, at that time, be returned for a final decision to the Chairman of the Candidate Appeals Panel.
 12. Following the initial sixty (60) days designated for further review, the Chairman of the Candidate Appeals Panel may elect, in his/her judgment, to institute additional investigation including, but not limited to, the testimony of the candidate before the Candidate Appeals Panel. All additional investigation should be completed by the Candidate Appeals Panel within thirty (30) days of any such election.
 13. The testimony of the candidate may be requested by the Candidate Appeals Panel either by affidavit, written answers to interrogatories, testimony before the Candidate Appeals

Panel, or, in lieu of live testimony via a telephone conference with the entire Candidate Appeals Panel.

14. The Candidate Appeals Panel shall set the procedural parameters regarding any request for additional information it makes including, but not limited to: the nature of the requested information; who, if anyone, shall be permitted to testify; the method and length of any testimony taken; and the nature of any exhibit to be considered as evidence.
15. Should the personal appearance of the candidate be requested, the place, date and time shall be determined by the Candidate Appeals Panel. The candidate shall bear all costs the candidate may incur.
16. During the personal appearance before the Candidate Appeals Panel, the candidate may be accompanied by legal counsel. The cost of legal fees must be borne by the candidate.
17. The reviewing members of the Candidate Appeals Panel will use their best efforts to send its report to the Chairman of the Candidate Appeals Panel within thirty (30) days after the completion of any additional investigation requested. The Chairman of the Candidate Appeals Panel will make every effort to either accept the report, reject any and/or all its content and return it to the reviewing members of the Candidate Appeals Panel for final investigation and/or action within fourteen (14) days of its receipt.
18. Should a report be returned, the reviewing members of the Candidate Appeals Panel shall use their best efforts to complete all requested matters within thirty (30) days and return the report to the Chairman of the Candidate Appeals Panel for final action.
19. The candidate will be notified of the decision of the Candidate Appeals Panel within ten (10) days of the final action by means of a letter drafted by the Chairman of the Candidate Appeals Panel.
20. The report of the Candidate Appeals Panel and all other internal documents related to each appeal shall remain as confidential NERB documents and shall not be reviewed and/or released to the candidate, a representative, or anyone else. The appeal will become a permanent part of the candidate's file maintained at the NERB Central Office. Documents submitted as evidence shall be returned to the party making the submission.
21. **IF THE APPEAL IS GRANTED, THE SEVENTY FIVE DOLLAR (\$75.00) FEE WILL BE REFUNDED.**

Exhibit A

NORTH EAST REGIONAL BOARD OF DENTAL EXAMINERS, INC.

APPEAL FACE SHEET

APPEAL NUMBER _____ - _____ - _____ - _____ - _____
(Assigned by the NERB Administrative Office)

NAME: _____
Last First Middle initial

ADDRESS: _____
_____ City State Zip

TELEPHONE: (____) _____
Area Code

CANDIDATE NUMBER: _____
(Social Security Number)

EXAMINATION SITE: _____

EXAMINATION DATE(S): _____

CANDIDATE SIGNATURE: _____

The above is supplied to the North East Regional Board of Dental Examiners, Inc. as a separate face sheet. It is not a part of the appeal packet sent to the Candidate Appeals Panel in your appellate process. Upon receipt, your appeal will be assigned an appeal number. When the appeal review process is complete, NERB staff will match your appeal with the information above and forward the Candidate Appeals Panel's findings to you.

FOR OFFICE USE ONLY

Appeal Form Received _____ Appeal Findings Returned _____

Appeal Sent to Panel _____

Exhibit B

NORTH EAST REGIONAL BOARD OF DENTAL EXAMINERS, INC. APPEAL FORM FOR SUBMITTING THE FACTUAL BASIS OF THE APPEAL

APPEAL NUMBER _____ - _____ - _____ - _____ - _____
(To be filled in by the NERB office staff)

Please return this form containing the factual basis for your appeal in narrative form to: Director of Examinations, North East Regional Board of Dental Examiners, Inc., 8484 Georgia Avenue, Suite 900, Silver Spring, Maryland 20910. All appeals must be received in the NERB Central Office no later than thirty (30) days following the official date on which the scores being appealed were mailed to the participating state dental boards as determined by the NERB and published on the NERB web site (www.nerb.org).

A seventy five dollar (\$75.00) fee is required to cover the expenses involved in processing an appeal. A cashier's check or money order for the seventy five dollars (\$75.00) payable to the North East Regional Board of Dental Examiners, Inc. must accompany the appeal. In the event the appeal is upheld, the fee will be refunded.

Please type or print legibly. Do not include your name or other identifying information in the narrative containing the factual basis for the appeal.

The nature of your complaint should be described and discussed in a brief, specific, and factual manner addressing each issue/allegation individually, followed immediately by a statement of the facts supporting that respective issue/allegation. Include all information that supports your complaint. **Additional sheets may be added to this original.**

Candidate's Social Security Number: _____ - _____ - _____
(to be filled in by the candidate)

The factual basis for my appeal is:

Issue/Allegation:

Factual Support:

APPENDIX

Check-Off List

- I have read the entire Manual for the current Local Anesthesia Examination for Dental Hygienists

I HAVE SENT TO THE NERB POST OFFICE BOX:

- a completed application form (clearly printed and all appropriate bubbles filled in – DO NOT FOLD).
- a self-addressed postcard to which you must apply proper postage (to be returned by the NERB Central Office) notifying candidate that application was received.
- a cashier's check or money order for exact fee required, payable to NERB (or North East Regional Board), with S.S.# of the candidate on lower left corner.
- proof of graduation, such as a copy of a diploma, or letter of certification from your school.**
(The application will **not** be processed if this is not included) **If the diploma was issued in a name other than your current name, you must also include a copy of a marriage license or court order documenting the change in your name. (Do not send copies of your National Board Certificate, NERB Certificate, Dental Hygiene License or certificate of completion of a local anesthesia course.)**
- documentation of name change if you have previously taken the NERB examination under a different name. If you previously took the NERB dental hygiene licensing examination under another name, that name is still in our files and you need to provide a copy of a marriage license or court order documenting your change of name.

PROMETRIC TESTING CENTERS:

- I have selected the location of the Prometric Testing Center where I have elected to take the Local Anesthesia Examination for Dental Hygienists. After my application has been processed and NERB has sent me an authorization letter, I have called and made an appointment with Prometric at the national scheduling number or scheduled an appointment on the internet.
- I will take 2 forms of personal identification: one with a recent photo, and both with my signature, with me to the Prometric Testing Center. If my name has recently changed due to marriage, divorce, or other legal reasons, I will bring a copy of the marriage certificate or court document so stating to the Prometric Center to assure entry. Out of date driver's licenses or other invalid forms of ID will not be accepted.

Schools of Graduation Codes

Locate the name of your school of graduation and its code number. Place the three digit number in the appropriate boxes on the NERB application form. If your school is not listed, leave the boxes empty and write the name of the school on the back of the application.

513-Algonquin College of Applied Arts and Technology	376-Lake Land College - Illinois	161-SUNY - Buffalo
300-Allegany College of Maryland	511-Lake Washington Technical College	456-SUNY - Farmingdale
301-Amarillo College	377-Lakeland Community College - Ohio	176-SUNY - Stony Brook
302-Armstrong State College	378-Lamar University	999-Sylvan Computer - Hygiene
303-Asheville-Buncombe Technical Institute	379-Lane Community College	457-Tallahassee Community College
304-Ashland Community College	380-Lanier Technical Institute	458-Tarrant County Junior College
501-Baker College	381-Lansing Community College	114-Temple University
305-Baltimore City Community College	382-Laramie County Community College	459-Tennessee State University
010-Baylor University	960-Lewis and Clark Community College	460-Texas Women's University
306-Bee County College	383-Lexington Tech Institute	461-Thomas Jefferson University
307-Bergen Community College	384-Lima Technical College	462-Trident Technical College S.C.
180-Boston University	149-Loma Linda University	151-Tufts University
951-Boyer School Dental Sci Creighton	506-Lorain County Community College	463-Tulsa Junior College
309-Brevard Community College	172-Louisiana State University	464-Tunxis Community College
310-Bristol Community College	142-Loyola University - Chicago	465-Tyler Junior College
311-Broome Community College	385-Loyola University - New Orleans	466-Union County - Coll Technical Inst
908-Broward Community College	386-Luzerne County Community College	472-University College of Bangor
312-Cabrillo College	387-Macon Junior College	147-University of Alabama
499-Cambrian College	388-Madison Area Technical School	467-University of Alaska/Anchorage CC
313-Camden County Community College	909-Maine State Only Candidate	002-University of Alberta
508-Canadore College (North Bay Ontario)	389-Mankato State College	468-University of Arkansas - School of Dental Hygiene
319-Cape Cod Community College	959-Manor Junior College	469-University of Bridgeport - Fones
320-Carroll College	063-Marquette University	168-University of British Columbia
133-Case Western Reserve University	390-Maysville Community College	159-University of California - Los Angeles
498-Cegep Saint-Hyacinthe	065-McGill University	155-University of California - San Francisco
321-Central Piedmont Community College	170-Medical College of Georgia	470-University of Cincinnati - R. Walters
322-Central Technical Community College	391-Medical College of South Carolina	174-University of Colorado
323-Cerritos College	067-Meharry Medical College	164-University of Connecticut
324-Chabot Community College	392-Meridian Community College	036-University of Detroit - Mercy
325-Chattanooga State Technical Community College	393-Miami-Dade Community College	171-University of Florida
326-Clark College	394-Middlesex Community College, Mass.	950-University of Florida Dental School
327-Clayton State College	395-Middlesex County College, New Jersey	471-University of Hawaii
328-Coastal Carolina Comm College	396-Midlands Technical College	045-University of Illinois
502-College De Maisonneuve (Canada)	397-Midwestern State University	050-University of Iowa
026-Colorado College of Dentistry	398-Milwaukee Area Tech College	160-University of Kentucky
329-Colorado Northwestern Community College	399-Missouri Southern State College	178-University of Laval
956-Colorado State Only Candidate	400-Monroe Community College	058-University of Louisville
027-Columbia University	401-Montgomery County Community College	158-University of Manitoba
330-Columbus College	402-Mott Community College	006-University of Maryland
515-Columbus State Community College DH Program	503-Mount Ida College Dental Hygiene	167-University of Medicine and Dentistry of New Jersey
507-Community College of Denver	403-Mt. Hood Community College	070-University of Michigan
331-Community College of Philadelphia	404-N.E. Mississippi Junior College	073-University of Minnesota
332-Community College of Rhode Island	405-New Hampshire Technical Institute	473-University of Minnesota - Duluth
333-Community College of Southern Nevada	406-New York City Technical College	181-University of Mississippi
957-Confederate Coll. Arts and Technology	084-New York University	162-University of Missouri - Kansas City
030-Creighton University	316-Niagara College - Ontario	074-University of Montreal
334-Cuyahoga Community College	407-Normandale Community College	077-University of Nebraska
335-Cyprus College	408-North Central Technical College	489-University of New England
031-Dalhousie University	409-North Dakota State School of Science	953-University of New Haven
336-Dartmouth College	410-Norhampton Community College	474-University of New Mexico
510-Dayton Beach Community College	411-Northeast Louisiana University	148-University of North Carolina - Chapel Hill
337-Dekalb Community College	412-Northeast Metro Technical College	177-University of Oklahoma
338-Delaware Technical Community College	413-Northeast Mississippi Community College	166-University of Pennsylvania
339-Delmar College	414-Northeast Wisconsin Tech College	098-University of Pittsburgh
340-Delta College	415-Northern Arizona University	154-University of Puerto Rico
032-Denver College of Dentistry	416-Northern Kentucky University	475-University of Rhode Island
341-Des Moines Area Community College	417-Northern Virginia Community College	169-University of Saskatchewan
342-Diablo Valley College of Dentistry	081-Northwestern University	476-University of South Colorado
889-District of Columbia State Only	963-Nova Southeastern University	477-University of South Dakota
037-Drake University College of Dentistry	418-Oakland Community College	109-University of Southern California
343-Duluth Technical College	087-Ohio State University	478-University of Southern Indiana
509-Durham College	420-Old Dominion University	116-University of Tennessee
344-East Tennessee State University	421-Onondaga Community College	156-University of Texas - Houston
345-Eastern Washington State College	182-Oral Roberts University	179-University of Texas - San Antonio
500-Edison Community College	422-Orange County Community College	163-University of the Pacific
346-El Paso Community College	141-Oregon Health Sciences University	119-University of Toronto - Canada
347-Emory University	423-Oregon Institute of Technology	479-University of Vermont
348-Erie Community College	424-Owens State Community College	129-University of Washington
152-Fairleigh Dickinson University	425-Palm Beach Community College	318-University of Western Ontario
962-Fanshawe College - Ontario	426-Parkland College	998-Utah State Only Candidate
349-Fayetteville Technical Institute	427-Pasadena City College	480-Valencia Community College
350-Ferris State University	428-Pasco-Hernando Community College	124-Vanderbilt University School of Dentistry
351-Florence-Darlington Tech College	429-Pearl River Community College	125-Virginia Commonwealth University
352-Florida Community College	430-Pennsylvania College of Technology	481-Virginia Western Community College
353-Foothill College Dept of Dental Hygiene	431-Pensacola Community College	512-Wallace State College
354-Forsyth School for Dental Hygiene	432-Phoenix College	482-Walters College
355-Fresno City College	433-Pierce College	130-Washington University
314-George Brown College - Toronto	434-Pima Community College - West	484-Wayne County Community College
038-Georgetown University	435-Portland Community College	952-Wayne Technical Institute
011-Georgian College Canada	436-Prairie State College	485-Weber State University
356-Grand Rapids Community College	437-Pueblo Community College	486-West Liberty State College
357-Greenville Technical Education Center	438-Quinsigamond Community College	487-West Los Angeles College
358-Guilford Technical Institute	439-Rangely College	488-West Virginia Institute of Technology
359-Harcum College	003-Rhode Island Only	906-West Virginia State Only Candidate
360-Harper College	961-Rio Salado Community College	150-West Virginia University
361-Harrisburg Area Community College	440-Roane State Community College	490-Western Kentucky University
137-Harvard School of Dental Medicine	441-Rochester Community College	491-Westmoreland County Community College
362-Hawkeye Institute of Technology	442-Rose State College	492-Wharton County Community College
363-Hostos Community College	443-Sacramento City College	493-Whytheville Community College
364-Howard County Junior College	444-Saint Jerome College	494-Wichita State University
042-Howard University	964-Santa Rosa Junior College	495-Yakima Valley Community College
365-Hudson Valley Community College	445-Sante Fe Community College	496-York Technical College
366-Idaho State University	317-Seneca College - Ontario	497-Youngstown State University
367-Illinois Central College	446-Shawnee State University	
368-Indian River Community College	447-Sheridan College	
369-Indiana University - Fort Wayne	448-Shoreline Community College	
370-Indiana University - Northwest Gary	449-Sinclair Community College	
371-Indiana University - NW School of Dentistry	450-Southeast Community College	
372-Indiana University - South Bend	175-Southern Illinois University	
047-Indiana University School of Dentistry	451-Springfield Technical Community College	
419-John A. Logan College	954-St. Clair College of Applied Arts & Tech.	
315-John Abbott College - Quebec	452-St. Cloud Technical College	
373-Johnson County Community College	453-St. Louis Community College	
374-Kalamazoo Valley Community College	103-St. Louis University	
375-Kellogg Community College	454-St. Petersburg Junior College	
504-Kennedy King College, Chicago IL	455-St. Philips College	
	514-Stark State College of Technology, Canton, Ohio	

Instructions For Completing The Local Anesthesia Examination for Dental Hygienists Application Form

The NERB uses a special scannable application form to facilitate the application process. Please read the instructions that follow *carefully*. Much of the data requested must be coded since the application form will be “read” by an optical scanner. Failure to follow the directions may affect the status of your application. **The application form must NOT be folded and must NOT have any papers stapled, glued or taped to it. Only the original will be accepted.** A photocopy or fax of the application form is not accepted by the NERB and will be returned.

Using a **#2 lead pencil only**, enter the information requested in the appropriate boxes. Enter only one character per box. Then, under each box, fill in the corresponding bubble. Fill in the bubble completely and make your marks heavy. Erase cleanly any mark you wish to change.

Review *both* sides of your completed application form to be sure that it is *complete*. You may find it helpful to take a photocopy of your completed application form for your records.

The NERB utilizes a lockbox service, through SunTrust Bank, for the initial processing of the candidate materials. All application forms and candidate checks are to be mailed, via the US Postal Service, to the special post office box in Baltimore, Maryland, as indicated below. Do *NOT* use private overnight express mailing services (e.g., Federal Express or United Parcel Service) when mailing your application materials to this special post office box.

Side 1 of Application Form:

1. **Your Name.** Enter your last name, first name and middle initial in the spaces provided. Then fill in the corresponding bubbles.
2. **Social Security or ID Number.** Enter your 9-digit social security number (or other identifying number) in the spaces provided. Then fill in the corresponding bubbles.
3. **School of Graduation.** Enter the 3-digit code number of the school or college that you are presently attending, or of which you are a graduate, from the school list in the Appendix. Then fill in the corresponding bubbles.
4. **Date of Graduation.** Enter the 2 digits of the month and the 4 digits of the year in which you expect to graduate or have graduated. Then fill in the corresponding bubbles.
5. **Previous NERB Examination.** If you have previously taken a NERB examination, enter the 4 digits of the year of the most recent examination. Then fill in the corresponding bubbles.
6. **Physical Challenge or Learning Disability.** If you have a physical challenge or learning disability, fill in the bubble. Enclose a letter from an appropriate health care professional documenting the disability.

Side 2 of Application Form:

7. **Address.** Enter your street number and name, or P.O. Box, (and apartment number, if applicable) in the spaces provided. Leave spaces between words. Then fill in the corresponding bubbles.
8. **City.** Enter your city in the spaces provided. Then fill in the corresponding bubbles.
9. **Daytime Phone Number.** Enter your daytime telephone number, area code first. Then fill in the corresponding bubbles. It is desirable that you provide a telephone number where you can be reached if the NERB has a question concerning your application status.
10. **Country.** Fill in the appropriate bubble. If your country is “Other” then enter the name of this country in the box.
11. **State or Province.** Enter the 2-letter state or province abbreviation in the spaces provided. Then fill in the corresponding bubbles.
12. **Zip Code or Postal Code.** Enter your zip code or postal code in the spaces provided. Then fill in the corresponding bubbles.
13. **Signature (Required) For Accepting NERB’s Rules and Regulations.** Sign (in blue or black ink) in the box provided. You *must* sign this application form in this box in order to be permitted to take the examination.
14. **Signature (Optional) For Release of Scores.** If you grant permission for the NERB to release your score to your school of graduation, then sign (in blue or black ink) in the box provided.
15. **Date.** Enter the date (month/day/last 2 digits of the year) when you signed the application form as required in item #13 above.
16. **Fees.** Enter the total amount of fees you are enclosing with this application form. Then fill in the corresponding bubbles.
17. **Mailing Your Materials.** When mailing your application materials, arrange the materials in the following order, all secured by one paper clip:
First, your cashier’s check or money order for fees – face up. Your check must be payable to NERB.
Then, the green postcard; be sure it is self-addressed and has the proper postage affixed
Then, your proof of graduation
Finally, your Application Form – Side 1 face up

Mail your application materials in a large envelope (at least 9” x 12”) to:
NORTH EAST REGIONAL BOARD OF DENTAL EXAMINERS, INC.
P.O. BOX 791029
BALTIMORE, MD 21279-1029

