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This informational packet is published by the American Board of Periodontology to inform prospective candidates about Board policies, requirements and procedures for the examination process, certification, and recertification.

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Phone:  410-647-1324
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COMPOSITION OF BOARD

The Board consists of 10 voting Directors. All are active or life members of the American Academy of Periodontology and Diplomates of the ABP. Directors serve for staggered five-year terms and hold office for no more than one term. Directors are elected by mail ballot sent to all voting members of the Academy from a slate of candidates chosen by the Academy's Nominating Committee for the American Board of Periodontology or nominated by petition in accordance with the Academy's Bylaws. The election procedures are governed by the provisions set forth in Chapter II, Section 7 of the Academy's Bylaws. Each Director holds office until a successor is elected and installed, or until such Director's earlier death, resignation or removal. Former Directors or Examiners of the Board may be elected to assist the Directors with the Oral Examination based on the number of candidates participating in the exam.

Joseph R. Mellado, DMD, MS, Co-Chairman (2018)
Paul A. Levi, Jr., DMD, Co-Chairman (2018)
Leslie G. Batnick, DDS, Co-Vice Chairman (2019)
Joseph V. Califano, DDS, PhD, Co-Vice Chairman (2019)
Mary Beth Aichelmann-Reidy, D.D.S. (2020)
Robert M. Eber, DDS, MS (2021)
James A. Katancik, DDS (2021)
David E. Deas, DMD, MS (2022)
Charles A. Powell, DDS, MS (2022)
EXAMINERS OF THE BOARD

<table>
<thead>
<tr>
<th>Mary Beth Aichelmann-Reidy</th>
<th>Alon Frydman</th>
<th>Brian Mealey</th>
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<td>Daniel Assad</td>
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<td>Howard Gross</td>
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<td>Frederick Bisch</td>
<td>Margaret Hill</td>
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<td>Grishondra Branch-Mays</td>
<td>James Hinrichs</td>
<td>Rodrigo Neiva</td>
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<td>I. Stephen Brown</td>
<td>Steven Hokett</td>
<td>Anchontia Palailolgou</td>
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<td>Gail Childers</td>
<td>Natalie Jeong</td>
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<td>Lewis Claman</td>
<td>Georgia Johnson</td>
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<td>James Katancik</td>
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<td>David Deas</td>
<td>Thomas Kepic</td>
<td>Robert Sabatini</td>
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<td>Steven Detsch</td>
<td>David Kerns</td>
<td>Surendra Singh</td>
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<td>John Dmytryk</td>
<td>David Lasho</td>
<td>Stephen Soehren</td>
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<td>Robert Eber</td>
<td>Paul Luepke</td>
<td>Ahmad Soolari</td>
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<td>Sylvan Feldman</td>
<td>George Mandelaris</td>
<td>Hank Towle</td>
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<td>Anthony Ficara</td>
<td>Angelo Marriotti</td>
<td>Byron Wade</td>
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<td>Arnold Freedman</td>
<td>Michael McQuade</td>
<td>Robin Weltman</td>
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Examiners are selected by the Board of Directors to conduct the Oral Examination and perform other duties as the Board may assign. All Examiners may not be listed above. Contact the Board office for the names of Examiners for a specific exam session.

PERIODONTALOGY AS A SPECIALTY

Periodontology is one of the nine dental specialties recognized by the American Dental Association. Periodontics is that specialty of dentistry, which encompasses the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function and esthetics of these structures.

The specialist in Periodontology is an expert in the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes, regeneration of lost components of the periodontium, and the maintenance of the health, function and esthetics of these structures and tissues.

MISSION STATEMENT

The mission of the American Board of Periodontology is to certify the achievement of in-depth knowledge and proficiency in the full scope of periodontology and dental implant surgery through examination and periodic recertification.

The American Board of Periodontology was organized by The American Academy of Periodontology in 1939. The mission of the American Board of Periodontology is to advance the art and science of Periodontics and elevate the quality of periodontal care through the examination, certification, and recertification of periodontists and by encouraging the achievement and maintenance of Diplomate status.

- Encourage Periodontists to pursue the Board Certification process.
- Administer a Recertification process to assure continued professional development.
- Elevate the quality of care in the specialty of Periodontics.
- Collaborate with other entities and organizations to improve the profession of Dentistry.
The activities of the American Board of Periodontology conform to the “Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists” of the Council on Dental Education of the American Dental Association.

To accomplish its major mission the ABP Certification process is divided into three phases:

1. Periodontists must pass the ABP Qualifying Examination to become eligible to apply for the Oral Examination.

2. Candidates become Board Certified and Diplomates of the Board when they successfully complete the ABP Qualifying and Oral Examination.

3. In order to maintain a high level of competency and active certification, Diplomates of the Board must recertify every six years by obtaining 60 points of Continuing Education and completion of the on-line Self Study Recertification Program.

The activities of the American Board of Periodontology conform to the “Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists” of the Council on Dental Education and Licensure of the American Dental Association.

**FEES**

- The total fee for the 2019 Examination is $2,950 ($850 ABP Qualifying Examination [beginning with the 2019 Administration], $2,100.00 Oral Examination).

- The ABP Qualifying Examination fee of $850 shall accompany the completed application, attestation, and credentials forms and must be submitted by June 15th (received in the board office) of the year candidate plans to take the examination.

- The Oral Examination fee of $2,100 must be submitted by October 31st in the prior year the candidate plans to take the Oral Examination (i.e. application submitted by October 31, 2018 for May 2019 oral examination).

- Candidates who request to withdraw from the ABP Qualifying Examination with valid reason and have paid the Examination Fee must submit their request to withdraw from the examination in writing to the Board office no later than 24 hours prior to the exam date. Candidates who have scheduled their exam seat time with the testing center must also notify the testing center of their withdrawal to avoid “no show” fees. Applicants who withdraw from the examination with proper written notification may submit an application including the evidence of successful completion of an ADA accredited program in Periodontics, Attestation form, and Credentials form along with a required reapplication fee in the amount of $150.00 by October 31st of the year of candidates withdraw. Re-application fees will not be valid after the date of October 31st of the year of candidates withdraw. No monies will be refunded.

- Candidates who fail to appear (“no show”) for a scheduled test with Pearson Vue Testing Centers; arrive more than fifteen minutes after the scheduled test start time and cannot be accommodated at the testing center; cancel a test less than 24 hours prior to the scheduled test start time will void their application status and must re-start the application process by submitting a new completed application, attestation, and credential forms and fee of $4.00 to the Board office.

- Candidates who fail to attend the mandatory Orientation Session prior to the Oral Examination; or who fail to show for the Oral Examination; arrive more than fifteen minutes after the scheduled exam start time and cannot be accommodated, must restart the application process by submitting new completed application, attestation, and credential forms and fee of $2,100.00 to the Board office.

- Candidates who request to withdraw from the oral examination must submit their request in writing to the Board office. Candidates who withdraw and whose eligibility has not expired may transfer their oral examination fee to a subsequent examination for a re-application fee of $600.00. Candidates withdrawing with special circumstances, (i.e. illness, family death, national disaster) may submit written request to the Board that the Oral Examination re-application fee be waived. The decision will be at the sole discretion of the Board and candidates will be notified in writing of the Board’s decision.
• An annual registration fee is required of all Diplomates by January 1st of each year. The current annual registration fee is $275.00.

• The on-line Self Study Recertification Program cost is currently $90.00 and must be completed the year recertification is due. This rate will increase to $250.00 beginning January 1, 2019.

• Fees are subject to change. Fees current at the time shall apply when fees are due.

• All fees are payable in U.S. Funds, drawn on a U.S. Bank, payable to the American Board of Periodontology. Money Orders and Bank Drafts are accepted. Fees are non-refundable.

ABP QUALIFYING EXAMINATION PROCESS

COMPOSITION

The ABP Qualifying Examination is a multiple choice, computer-based test that covers a broad range of information relating to the science and practice of periodontology. Subject areas include basic science, oral medicine/oral pathology, periodontal histology/periodontal pathology, epidemiology/statistics, and evidence-based clinical practice. See ABP Qualifying Exam Outline on pages 9-11. A computer Based Test Tutorial is available at www.MeasurementResearch.com. Click the “Specialty Board Exams and Computer Based Testing” link to obtain general information about computer-based testing and answers to frequently asked questions, as well as practice taking an exam using Computer Based Testing.

WHEN EXAMINATION IS CONDUCTED

The ABP Qualifying Exam will be conducted yearly. It may be taken on one day at regional testing centers. Information regarding current available testing center locations can be found on the web at www.pearsonvue.com or by calling the Board office at 410-437-3749. When possible, the examination will be offered on two consecutive days and candidates may select their testing center on a first come, first serve basis.

ABP QUALIFYING EXAMINATION APPLICATION

• How to Apply:
You will need to complete the ABP Qualifying Examination Application Form, ABP Qualifying Examination Attestation Form, and ABP Qualifying Examination Credentials Form which may be downloaded from the Board’s website www.abperio.org. Make sure all documents are signed and dated and all questions are answered. The Application, Attestation, Credentials Form and evidence of completion of an accredited program must accompany the application fee of Four Hundred and Fifty Dollars and must be mailed to the Board office by June 15th. Evidence of successful completion of an ADA accredited program in Periodontics must be submitted with your application. This consists of a copy of your certificate or an official letter signed by the program director and the dean (of equivalent administrative officer) that specifies “successful completion of an educational program in Periodontology, which is accredited by the Commission on Dental Accreditation”. Acceptance of submitted documentation is at the sole discretion of the Board.

Candidates unable to obtain verification of successful completion of their program due to research requirements (M.S., M.S.D.) or clinical requirements must have their program director submit the following statement with the program director’s signature, “It is anticipated that Dr. __________ will satisfy all requirements and successfully complete the program in Periodontics prior to the ABP Qualifying Examination”. Under these circumstances candidates will be permitted to take the ABP Qualifying Examination and receive their results. However, candidates must submit evidence of successful completion of their program (certificate or letter stating they HAVE successfully completed their program signed by BOTH the Program Director and the Dean (or equivalent administrative officer) before applying for and taking the Oral Examination. Acceptance of submitted documentation is at the sole discretion of the Board.
• Obtaining Forms:
  Additional Forms may be obtained from one of the following:
  1. Download at ABP website at www.abperio.org
  2. Calling the Board office at (410) 647-1324
  3. Request via email staff@abperio.org

• Notification:
  • Candidates will receive written notification of receipt of application, fees, and enclosures.

**ABP QUALIFYING EXAMINATION**
**REGISTRATION FOR EXAMINATION**

The Board will provide Pearson Vue with the names of accepted candidates. Accepted candidates will be able to register at specific testing centers after Pearson receives notification from the Board office of approved candidates prior to the examination date.

Candidates must acquire a username and password before they can schedule an appointment to take an exam. We recommend they use the first initial of their first name, first initial of their middle name, and full last name for the username. The password can be anything under 40 characters. After receiving confirmation of their username and password, which takes 24 hours, the candidate can schedule, reschedule and cancel exams via the Internet. They can also check their status, change their password, check which exams are offered and look up testing center locations. They can access this information through [www.pearsonvue.com/abp](http://www.pearsonvue.com/abp)

**Steps to receive username and password:**

**You must Call Pearson VUE to receive your username and password at 1-877-435-1414, Ext 6 OR**

1. Go to the Board’s landing page; [http://www.pearsonvue.com/abp](http://www.pearsonvue.com/abp)
2. Click on “Create a Web Account.” –
3. Enter Demographic Information (note all fields with * are required). Entering a candidate’s e-mail address is not mandatory, but **STRONGLY RECOMMENDED**, so candidates will receive their confirmation letter via e-mails.

*Note: The candidate will receive an e-mail with their username and password within 24 hours.*

To schedule an examination appointment via the web:

2. Click “schedule or reschedule an exam online.”
3. Enter user name and password to sign-in
4. Select appropriate exam name abbreviation for which you are authorized.
5. Select the language of the exam (all exams will be given in English only)
6. Select Testing Center (a listing of all Pearson Professional Testing Centers will appear for the State the individual resides in.).
7. Search available dates and times to schedule an exam.
8. Choose an appointment from the search of dates and times.
9. A confirmation screen including the exam name, appointment date, time, and testing center location will appear.
10. A confirmation letter will also be sent via email to the candidate.
Confirmation Letter

After registration for an appointment is complete, the candidate will receive a confirmation letter via e-mail, fax or postal mail. An example of the confirmation letter is shown on the next page. Due to system limitations, MRA is not able to receive copies of faxed or mailed confirmation letters.

Appointment Confirmation

Candidate Name | Date
--- | ---

Candidate Name | Exam Name | Parts | Date | Time | Test Length
--- | --- | --- | --- | --- | ---
Smith, John | ABPMCore+OM | 2 | Day/Month/Year | 8:30 am | 300 Minutes

Testing Center Location

Pearson Professional Center – Tucson AZ
The Williams Center
5210 East Williams Circle
Suite 772
Tucson AZ 85711

520-777-2222

This is your confirmation letter for the examination listed above. Please bring this letter with you on the day of your exam to the Pearson Professional Center along with two (2) VALID FORMS OF IDENTIFICATION. Both forms must be in your name, as it appears on this confirmation letter, must have your signature and, at least one of them must have a photo of you.

Please check all of the information carefully to ensure that your scheduled appointment is at the correct location on the day you requested, and all of the personal information is correct.

Please arrive at the test center at least 30 minutes before the scheduled appointment time to give you adequate time to complete the necessary sign-in procedures. Candidates will review and sign Pearson Vue Candidate Rules Agreement on the testing day.

If you arrive 15 minutes after the scheduled exam starting time, you will have technically forfeited your assigned seat. If you arrive late, it is up to the discretion of the testing center as to whether you may still take the exam.

You may reschedule your exam by contacting Pearson Professional Testing Center Registration Line at 1-877-435-1414, ext 6 or visiting www.pearsonvue.com at least 24 hours prior to the scheduled test.

If you find that you must cancel, it is necessary to contact the Pearson Professional Testing Center Registration Line 1-877-435-1414, ext 6 or visiting www.pearsonvue.com at least 24 hours prior to the examination date.

C. Candidates must bring the following items listed below with them on testing day. Candidates will review and sign Pearson Vue Candidate Rules Agreement on the testing day.

1. Confirmation Letter from Pearson Vue.
2. Two valid forms of identification, “Both forms must be in your name as it appears on the confirmation
letter, must have your signature, and one of them must have a photo of you.”

D. Computer Based Tutorial:
We encourage you to take advantage of the computer-based testing tutorial available at www.MeasurementResearch.com. The tutorial will allow you to practice with the demonstration examination as much as you wish. The tutorial will be available at the testing center the day of your examination to view prior to the examination.

**SCORING AND NOTIFICATION OF ABP QUALIFYING EXAMINATION**

Evaluation of performance is criterion based and done in consultation with Measurement Research Associates, Inc. The Board’s Executive Director will send examination results in writing to the candidate by postal mail. Only notification of success or failure is provided to candidates; no specific grades are reported. Candidates are solely responsible for notifying the Board office of any change in mailing address, to ensure the timely delivery of results.

Candidates must not telephone the Board office for examination results. Examination results will not be provided over the phone, by facsimile, or email. Candidates who fail the exam may discuss results with the Executive Director by calling the Board office at 410-647-1324 for an appointment. Examination questions are not released, and all questions are copyrighted by The American Board of Periodontology.

**COMPLETION OF CERTIFICATION PROCESS**

Beginning in 2009 candidates will no longer be designated as Board Eligible on successful completion of the ABP Qualifying Examination. Candidates who pass the ABP Qualifying Examination must complete the Oral Examination within two (2) years from the year the ABP Qualifying Examination was successfully completed unless an extension is granted. Beginning in 2009 candidates who fail the oral examination in the last year of eligibility will be required to restart the process by retaking and successfully completing the ABP Qualifying Examination.

**EXTENSION OF ELIGIBILITY PERIOD**

Candidates who pass the ABP Qualifying Examination must complete the Oral Examination within two (2) years from the year the ABP Qualifying Examination was successfully completed unless an extension is granted.

1. Request for a one-year extension to complete the Oral Examination may be made in writing to the Board office and must be received by October 31st of the prior year eligibility expires; i.e. Eligibility expiration of 2013; request for Eligibility extension must be received by October 31, 2012. The Executive Director will approve extensions for qualified candidates without Board action. Questionable requests will be considered by the Board.

2. Requests will be granted only when in the Board's judgment the candidate was prevented from taking the Oral Examination by extenuating circumstances.

3. A maximum of one request will be considered by the Board.
The following specifications represent the categories of the knowledge base considered by the Board to be important in the science of Periodontology and/or relevant to the proficient practice of periodontics. The items developed according to these specifications for inclusion in each examination represent a consistent sampling of Periodontology and reflect subject matter beyond the predoctoral curriculum. Basic science content will be included to the extent that it addresses the scientific basis for diagnostic and therapeutic skills required in clinical application and the future advance of the specialty.

I. Basic Science
   A. Anatomy
      1. Gross surgical anatomy
      2. Microanatomy
      3. Ultrasturctural anatomy
      4. Growth and pathology
   B. Biochemistry-Physiology
      1. Biochemistry
         a. Connective tissue
         b. Hard tissue
         c. Cell biology
         d. Inflammation
      2. Physiology
         a. Cardiovascular
         b. Endocrine
         c. Neural
         d. Other
   C. Immunology
      1. Anatomy of the immune system
      2. Humoral and complement
      3. Cell mediated
      4. Immune deficiencies
   D. Microbiology
      1. Biology of microorganisms
         a) Bacteria
         b) Viruses
      2. Pathogenic mechanisms
   E. Pharmacology
      1. Antimicrobials
         a. systemic agents
         b. local agents
      2. Narcotics and analgesics
      3. Cardiovascular
      4. Emergency Drugs
      5. Drug interactions
   F. Molecular Biology
   G. Genetics

II. Clinical
   A. Diagnosis
      1. Medical and dental history
      2. Clinical findings/interpretation
      3. Diagnostic techniques
a. Probing
b. Radiology/imaging
c. Crevicular fluid
d. Disease activity
e. Microbiologic findings

4. Pulpal-periodontal pathology

B. Etiology
   1. Plaque
   2. Local factors
   3. Occlusion
   4. Iatrogenic factors
   5. Tobacco products

C. Prognosis

D. Treatment Planning

E. Therapy
   1. Plaque control, behavioral modification, devices
   2. Non-surgical
      a. Root planing
      b. Systemic/local adjuncts
   3. Occlusal therapy
   4. Periodontic-Orthodontic therapy
   5. Surgical therapy
      a. Gingivectomy and gingivoplasty
      b. Gingival attachment procedures
      c. Regeneration or replacement of periodontal supporting structures (GTR)
      d. Osseous resection
         1) treating disease
         2) functional and esthetic crown lengthening
      e. Mucogingival procedures and flap management
      f. Tooth/Root resection and furcation management
      g. Perioplastic surgery
   6. Guided bone regeneration
      a. Alveolar ridge augmentation
      b. Sinus augmentation
      c. Tooth socket preservation
   7. Dental implants

F. Maintenance

III. Oral Pathology and Oral Medicine

A. Ulcers and vesicular-bullous lesions
B. Hypersensitivity reactions
C. Discolorations and Pigmentation
D. Neoplasms
   1. Malignant
   2. Non-malignant
E. Infections
F. Syndromes
G. Endocrine
H. Oral manifestations of systemic disease
I. Laboratory tests

IV. Periodontal Histology and Pathology
   A. Gingivitis
      1. Plaque related
      2. Non-plaque related
   B. Periodontitis
      1. Chronic periodontitis
      2. Aggressive periodontitis
      3. Periodontitis associated with systemic disease
   C. Necrotizing Periodontal Diseases
      1. Necrotizing ulcerative gingivitis
      2. Necrotizing ulcerative periodontitis
   D. Mucogingival Deformities
      1. Recession
      2. Ridge defects
   E. Abscesses of the periodontium
      1. Periodontal and Gingival abscesses
   F. Occlusal trauma
   G. Gingival enlargement
      1. Drug related
      2. Non-drug related
   H. Periodontal histology-histopathology
      1. Periodontal structures
      2. Periodontal ultrastructure
      3. Pathogenesis
   I. Periodontic-Endodontic Lesions
   J. Wound healing

V. Epidemiology and Statistics

VI. Systemic Implications
   A. Cardiovascular
   B. Pregnancy
   C. Respiratory
   D. Diabetes
   E. Other
      1. Diet/Nutrition
      2. Aging
      3. Stress
      4. Osteoporosis
ORAL EXAMINATION PROCESS

The examination follows a presentation, interview, and discussion format to evaluate the candidate’s diagnostic and therapeutic skills. Candidates may request information from the Examiners to answer questions. Protocols developed by the Board form the basis of the testing process. Three protocols will be presented at each of two, 1 ½ hour sequential sessions (back to back) on the same day, for a total of six protocols. Each session will be conducted by a team of two Examiners, for a total of four Examiners. ABP Directors and Examiners serve as Examiner teams. Five of the six protocols will consist of a single case or procedure. Each will be graded in six skills; Diagnosis, Etiology, Prognosis, Treatment Plan, Therapy, and Evaluation of Therapy and Maintenance. The sixth protocol will consist of three ten-minute vignette protocols. These may include such topics as medical management, medical emergencies, periodontal and oral medicine, perio-pathology, post-op complications and management of failures. Each ten-minute vignette protocol will be graded on only two skills: Diagnosis and Therapy. This sixth protocol will therefore have six grades from each Examiner, which is the same number of grades as the other five protocols. (Since the six grades for the vignette protocols are only in the Diagnosis and Therapy categories, these two categories will be slightly more weighted than the other four grading categories for the overall score.)

PROCEDURES FOR ORAL EXAM APPLICATION

Applications may also be downloaded from the Board’s website at www.abperio.org or obtained by calling the Board office at (410) 647-1324. Assignment of candidates to a session will be at the sole discretion of the Board.

Applications for the Oral Examination will not be approved if candidate has not submitted evidence of completion of an ADA accredited program in Periodontics. Evidence consists of a copy of the candidate’s certificate or an official letter signed by BOTH the program Director and the Dean (or equivalent administrative officer) that specifies “successful completion of an educational program in Periodontology, which is accredited by the Commission on Dental Accreditation.

In order to register for the Oral Examination:

1. Complete the Oral Examination Application Form.
2. Read, date, and sign the Oral Examination Attestation Form.
3. Read, answer questions, date, and sign the Oral Examination Credentials Form.
4. Mail completed Oral Examination Application, Attestation, and Credentials Forms along with examination fee of Eight Hundred Fifty Dollars ($2,100) (in U.S. Dollars, drawn on U. S. Bank) to the Board office by October 31st of the prior year you plan to take the Oral Examination, (i.e. application submitted by October 31, 2013 for May 2014 oral examination.)
5. Provide a full color passport style photo in jpg or tif file via email to staff@abperio.org
6. Candidates who request to withdraw from the oral examination must submit their request in writing to the Board office. Candidates who withdraw and whose eligibility has not expired may transfer their oral examination fee to a subsequent examination for a reapplication fee of $400. Candidates withdrawing with special circumstance; (i.e. illness, family death, national disaster) may submit written request to the Board that the oral examination reapplication fee be waived. The decision will be at the sole discretion of the Board and candidates will be notified in writing of the Board’s decision.
7. Candidates who fail to attend the mandatory Orientation Session prior to the Oral Examination; or who fail to show for the Oral Examination must restart the application process by submitting a new completed application, attestation, and credential forms and fee of $2,100.00 to the Board office.

LOCATION

Oral Examinations will be given each year at a time and place determined annually by the Board.
**ORIENTATION SESSION**

A *mandatory* candidate registration/orientation session will be held the day of candidate’s exam at the testing center prior to the candidate’s first 1.5 hr oral examination. Candidates must arrive and leave the testing center via shuttle transportation provided by the Board. Candidates will be picked up by the shuttle transportation at the designated candidate hotel and taken to the testing center. Candidates are required to show photo id at registration. Candidates will complete registration sign-in forms and will receive the oral exam orientation. Candidates will be taken back to the designated candidate hotel by shuttle transportation provided by the Board after their examination session is completed.

**LENGTH OF EXAM**

The Oral Examination will consist of two 1½-hour sequential sessions conducted on the same day.

**EXAMINERS**

ABP Directors and Examiners serve as Examiner teams. Two Directors and/or Examiners will evaluate the candidate in session one and two different Directors and/or Examiners will examine the candidate in session two. All scoring of the candidate will be performed independently without discussion.

**INCIDENT REPORTING**

If, before the exam begins, a candidate recognizes one of their Examiners as their program director or residency faculty the Examiner will contact the Executive Director so that the issue can be considered, and appropriate action taken. If during the examination a Candidate becomes ill or in the judgment of the examiners, unable to answer questions, the Examiners may terminate the examination and request the Board to reschedule the exam. If during the examination a Candidate becomes hostile toward an Examiner or accuses the Examiner of bias or inappropriate conduct, the Examiners may terminate the examination and request the Board to reschedule the exam. Incident reports are available to Examiners and Candidates and must be completed at the time of the exam. Reports of Incidents are referred to the Executive Director of the Board. Ultimately, rescheduling of the exam is at the sole discretion of the Board.

**SCORING OF EXAMINATION AND NOTIFICATION**

Candidates will be graded in each of the six (or in diagnosis and therapy only for the vignette protocol) categories listed in the oral examination process section of this Guidelines. Candidates are scored independently by each member of the Examiner teams (2 each session). Each skill is graded as 4-Outstanding, 3-Satisfactory, 2-Marginal, or 1-Unsatisfactory. Final scores will be computed statistically. Candidates will be notified of the results within 4-6 weeks following completion of the exam. The Board’s Executive Director will send examination results in writing to the candidate by postal mail. Candidates are solely responsible for notifying the Board office of any change in mailing address to ensure the timely delivery of results. The Board office will not provide exam results by phone, email, or facsimile.

**FAILURE OF ORAL EXAMINATION**

Candidates who fail the Oral Examination and whose eligibility period has not expired may apply to repeat the examination within the eligibility period by submitting a completed application and the reapplication fee of $2,100.00 (in U. S. funds). The reapplication fee must be received by the Board on or before October 31st of the year prior to the year in which the Oral Examination is to be repeated (i.e. candidates applying to re-take the examination in May 2014 must submit the application by October 31, 2013). No application fees will be refunded for failing the Oral Examination. Placement of candidates retaking the examination in a particular session is on a first come/first serve basis and ultimately at the sole discretion of the Board.
Candidates who fail the Oral Examination in the last year of eligibility (2 years without extension, 3 years if extension is granted) will be required to restart the certification process by successfully completing the ABP Qualifying Examination.

## Hypothetical Protocol

The following hypothetical protocol is provided as an example of what one protocol may include. Actual protocols may be more or less comprehensive than the following example:

The patient is a 41-year-old Caucasian male who presented with a chief complaint of a recently developed space between his front teeth. He reports that his general health is good, but premedicates before dental treatment with erythromycin for mitral valve prolapse. He states that he is allergic to penicillin. His gums bleed occasionally with brushing.

Candidate will usually receive charting of localized area.

Digitized photographic slides to be used throughout the questioning period for this protocol include:

1. Maxillary anterior photograph demonstrating anterior open bite, and open contact 7-8.
2. Preoperative radiograph #6-11
3. Occlusal view demonstrating excessive occlusal wear
4. Surgical site #6-11
5. One-year post-op radiographs
6. One-year post-op photographs #6-11

### 1. Diagnosis

**Question:** Describe how you would proceed in order to generate an accurate periodontal diagnosis including any intra-oral and extra-oral pathoses.

Candidates should consider the following factors in making the diagnoses of Localized Severe Chronic Periodontitis with Occlusal Traumatism:

- Medical history
- Occlusion – anterior open bite, centric prematurities
- Plaque/calculus
- Recession
- Attachment levels/pocket depths
- Bone loss
- Mobility

### 2. Etiology

**Question:** What etiologic factors are pertinent in this patient?

Candidates should consider the following factors:

- Space between #7 & 8
- Open contacts
- Food impaction
- Occlusal trauma
- Plaque and calculus
- Anterior open bite
- Centric prematurity
- Habits
- Genetics

### 3. Prognosis

**Question:** What would you consider the prognosis to be for individual teeth and for the overall dentition both short and long term in this patient?
Candidates should be able to discuss:
- Short/long term prognosis of #’6-11, and how derived?
- Will prognosis change after treatment?
- Will prognosis change with different treatment modalities? Why? How?

4. **Treatment Planning** - Please proceed with your treatment plan for this patient. You may request to review any information that you believe important to this task.
Candidate should be prepared to discuss:
- Which options are best for this patient and why
- Order of treatment
- Rationale for each treatment
- What is the expected outcome for each treatment?

5. **Selected Therapy** - Discuss the rationale for the selected therapy.
   Possible Questions: 1) Since you chose to extract #7,8 please provide your rationale; 2) If you chose to retain #7,8 what therapy(ies) would you consider; 3) Please provide in detail your technique for grafting #7,8 and why you chose this technique; 4) Describe the specific techniques you would use for the treatment of #’s 7 & 8 and how you would perform them; 5) Discuss implant placement in this region.
Candidate should be prepared to discuss:
- GTR – flap design, materials, steps
- Root treatment – how (manual, sonic, ultrasonic, rotary), why?
- Root conditioning
- Graft – choices
- Barrier – choices
- Suture
- Dressing placement?
- Antibiotics – localized, systemic
- Post-op management

6. **Evaluation and Maintenance of Therapy**
   Question: What factors would you consider when evaluating results of therapy?
   Candidate should be prepared to discuss:
   - What were goals
   - How to measure results
   - When to measure results – why?
   - What is success?
   - What is failure?

   Question: What factors would you consider in developing a maintenance schedule for this patient?
   Candidate should be prepared to discuss:
   - How to maintain 0-3 mm pockets
   - How to maintain 3-5 mm pockets
   - How to maintain 5-7 mm pockets
   - When to retreat-Why
   - Reasons not to retreat

**HYPOTHETICAL VIGNETTE PROTOCOL**

Note: this example represents one ten-minute vignette, which is one third of the Vignette Protocol. Two additional vignettes, consisting of unrelated topics, would also be included in the 30-minute Vignette Protocol.
The patient is a 63-year-old Caucasian female for whom you placed an implant to replace tooth #5. The implant was placed 18 months ago and restored four months following placement. The patient has not been back to your practice since the implant was restored. Her general dentist referred her back to you because of swelling and soreness around the implant.

Candidate will be able to view photograph and radiographs of the area as well as charting completed when the patient arrived.

Charting demonstrated a 10mm. pocket over the facial of the implant with 5mm pockets in the palatal and interproximals.

A periapical radiograph demonstrated a radiolucency over the coronal 1/3 of the implant.

The clinical photo demonstrates edema and erythema #5 area,

**Diagnosis**
Describe how you would determine a diagnosis for the #5 area.

Candidate should be able to describe the clinical appearance, findings and history that would lead to the diagnosis of ailing implant.

- History
- Clinical findings
- Radiographic picture
- Symptoms

**Therapy**
Candidate should be able to describe his/her approach to treating this ailing implant and provide a rationale for treatment.

- Surgical vs non-surgical treatment
- Disinfection of site
- Flap design & debridement
- Regenerative procedures including:
  - Grafting materials
  - Barriers
  - Suturing & Post-op
  - Post-surgical meds
  - Post-op management and maintenance
Protocols have been prepared to examine candidate’s knowledge in the following areas:

I. Non-surgical therapy
   A. Plaque control / behavior modification
   B. Scaling, root planing / debridement
   C. Pharmacotherapeutics / irrigation
   D. Stress reduction / sedation
   E. Occlusal therapy / splints / TMJ
   F. Interdisciplinary therapy, e.g. ortho, endo, restorative dentistry

II. Surgical therapy
   A. Crown lengthening for
      a. restorative dentistry
      b. cosmetic reasons
   B. Gingival attachment procedures, e.g. Mod. Widman, open flap debridement, ENAP
   C. Regeneration or replacement of periodontal supporting structures
      a. Bone replacement grafting
      b. Barrier therapy, e.g. GTR
      c. Combination graft and barrier
      d. Root surface conditioning
      e. Growth Factors
   D. Reseective
      a. Soft tissue
      b. Hard tissue
      c. Root resection
   E. Periodontal plastic surgery
      a. Soft tissue grafts
      b. Pedicle flaps
      c. Combination pedicle flaps, connective tissue
      d. Connective tissue grafts
      e. Barriers
   F. Dental implants
      a. Placement
      b. Repair/removal
   G. Site preparation, e.g. sinus elevation, GBR
   H. Post-op complications and management of failed therapy

III. Oral/Systemic Interrelationships
    A. Oral medicine
    B. Oral pathology
    C. Perio / Medicine / Systemic

Please note: Candidates will not be examined in all content areas. It is anticipated that 3 or more content areas will be covered at each 1 ½ hour session.
SAMPLE CHARTING

<table>
<thead>
<tr>
<th></th>
<th>CAL &amp; BOP</th>
<th>PD &amp; Plaque</th>
<th>CEJ - GM</th>
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</thead>
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<td>6 3 5</td>
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<tr>
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<td>0 0 0</td>
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</tbody>
</table>

Furcation Grade System Used: **Hamp**

Facial

Mobility Scale Used: **Miller**

Lingual

<table>
<thead>
<tr>
<th></th>
<th>CAL &amp; BOP</th>
<th>PD &amp; Plaque</th>
<th>CEJ - GM</th>
</tr>
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<tbody>
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<td>5 3 5</td>
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<td></td>
<td></td>
<td>5 4 5</td>
</tr>
</tbody>
</table>
Charting Symbols

Caries Symbol:

Furcations:

Open Contact Symbol:

Gingival Margin Symbol:

Lack of KT Symbol:

BOP Symbol: to be placed over CAL recordings

Plaque Symbol: to be placed over PD recordings
<table>
<thead>
<tr>
<th>Diagnosis (intra-and extra-oral pathoses and Periodontal Dx) (1)</th>
<th>Unsatisfactory (1)</th>
<th>Marginal (2)</th>
<th>Satisfactory (3)</th>
<th>Outstanding (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dx is incorrect or incomplete and potentially harmful.</td>
<td>Dx is incomplete but safe</td>
<td>Dx is correct but not outstanding</td>
<td>Dx is correct and is thoroughly and impressively reasoned</td>
<td></td>
</tr>
<tr>
<td>Etiology (2)</td>
<td>Etiology that is incorrect or incomplete and potentially harmful.</td>
<td>Etiology is incomplete but safe</td>
<td>Etiology is correct but not outstanding</td>
<td>Etiology is correct and is thoroughly and impressively reasoned</td>
</tr>
<tr>
<td>Prognosis (3)</td>
<td>Prognosis that is incorrect or incomplete and potentially harmful.</td>
<td>Prognosis is incomplete but safe</td>
<td>Prognosis is correct but not outstanding</td>
<td>Prognosis is correct and is thoroughly and impressively reasoned</td>
</tr>
<tr>
<td>Treatment Planning (4)</td>
<td>Tx plan is incorrect or incomplete and potentially harmful.</td>
<td>Tx plan is incomplete but safe</td>
<td>Tx plan is correct but not outstanding</td>
<td>Tx plan is correct and is thoroughly and impressively reasoned</td>
</tr>
<tr>
<td>Selected Therapy (5)</td>
<td>Selected Therapy is incorrect or incomplete and potentially harmful.</td>
<td>Selected Therapy is incomplete but safe</td>
<td>Selected Therapy is correct but not outstanding</td>
<td>Selected Therapy is correct and is thoroughly and impressively reasoned</td>
</tr>
<tr>
<td>Evaluation and Maintenance of Therapy (6)</td>
<td>Evaluation and Maintenance of Therapy are incorrect/incomplete and potentially harmful</td>
<td>Evaluation and Maintenance of Therapy are incomplete/incomplete and safe</td>
<td>Evaluation and Maintenance of Therapy is correct by not outstanding</td>
<td>Evaluation and Maintenance of Therapy are correct and is thoroughly and impressively reasoned</td>
</tr>
</tbody>
</table>
THE AMERICAN BOARD OF PERIODONTOLOGY
SAMPLE EVALUATION FORM CONTENT

CANDIDATE:_________________________________ EXAMINER:_____________________________________

DATE:_____________________________________

TIME: (circle one) A.M. P.M.  

<table>
<thead>
<tr>
<th>Case #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosis</td>
</tr>
<tr>
<td>Etiology</td>
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<tr>
<td>Prognosis</td>
</tr>
<tr>
<td>Treatment Plan</td>
</tr>
<tr>
<td>Therapy</td>
</tr>
<tr>
<td>Evaluation and Maintenance of Therapy</td>
</tr>
</tbody>
</table>
CERTIFICATES

The Board shall issue each candidate who successfully completes the ABP Qualifying and Oral Examination a certificate. Duplicate certificates shall not be issued. Beginning May 2013 candidates who successfully complete the Oral Examination will be awarded time-limited certificates of six (6) years. Diplomates who were awarded certificates prior to May 2013 will continue to have certificates which are not time limited. (See Recertification Process pages 23-24)

USE OF TERMS

• The Board endorses the use of "Diplomate of the American Board of Periodontology" and "Practice Limited to Periodontology" in professional letterheads and advertisements.

• The Board also endorses the statement that "The American Board of Periodontology is one of the nine recognized Dental Specialty Boards of the American Dental Association".

• The Board also endorses the use of a stamp for insurance forms stating, "Practice Limited to Periodontics, Diplomate of the American Board of Periodontology."

• The Board endorses the use of the ABP Diplomate Seal. Request to acquire the Diplomate Seal should be made by contacting the Board office.

ABP SUPPORT FOR DIPLOMATES

➢ Represents Diplomates at Specialty Board Conferences

➢ Provides for comprehensive programs of continued competency (recertification), including self-study continuing education programs and recertification certificates

➢ Provides order forms for Board Lapel Pin

➢ Provides CE Credit for successful completion ABP Qualifying Examination (6 Credits) and Oral Examination (12 credits)

➢ Publishes Brochure “Your Periodontist is a Diplomate of the American Board of Periodontology”

➢ Publication of individual listings on ABP web pages at www.abperio.org

➢ Acknowledgement of new Diplomates at the AAP General Assembly, AAP Periospectives, and ABP Website

➢ Awards 25-50 Year Anniversary Certificates to Diplomates

➢ Verifies Board certification and recertification to patients, state boards, hospitals, military organizations, HMO’s, and insurance companies.

➢ Provides ABP Seal for use on stationary and in advertisements. All Periodontist listed on stationary and in advertisements that include ABP Seal must be Diplomates of the ABP

➢ Provides certificate for completion of Recertification Requirement.
Beginning May 2013 candidates who successfully complete the Oral Examination will be awarded time-limited certificates of six (6) years. Diplomate must complete Recertification in the sixth year or lose Diplomate status and will be required to begin the certification process again. A one-year extension period to complete Recertification may be requested due to extenuating circumstances (i.e. severe illness, etc). Requests will be reviewed by the Directors for approval. Ultimately, granting of a one year extension is at the sole discretion of the Directors.

Diplomates who were awarded certificates prior to May 2013 will continue to have certificates which are not time limited. Diplomates certified prior to 2013 who fail to complete the Recertification process on time will result in the individual’s Diplomate status being placed into “Suspended” status during which time the individual cannot claim to be “Board Certified”. This “Suspended” status will remain in place until the individual completes the Recertification process and is returned to Active Diplomate status. During this time the individual will not be recognized as and cannot claim to be a Board-Certified Diplomate of the American Board of Periodontology. Request for a one-year extension to complete the recertification requirement may be requested.

Evidence of continuing education and other professional activities directed toward maintaining current knowledge and competence in periodontics is required of all Diplomates every six years. 60 points of continuing education must be attained AND completion of the ABP Self-Study Recertification Program.

1. Continuing Education Activities

   (7) Attendance at The American Academy of Periodontology Annual Meeting

   (5) Attendance at a national or international multiple day meetings that are within the scope of periodontics*

   (2) per day Attendance at Regional Meetings either National or International devoted to topics within the scope of periodontics*.

   (2) per day Attendance at conferences related to topics within the scope of periodontics*, sponsored by a University or The American Academy of Periodontology

   (2) per day Courses taken applicable to topics within the scope of periodontics*.

   (4) per day Courses given applicable to topics within the scope of periodontics*.

   (1) Courses taken online related to topics within the scope of periodontics*.

   (3) Publication, as primary author, in:

   a) National and/or International Journal (those listed in Index of Dental Literature)

   b) Book Chapter(s)

   (2) Publication, as primary author, in: State Dental Journals,

   (1) Publication, as secondary author

   (1) per day Teaching -- a maximum of fourteen points during a six-year period may be credited for teaching

   (2) Completion of ABP Self Study Recertification Program

_Scope of Periodontics: Periodontics is that specialty of dentistry which encompasses the prevention diagnosis and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the_
maintenance of the health, function and esthetics of these structures.

2. **Completing Self-Study Recertification Program**
   Access to the Computerized Self-Study Recertification Program (SSRP) provided by the ABP on the Board’s website at www.abperio.org. For information concerning the self-study recertification program go to [www.abperio.org](http://www.abperio.org) or call (410) 647-1324.

3. Diplomates **must** verify that they have maintained the qualifications for good standing, by responding to the following questions.

   1. Have any disciplinary actions been initiated against you by a state licensing board or military tribunal or other regulatory or disciplinary authority?  
      - Yes [ ]  - No [ ]

   2. Has your license to practice in any state or jurisdiction been denied, relinquished, limited, suspended, reprimanded, censured, or revoked for reasons other that your moving to a different jurisdiction? Is an investigation or proceeding regarding your licensure pending?  
      - Yes [ ]  - No [ ]

   3. Have you been suspended, sanctioned, or otherwise restricted from participating in any private, federal, or state health insurance program for reasons relating to the practice of dentistry?  
      - Yes [ ]  - No [ ]

   4. Has your DEA (narcotics) or similar registration certificate been relinquished, limited, suspended, revoked or challenged?  
      - Yes [ ]  - No [ ]

   5. Have you been sanctioned, suspended, censured, or expelled from a professional dental or medical organization for reasons other than non-payment of dues?  
      - Yes [ ]  - No [ ]

   6. Have you been convicted of, or pleaded nolo contendere to, any criminal conduct or misdemeanors other than minor traffic violations?  
      - Yes [ ]  - No [ ]

   7. Has your hospital or institutional appointments or privileges been denied, reduced, limited, not renewed, suspended, diminished, revoked, or relinquished for reasons relating to the practice of dentistry?  
      - Yes [ ]  - No [ ]

If a Diplomate Answers Yes to any of these questions, a full explanation of the answer must be provided and returned with the statement of compliance. Further, if any of your answers change you must notify the Board and provide an explanation.

Certification by the American Board of Periodontology (ABP) helps to assure the public and health professionals that they are being served by a Periodontist who has successfully completed a rigorous continuing education process and remains in good standing in their community on an on-going basis.

*Please Note: Failure to meet one of the above-mentioned recertification requirements will cause the Diplomate to be placed on inactive status, Diplomates on inactive status may not claim to be Board Certified.*
STATEMENT OF CONFIDENTIALITY

At this time of examination candidates will be required to agree to the following confidentiality agreement:

“I understand that the Board wishes to keep all test questions confidential so that they will not become available to future examinees, who may thereby obtain an unfair advantage. Accordingly, I agree not to retain the examination and not to discuss the questions or answers with anyone other than those who have taken this examination with me. I further understand that this examination is copyrighted work of the Board and that copying of any questions in any form constitutes infringements of the Board’s copyright.”

APPEAL PROCESS

A candidate who has failed the Oral Examination may file an appeal with the Executive Director of the American Board of Periodontology. To be valid the appeal must be received by the Executive Director within thirty (30) days after receipt by the candidate of notice of the adverse decision. It must be accompanied by a check in the amount of $500.00 made payable to the American Board of Periodontology to help defray the Board’s administrative costs in considering the appeal.

An appeal must contain a statement of the specific reason or reasons that the candidate believes that the decision was improper. It must also include any supporting documentation that the candidate wishes to have considered. Failure to provide a specific reason or reasons as to why the candidate believes the adverse decision was improper may be grounds for refusal to hear the appeal.

Disagreement with the judgment of the Examiners is not a valid reason for an appeal. Rather, the candidate must present facts tending to suggest that the conduct of the examination was improper or flawed or that some other event occurred that biased the result. Absent improper conduct of the examination or a biasing event, the Appeals Committee will not substitute its judgment for the judgment of the Examiners and will not re-grade any examination.

All appeals will be subject to preliminary review by the Executive Director. Unless the Executive Director determines that an appeal is frivolous or fails to meet applicable procedural requirements, a properly filed appeal will be considered by an Appeals Committee consisting of three individuals who did not participate in the adverse decision. The Appeals Committee shall be appointed by the Executive Director and shall include at least two current Directors of the Board. If possible, the Committee shall not include any Periodontist who might reasonably be regarded as being in competition with the candidate, who was involved in training of the candidate, or who is a family member or associate of the candidate.

The Appeals Committee will review the specific grounds for appeal set forth by the candidate. If the Appeals Committee determines that there is no reason to alter the adverse decision, it shall affirm the decision. If the Appeals Committee determines that the adverse decision was improper, it shall reverse or modify the decision. If the Appeals Committee believes that it requires additional information from the candidate if may request the information either formally or informally.

The Appeals Committee shall notify the candidate in writing of its decision, including the reasons therefor, within thirty (30) days after reaching its decision. The Appeals Committee shall endeavor to reach its decision within sixty (60) days after receiving a properly filed appeal - unless it has requested additional information from the candidate.

The decision of the Appeals Committee shall be provided to the full Board as information. The decisions of the Appeals Committee shall constitute the final decision of the American Board of Periodontology unless the Board determines to reconsider the decision of the Committee.
**ACCOMMODATION POLICY AND PROCEDURES FOR CANDIDATES WITH DISABILITIES**

Upon timely request, the American Board of Periodontology will make reasonable modifications to its examination procedures to accommodate candidates with a documented disability. A modification will be considered reasonable only if it (1) does not pose an undue financial burden on the Board and (2) does not substantially interfere with assessment of the knowledge or skills that the examination is intended to measure.

**POLICY ON SEXUAL HARASSMENT**

It is the policy of The American Board of Periodontology that all Directors, consultants, examiners, and employees are responsible for assuring that the work place and examination process is free from sexual harassment. Because of the American Board of Periodontology’s strong disapproval of offensive or inappropriate sexual behavior, all Board members, consultants, examiners, and employees must avoid any action or conduct which could reasonably be viewed as sexual harassment, including:

1. Unwelcome sexual advance
2. Requests for sexual acts or favors
3. Other verbal or physical conduct of a sexually harassing nature

Any complaint of sexual harassment shall be made to the Executive Director except that if the complaint is directed against the Executive Director, it shall be made to the Chairman of the Board. All complaints will be addressed promptly and with sensitivity to the privacy interests of both the complainant and the accused individual.

The American Board of Periodontology will take appropriate corrective action, including disciplinary measures when justified, to remedy all violations of this policy.

**STANDARD OF CONDUCT POLICY**

The American Board of Periodontology’s Standard of Conduct for candidate certification and Diplomate recertification is an attempt to ensure that each candidate or Diplomate maintain the highest ethical and professional standards during all phases of the certification and recertification process. The final responsibility for adherence to the Standard ultimately rests with each individual who has the following obligations:

1. To maintain the highest standards of personal ethics, academic honesty, and professional integrity; and
2. To know and comply with the rules, regulations, and policies of the American Board of Periodontology and the ethical standards established by the American Dental Association and the American Academy of Periodontology.

The American Board of Periodontology reserves the right to discipline any candidate or Diplomate for unethical behavior, dishonesty, professional misconduct, or action contrary to any rule of the Board. Conduct which is subject to disciplinary action includes but is not limited to, the following:

1. Plagiarizing or in any other manner presenting the work of another as one’s own;
2. Falsifying an examination application or Diplomate recertification form including falsifying the qualifications or credentials, or intentionally misstating material facts or deliberately failing to provide relevant information to the Board at any time;
3. Cheating or assisting another candidate to cheat on any Examination administered by the Board or other inappropriate behavior in connection with any such examination;

4. Copying or disclosing to others any questions or protocols used in any examination administered by the Board. In this connection, it should be noted that exam questions are copyrighted by the Board. Any unauthorized copying of such questions or recording thereof by any means, may violate the Board’s copyright in those questions. Such conduct may, therefore, involve not only disciplinary action but also a lawsuit for copyright infringement;

5. Violating the Bylaws of the Board or any other adopted rule, policy, or procedure of the Board.

Disciplinary action by the Board may include, but not limited to, refusal to permit a candidate to sit for an examination, denial or revocation of certification or recertification, giving a failing grade on an examination, barring the ability to sit for an examination for such time as the Board determines, or such other action as the Board deems appropriate in the circumstances.

In applying for certification by the American Board of Periodontology, each candidate expressly agrees to hold the Board, its members, examiners, officers, and agents free from any complaint, claim, or damage arising out of any disciplinary action taken by the Board.

All information or material received or generated by the American Board of Periodontology in connection with a disciplinary matter will be kept confidential and will not be released unless release is authorized by the candidate or Diplomate or required by law. However, the fact that a candidate is or is not eligible to sit for the ABP Qualifying Examination or the Oral Examination or has or has not been certified by the Board, may be disclosed.

A candidate or Diplomate who has been the subject of a disciplinary action taken by the American Board of Periodontology, and has received an adverse decision affecting certification or recertification, may request reconsideration of the adverse decision by filing a request with the Executive Director within thirty (30) days after receipt by the candidate of notice of the adverse decision. A copy of the American Board of Periodontology’s Appeal Process may be found in this Guidelines document.

### NON-DISCRIMINATION POLICY

It is the policy of the American Board of Periodontology to evaluate every candidate solely on the merits of the Candidate’s application and performance. The Board and its examiners and employees shall not discriminate on the basis of race, religion, national origin, gender, sexual orientation, age or disability.

### ENGLISH AS THE OFFICIAL LANGUAGE

The official language of the American Board of Periodontology is English. Both the ABP Qualifying and Oral Examination are conducted in English and language is not a disability for testing.

### CANCELLATION POLICY

The American Board of Periodontology will attempt to administer the Oral Examination as scheduled. Should the American Board of Periodontology cancel the Oral Examination or be prevented from appropriately administering or completing an Oral Examination at the appointed time and location, the American Board of Periodontology will not be responsible for any expense of the candidate in connection with the Oral Examination and any substitute Oral Examination.
FUTURE EXAMINATION DATES

Dates for ABP Qualifying and Oral Examinations are published in the AAP Newsletter and ABP Website at www.abperio.org. Additional information can be obtained by calling the Board office 410-647-1324 or by e-mail staff@abperio.org.

ANNUAL REGISTRATION

In compliance with regulations of the American Dental Association, Council on Dental Education, annual registration is required of all Diplomates. This includes an annual registration fee. The Executive Director of the Board will send notification. Failure to comply with these requirements will cause the Diplomate to be placed on inactive status. No Periodontist may claim to be Board Certified while on inactive status. In order for an inactive Diplomate to be returned to an active status, all past due fees must be paid in full. Diplomates in retired status (no longer involved in practice, teaching, or research) shall be exempt from the registration fee.