



# Examination Guidelines for the Certification Process

The American Board of Prosthodontics

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This document represents the Guidelines as of the above listed dates, but is subject to change at the discretion of the American Board of Prosthodontics. The most current Guidelines are available on the American Board of Prosthodontics website ([www.abpros.org](http://www.abpros.org)). Interested parties are strongly encouraged to visit this online resource.

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# 1. The American Board of Prosthodontics

## 1.1 MISSION STATEMENT

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The mission of the American Board of Prosthodontics (ABP or Board) is to certify and re-certify educationally qualified individuals who demonstrate in-depth knowledge and expertise in prosthodontics.

The vision of the ABP is for all educationally qualified prosthodontists to be Board certified.

The ABP recognizes its responsibility to the profession and to the public, and accepts this responsibility through the administration of examinations designed to identify individuals with the knowledge, skills, and attributes deemed important to those who will be called Diplomates of the ABP.

## 1.2 GENERAL STATEMENT OF PURPOSE

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The ABP was organized by the Academy of Denture Prosthetics, at the request of the American Dental Association, to:

- advance the science and art of prosthodontics by encouraging its study and improving its practice;
- determine the eligibility of candidates within the regulations for qualification for examination;
- conduct examinations to determine the proficiency of applicants for certification as Diplomates;
- grant and issue Diplomate certificates to successful candidates; and
- maintain a roster of Diplomates for the general information of the public, the dental and medical professions, dental schools, and health agencies.

## 1.3 SPECIFIC GOALS OF THE ABP

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1. Assure that Diplomates meet designated knowledge and skill criteria, and issue certificates to those individuals indicating that they meet the established criteria. [Bylaws, Article II, Section 1 and Article VIII, Section 1]
2. Assure that Diplomates maintain continued proficiency in prosthodontics. [Bylaws, Article VIII, Section 4]
3. Provide the public and profession with information regarding individuals who are Board certified. [Bylaws, Article I, Section 2; Article XII, Sections 1 and 2]
4. Encourage the specialty of prosthodontics to advance itself through Board Certification.

## 1.4 IMPORTANCE OF BOARD CERTIFICATION

Board Certification identifies practitioners who have demonstrated specialty level ability and succeeded in completing a rigorous evaluation process. The public is able to identify clinicians who have completed the certification process and have demonstrated knowledge, skills and values of an individual worthy of certification. Recognition supports the unique abilities of a practicing prosthodontist for the public.

By recognizing clinicians who meet the standard for Board Certification, the ABP also provides one of the critical aspects that define the specialty. Prosthodontics is defined by scope of practice, educational standards, and clinicians in practice who meet the Board Certification standard. The specialty is framed by the ADA Commission on Dental Education and Licensure Definition, the American College of Prosthodontists Parameters of Care, the Commission on Dental Accreditation Advanced Education Program Specialty Standards for Prosthodontics, and the ABP certifying examination guidelines and process leading to Board Certified specialists, who are called Diplomates. ABP efforts were and continue to be a critical part of the evolution of Prosthodontics and its recognition as a dental specialty.

## 1.5 PROTECTED HEALTH INFORMATION

The ABP is not a HIPAA covered entity and does not act as a business associate to examination candidates who are likely HIPAA covered entities. For protection of candidates and their patients, the ABP requires removal or de-identification of all patient data (i.e., protected health information or PHI). Examples of PHI that may be encountered in this examination include, but are not limited to, patient name or initials, birth date, dates of services, names of treatment providers, names or locations of treatment facilities or laboratories, treatment records that include therapeutic technique, medical/dental and social histories, and full face images. It is recommended that candidates acquire authorization from their patients to cover the disclosure of PHI. This is particularly important for candidates treating patients in states where such disclosure is strictly regulated. An executable [authorization form](#) is recommended.

Sample relative dimensions and orientations for cropping of frontal and profile head views.



## 1.6 DEFINITIONS

### Prosthodontics

Prosthodontics is the dental specialty pertaining to the diagnosis, treatment planning, rehabilitation and maintenance of the oral function, comfort, appearance and health of patients with clinical conditions associated with missing or deficient teeth and/or maxillofacial tissues using biocompatible substitutes.

### Maxillofacial Prosthetics

Maxillofacial Prosthetics is the branch of prosthodontics concerned with the restoration and/or replacement of the stomatognathic and craniofacial structures with prostheses that may or may not be removed on a regular or elective basis.

### ABP Section A Examination

ABP Section A Examination is a criterion-referenced examination constructed through the coordinated efforts of ABP directors and psychometric experts. This computer-based examination is given at regional testing centers and aims to measure the knowledge and skills of qualified candidates. A resultant test score is a measure of how well a candidate performs in relation to the test items rather than the performance of other candidates. The content of the examination gives due consideration to the Commission of Dental Accreditation (CODA) Standards for

Advanced Specialty Education Programs in Prosthodontics. A detailed discussion of the Section A Examination is provided later in this document.

### **ABP Section B, Part 2 Examination**

ABP Section B, Part 2 Examination is a criterion-referenced examination consisting of a 20-minute candidate-generated patient treatment presentation immediately followed by a 40-minute oral examination. Total time for the examination is approximately one hour. Patient treatment must include a removable partial denture (or partial denture obturator) in either arch and fabrication of at least four (4) crowns restoring natural teeth in either arch. A detailed discussion of the Section B, Part 2 Examination is provided later in this document.

### **ABP Section B, Part 3 Examination**

ABP Section B, Part 3 Examination is a criterion-referenced examination consisting of a 20-minute candidate-generated patient treatment presentation immediately followed by a 40-minute oral examination. Total time for the examination is approximately one hour. Patient treatment must include a fixed prosthodontic reconstruction consisting of at least fourteen (14) fixed prosthodontic units restoring occlusal surfaces. At

least six (6) fixed units must restore natural teeth. A detailed discussion of the Section B, Part 3 Examination is provided later in this document.

### **ABP Section B, Part 4 Examination**

ABP Section B, Part 4 Examination is a criterion-referenced examination consisting of a 20-minute candidate-generated patient treatment presentation immediately followed by a 40-minute oral examination. Total time for the examination is approximately one hour. Patient treatment must include a complete denture, complete overdenture, or complete denture obturator prosthesis in one arch and any method of restoring the opposing arch. All complete arch removable prostheses fabricated for the Part 4 examination MUST demonstrate bilateral (cross-arch) balanced articulation. Refer to the [ABP Certification Exam Evaluation Categories and Criteria](#) for additional details on bilateral (cross-arch) balanced articulation. A detailed discussion of the Section B, Part 4 Examination is provided later in this document.

### **ABP Section C Examination**

ABP Section C Examination consists of three, highly objective, 20-minute oral examinations that are completed during a one-hour period. The scenarios are based on patient treatment and clinical presentations supplied by the

ABP. Each scenario consists of four sections: (1) diagnosis, (2) treatment planning, (3) treatment, and (4) prognosis, outcomes and maintenance plan. Candidates are assessed based on the combined performance in all three examinations. Two examiners evaluate responses for each clinically related scenario presented to the candidate using predetermined questions structured to evaluate the candidate's depth and breadth of knowledge in prosthodontics and related disciplines. A detailed discussion of the Section C Examination is provided later in this document.

### **ABP Section D Examination**

ABP Section D Examination is a criterion-referenced examination, one hour in length, consisting of three (3) 20-minute segments that include: (1) candidate-generated patient treatment presentation depicting the surgical placement and restoration of a minimum of two implants in one or more partially edentulous or completely edentulous patients, (2) oral examination based on unrestricted questioning that may relate to the patient treatment presentation, and (3) oral examination based on standardized questioning. The broad scope of implant dentistry will serve as the focus of the oral examination

during both unrestricted and standardized questioning. A detailed discussion of the Section D Examination is provided later in this document.

### Candidacy Designations

For the purposes of the ABP and these Guidelines, the following designations are used, in part, to determine candidate status in the certification process:

#### 1. Postgraduate Student/Resident

An individual in an advanced specialty education program in prosthodontics accredited by the Commission on Dental Accreditation in the United States or Canada. Beginning in the third year of formal prosthodontic training, this individual may challenge:

- one (1) Section B patient presentation oral examination, and/or
- the Section A written examination in April.

#### 2. Prosthodontist

A graduate of an advanced specialty education program in prosthodontics accredited by the Commission on Dental Accreditation (CODA) or the Commission on Dental

Accreditation of Canada (CDAC). A prosthodontist is *educationally qualified* and can apply for and challenge all sections of the ABP exam.

#### 3. Candidate

A postgraduate student/resident or prosthodontist who is actively pursuing certification by the ABP. **Prior to** examination, all candidates must submit an online completed application at [www.abpros.org](http://www.abpros.org) and be approved by the ABP. Candidates have **six (6) years** from the date of initial application approval to complete the certification process. This period of examination candidacy may be extended upon submission of a new application at [www.abpros.org](http://www.abpros.org), paying the associated fees, and approval by the ABP.

#### 4. Diplomate of the ABP

A prosthodontist who has successfully completed the certification process and who maintains good standing with ABP policies and procedures.

## 1.7 CERTIFICATION FOR THE SPECIALTY OF PROSTHODONTICS

By the authority of the American Dental Association and the Council on Dental Education, the ABP is empowered to issue certification in the specialty of prosthodontics. Successful certification attests to a dentist's knowledge, ability and proficiency in the specialty of prosthodontics.

Individuals who meet qualifications set forth in this document may become a candidate for certification by making formal application to the ABP. The ABP does not and shall not discriminate on the basis of race, color, religion (creed), sex, gender identity (including gender expression), sexual orientation, age, national origin (ancestry), disability, marital status, family/parental status, income status, military/veteran status, political beliefs, or any other characteristic prohibited by law in any of its activities or operations.





## 2. Certification & Recertification Processes

### 2.1 INQUIRIES AND GENERAL INFORMATION

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For questions about the *examination process and logistics* that are not covered in these Guidelines, email [exams@abpros.org](mailto:exams@abpros.org). These questions are directed to the Board's Chief Professional Officer. *Please note that the American Board of Prosthodontics will not provide guidance regarding specific therapies. These matters must be determined and justified by the candidate in preparation for and during the examination.*

For other questions contact our Chief Operations Officer, at [info@abpros.org](mailto:info@abpros.org), secure fax (651-290-2266), or traditional letter (American Board of Prosthodontics, 1601 Utica Ave. S, Suite 213, St. Louis Park, MN 55416). These questions may relate to:

- Required qualifications for candidates

- Creation of an account with the ABP (<https://abp.roc-p.com/Create-Account.aspx>) to initiate the registration process
- Confirmation that the submitted qualifying credentials are complete
- Online payments related to application for candidacy, examination fees, dues, recertification, credential verification, etc.
- Diplomate Inquiries:
  - Continuing education course entry
  - Recertification timing
  - Dues payment amount and timing
- Other

### 2.2 PATHWAYS TO CERTIFICATION AND STIPULATIONS

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In order to strategically navigate the various ABP required examinations, candidates may consider **one of three possible pathways** to successful Board Certification:

- Pathway #1: Section A + Section B (all 3 parts)

- Pathway #2: Section A + Section B (any 2 parts) + Section C
- Pathway #3: Section A + Section B (any 2 parts) + Section D

Requirements and stipulations related to successful execution of the ABP certification examination process include:

- English is the official language of the ABP certification process.
- Candidacy for examination is established at the time of application on the website at [www.abpros.org](http://www.abpros.org).
- The Section A written examination may be challenged beginning in April of the third year of formal prosthodontic training.
- A postgraduate student/resident whose prosthodontic education extends beyond 3 years may take the Section A examination beginning in the third year of formal prosthodontic training.

- All patients presented during Section B or Section D examinations may have been treated and documented during formal prosthodontic training.
- Postgraduate students/residents may challenge any one part (2, 3 or 4) of Section B examination beginning in the third year of formal prosthodontic training.
- Candidates may not challenge the Section C examination or the Section D examination until after completion of formal prosthodontics training.
- If a candidate fails any aspect of the examination process, but remains within the six (6) consecutive years of candidacy approval, application for reexamination on failed examination is possible.
- If a candidate has appropriately documented a patient therapy that fulfills both Section B and Section D required criteria, the candidate may present this patient therapy for both Section B and Section D examinations during the same examination cycle or at different examination cycles.
- If a candidate has appropriately documented a patient therapy that fulfills both Section B Part 2 and Section B Part 4 required criteria, the candidate may NOT present this patient therapy for both Section B Part 2 and Section B Part 4 examinations during the same examination cycle or at different examination cycles.
- Use of recording devices by the candidate, of any kind, during any of the examinations, is strictly prohibited. Cellular telephones, miniature recording devices, or any instrument capable of recording or transmitting information from the examination room are not permitted. Likewise, any handwritten notes made during the examination period must be provided to examiners at the end of each examination period. Should a candidate use a recording or transmitting device during an examination or fail to relinquish handwritten notes made during an examination, that individual will be disqualified from the examination in question and will forfeit all future opportunities to challenge the ABP examinations. Examination security measures consistent with industry standards and candidate compliance are monitored before, during and after all examinations.

## 2.3 CANDIDATE QUALIFICATIONS FOR EXAMINATION

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A candidate for certification examination by the ABP must:

1. **Be a trained prosthodontist or be a prosthodontic resident/graduate student in the third year of formal training.** Candidates must provide evidence of satisfactory completion, or anticipated completion, of advanced specialty education in prosthodontics recognized and accredited by the Commission on Dental Accreditation (CODA) or the Commission on Dental Accreditation of Canada (CDAC).
  - Participants in an accredited postgraduate prosthodontics program (i.e., postgraduate students) undertake a planned sequence of advanced courses and clinical training leading to a Master's or doctoral degree concurrent with a specialty certificate in prosthodontics.
  - Participants in an accredited graduate prosthodontics program (i.e., residents) undertake a planned sequence of advanced courses and clinical training leading to a specialty certificate in prosthodontics.

2. Formal application procedures involve submitting a completed application, including all required supplemental documentation, as described below (see 2.4 Application Procedures).

### For Postgraduate Students/ Residents

1. Application can occur in the third year of training.
2. Candidate may challenge the Section A examination and one part of the Section B examination.
3. As part of the online application, the candidate must upload a letter from his/her postgraduate Program Director that indicates:
  - a. the candidate is in the third year (at least) of training;
  - b. the candidate is in good academic standing; and
  - c. the expected date of graduation for the candidate.
4. Appropriate fees off the following schedule must accompany online applications:
  - a. Application for Board Candidacy — \$250
  - b. Section A Examination — \$600
  - c. Section B Part 2 Examination — \$600
  - d. Section B Part 3 Examination — \$600
  - e. Section B Part 4 Examination — \$600

### For Prosthodontists

1. Candidacy can be established any time, by formal application, after completion of an advanced specialty education program.
2. Candidate may challenge Section A, B, and C or D exams (see potential examination pathways on page 9) any time after establishing candidacy.
3. As part of the online application, the candidate must upload a notarized copy of his/her prosthodontics certificate.
4. Appropriate fees off the following schedule must accompany online applications:
  - a. Application for Board Candidacy — \$250
  - b. Application for Extension of Board Candidacy — \$250
  - c. Section A Examination — \$600
  - d. Section B Part 2 — Examination \$600
  - e. Section B Part 3 — Examination \$600
  - f. Section B Part 4 — Examination \$600
  - g. Section C Examination — \$600
  - h. Section D Examination — \$600

## 2.4 APPLICATION PROCEDURES

All applications and required documentation are submitted online at [www.abpros.org](http://www.abpros.org). Any inquiries regarding the application process should be submitted to the ABP Chief Operations Officer, via email ([info@abpros.org](mailto:info@abpros.org)), via traditional letter (American Board of Prosthodontics, 1601 Utica Ave. S, Suite 213, St. Louis Park, MN 55416), or secure fax (651-290-2266).

For questions about the examination process or logistics, not covered in these Guidelines, contact the ABP Chief Professional Officer at [exams@abpros.org](mailto:exams@abpros.org).

**PLEASE NOTE** that the ABP and its Directors will not address questions related to Section B or Section D patient selection, patient treatment decisions, or patient examination presentation. Candidates must refer to the most current published “Guidelines for the Certification Process” for appropriate answers to all questions. The American Board of Prosthodontics will not provide guidance regarding specific therapies. Determination, justification, defense of specific therapies, and all related matters, are the responsibility of the candidate during the examination.

**PLEASE ALSO NOTE** that incomplete online forms or improperly notarized documents will not be considered by the ABP. If the candidate feels that any item on the application form must be left blank or incompletely answered, a clearly detailed explanation for this lack of information must accompany the application. All copied diplomas and certificates submitted as proof of professional status must be notarized.

**ADDITIONALLY PLEASE NOTE** that the application deadline each year for the Section A examination is January 31. The registration deadline for the Section B, Section C, and Section D examinations is 60 days prior to the scheduled examination series date. To register for an examination, individuals must first complete the candidacy application process, including the required document upload, and be a confirmed candidate.

## 2.5 APPLICATION, REAPPLICATION AND EXAMINATION FEES

There are application fees for candidacy and separate fees for examination/reexamination. The appropriate total fee must

accompany all applications. The fee schedule is as follows:

- Application for Board Candidacy — \$250
- Application for Extension of Board Candidacy — \$250
- Section A Examination/ Reexamination — \$600
- Section B Part 2 Examination/Reexamination — \$600
- Section B Part 3 Examination/Reexamination — \$600
- Section B Part 4 Examination/Reexamination — \$600
- Section C Examination/ Reexamination — \$600
- Section D Examination/ Reexamination — \$600

The appropriate total fee must accompany applications for examination, or reexamination, at the time applications, and are submitted online. All fees must be paid in United States dollars via credit card (provide all requested credit card information on the application form).

Candidates who withdraw from scheduled examinations less than 60 days prior to the examination date will forfeit all fees paid.

If time has expired on Board candidacy, the candidate must submit an online Application for Extension of Board Candidacy at [www.abpros.org](http://www.abpros.org) and pay the required \$250 fee.

If a candidate is unsuccessful on any Section/Part of the examination, but remains within the six (6) consecutive years of approval for Board candidacy, reapplication for that Section/Part is possible, and must be accompanied by the appropriate fee, as listed above.

## 2.6 CHANGE OF LOCATION OR CONTACT INFORMATION

The ABP recognizes that, upon graduation, postgraduate students/residents are likely to relocate, and will most likely have new contact information. Private practitioners, members of the military, and academicians may also occasionally relocate from one area to another. Once an application for candidacy has been completed and accepted by the ABP, it is the responsibility of the candidate to update personal contact information via the ABP website at [www.abpros.org](http://www.abpros.org). *Under no circumstances should the candidate complete a new, separate application to continue the examination process.*

## 2.7 REEXAMINATION

If a candidate is unsuccessful on any element of the examination, reexamination is possible. Policies governing reexamination include the following:

- All reexaminations require online re-registration for

the specific examination of interest and online payment of appropriate fees.

- If a candidate presents an acceptable Section B patient, but is unsuccessful in the oral phase of the examination, the candidate may be required to complete a 40-minute oral-only reexamination at a subsequent examination session. This reexamination will focus primarily on the scope of the Section B examination that was unsuccessful, but is open to questioning on all prosthodontics concepts and related sciences.
- If a candidate is unsuccessful on the patient presentation of any Section B examination, the candidate cannot pass that part of the Section B examination. In order to be re-examined on that part of Section B, the candidate is required to: (1) document, present and defend retreatment of the patient originally presented, or (2) document, present and defend a new patient treatment.

## 2.8 APPEALS PROCESS

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The ABP has a formal appeals process for concerns related to administration or examination scoring only. There is no appeals process for concerns related to examination execution or

candidate performance. Details related to appeals are available from the ABP Chief Operations Officer ([info@abpros.org](mailto:info@abpros.org)) upon request.

## 2.9 REVOCATION OF CERTIFICATE

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The ABP maintains the power, jurisdiction, and right to determine whether available evidence is sufficient to constitute grounds for suspension or revocation of certification issued by the ABP.

## 2.10 ANNUAL FEE

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The ABP issues time-limited certificates of eight (8) years duration, after which recertification is required. Holders of these certificates (i.e., Diplomates) are required to pay an annual fee as determined by the ABP. Annual fees are payable to the ABP online at [www.abpros.org](http://www.abpros.org) before February 1.

Certification will be revoked if the annual fee is six (6) months delinquent. Payment is the responsibility of the Diplomate. Diplomates delinquent in annual fee payment will receive final notification from the ABP Chief Operations Officer approximately one month prior to the end of the 6-month delinquency period. Delinquent Diplomates will not be listed on the ABP roster, nor will they be listed on the ABP website.

## 2.11 CONTINUED PROFICIENCY OR RECERTIFICATION

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Maintenance of Diplomate status requires periodic recertification. Certificates of Diplomate status are issued for eight (8) year periods. All active Diplomates are required to undergo a process of continued proficiency (i.e., recertification) involving **continuing education** and a **recertification** examination. The following details the continued proficiency process that all Diplomates must undertake.

### Continuing Education

All Diplomates, except for those with Life Diplomate status, must obtain at least two hundred forty (240) continuing education hours over an eight (8) year period. A maximum of sixty (60) hours per year may be accumulated in fulfillment of the two hundred forty (240) hour total. Hours may be accrued in the following ways:

- Attendance by the Diplomate at a scientific session sponsored by a major prosthodontic organization (6 hours per day of session attendance).\*
- Attendance by the Diplomate at other courses, conferences, or meetings applicable to prosthodontics, preferably courses with “CERP” approval (hours of meeting attendance).\*

- Presentation by the Diplomate of invited professional prosthodontics lectures or study club activities related to prosthodontics (hours of presentation).\*
- Article publication by the Diplomate in peer-reviewed professional journals. Abstract publications will not be accepted for continuing education points (12 hours per article).\*
- Prosthodontic book chapter publication by the Diplomate (6 hours per chapter).\*

\* *A maximum of ninety-six (96) hours in an eight (8) year period may be accrued from article and chapter publications, professional presentations, and study club activities.*

Continuing education activity is reported on the Diplomate registration website [www.abpros.org](http://www.abpros.org). All Diplomates are responsible for maintaining updated documentation of their continuing education activity. To periodically audit reporting accuracy, randomly chosen Diplomates are required to furnish documentation to the ABP supporting the continuing education activities reported.

### **Recertification Examination**

Successful completion of an examination focusing on contemporary prosthodontics is required of Diplomates wishing to maintain Active status. A recertification

examination must be successfully completed within every eight (8) year recertification period. Successful completion of the recertification examination requires a score of 70% correct or greater.

The recertification examination will be administered online at <https://abp.roc-p.com>. A fee of \$350 is charged each time the examination is challenged.

Each examination consists of 25 multiple-choice questions with associated literature citations. Review of associated literature citations is required in order to answer questions. Results will be made available to the Diplomate upon submission of the examination.

Each Diplomate may challenge the examination repeatedly, upon payment of each separate examination fee, until a passing grade is achieved. Diplomates must successfully complete the examination prior to expiration of their existing certification in order to maintain Diplomate status. It is the responsibility of the Diplomate to ensure requirements for Recertification are met within the timeframe required to maintain Active Diplomate status.

**PLEASE NOTE:** The ABP assumes all Diplomates challenging the recertification examination will respect the

confidentiality of the process by not reproducing or sharing contents. Although the recertification examination is offered in “open-book” format, it is expected that each Diplomate completing the recertification examination will do so independently and without external assistance beyond the literature citations provided. Recertification is a responsibility of the specialty of prosthodontics and each Diplomate is a representative of the specialty. Diplomates are expected to uphold the highest ethical standards of prosthodontics by not compromising the recertification examination.

### **Summary**

In order to maintain Active Diplomate status, all Diplomates, within each 8-year certification period, must:

1. Accumulate and maintain records demonstrating at least two hundred forty (240) hours of continuing education, and make these records available upon request by the Board; CE records can be maintained by the Diplomate, and need to be entered via the existing ABP online portal.
2. Successfully complete (score 70% correct or greater) at least one (1) recertification examination.

# 3

## 3. Section A: Computerized Written Examination

### 3.1 SECTION A GENERAL INFORMATION

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The ABP Section A examination is a criterion-referenced examination constructed through the coordinated efforts of the ABP and psychometric experts. This computer-based examination is offered once a year, usually early in April, at PearsonVUE professional testing facilities located throughout the United States and internationally. Information on the computer-based testing process can be found at [www.measurementresearch.com](http://www.measurementresearch.com).

- Frequently asked questions about computer-based testing are available at <https://drccertificate.wpengine.com/faqs/>
- A sample examination demonstrating computer examination processes and test item formatting is available at <https://wsr.pearsonvue.com/athena/athena.asp>.

The content of the examination reflects the broad scope and scientific basis for prosthodontics. Determination of and examination to the broad scope and scientific basis of prosthodontics is the responsibility of the ABP Board of Directors. The certification examination reflects, but is not limited to, the Commission of Dental Accreditation (CODA) Standards for Advanced Specialty Education Programs in Prosthodontics. Current standards may be found at <https://coda.ada.org/standards>. In addition to these areas, questions from current professional literature in prosthodontics and related clinical, laboratory and basic sciences contribute to the ABP test item database.

Candidates are provided four(4) hours to complete the Section A examination, which typically consists of two hundred (200) multiple-choice questions that may require review of images, diagrams, or

short videos appearing with the questions.





## 4. Section B: Treatment-Based Presentations and Oral Examinations

# 4

For questions about the examination process or logistics that are not covered in these Guidelines, contact the ABP Chief Professional Officer at [exams@abpros.org](mailto:exams@abpros.org). **PLEASE NOTE**, the ABP and its Directors **will not address** questions related to Section B patient selection, patient treatment decisions, or patient examination presentation. Candidates must refer to the most current published “Guidelines for the Certification Process” for appropriate answers to all questions. The American Board of Prosthodontics will not provide guidance regarding specific therapies. Determination, justification, and defense of specific therapies and all related matters, are the responsibility of the candidate during the examination.

### 4.1 SECTION B GENERAL INFORMATION

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Each part of the Section B examination is conducted over a one-hour time period. The examination begins with an uninterrupted, 20-minute, patient-treatment presentation

given by the candidate, immediately followed by a 40-minute (approximate) oral examination conducted by a team of two ABP examiners. In general:

- Section B patient presentations must be developed by candidates as PowerPoint or Keynote presentations.
- At the start of the examination, candidates will submit their presentation, narrative, radiographs, and laboratory files to the ABP on a virus-free USB drive. The candidate is responsible for confirming USB drive compatibility with an Apple computer. Failure to submit the presentation and narrative in proper format will result in candidate disqualification and forfeiture of the examination fee.
- Candidates will provide two (2) paper copies of their narrative for the examiners to use during the exam.
- Digital radiographs, as required by ABP Examination Guidelines, must be of exceptional resolution and quality.
- Once submitted, the USB drive and the required contents become the property of the Board and may be used as material for future ABP examinations.
- During examinations, presentations are made using an ABP laptop (Apple) computer connected to an ABP monitor provided in the examination room.
- All digital images presented by candidates must be original images with **no alterations except peripheral cropping**. Presentation of images with unauthorized alterations (including but not limited to “instant alpha” or similar, background elimination, or like manipulations) will result in automatic disqualification of the candidate and forfeiture of the examination fee.
- Each candidate must complete at least four (4) dental implants supporting fixed restorations in one or any combination of the patient treatments within the Section B examination. Either photographic images or

dental casts (gypsum, printed, or milled) replicating all abutments for cement-retained implant restorations must be included in presentations that involve implant treatment.

- Presentation of maxillofacial prosthetics patients in **both** Section B, Part 2 and Part 4 is NOT permitted.
- Candidates must have a thorough understanding of all dental laboratory procedures and are responsible for the outcome of all dental laboratory procedures used to completed treatment. Laboratory work authorization forms must be presented for all fixed, removable, and supplemental prosthodontic laboratory work completed by a dental laboratory technician.
- Reliance on dentin bonding as the sole means of **coronal restoration retention**, in the absence of sound preparation retention and resistance form, is unacceptable.
- Adequate circumferential ferrule (minimum of 1.5 mm beyond the core restoration) must be demonstrated photographically.
- For existing restorations and caries, the candidate must:
  - remove all carious lesions;
  - replace all existing fixed prosthodontic foundation restorations; and
  - be prepared to justify the foundation restoration and design used, as well as the physical and chemical properties of the associated materials.

#### 4.1.1 FERRULE, DENTAL CARIES, AND EXISTING RESTORATIONS

The strategic presence of sound coronal tooth structure is necessary to establish adequate preparation resistance and retention form. For all indirect coronal restorations, retention and resistance form of tooth preparations must be appropriately provided primarily by sound tooth structure supplemented by correctly designed core restorations. Therefore:

- Reliance on dentin bonding as the sole means of **core retention** is unacceptable.

#### 4.1.2 COMPREHENSIVE PATIENT CARE

Candidates must perform all clinical prosthodontic and restorative procedures for all Section B patient treatments. Candidates are responsible for **comprehensive patient care**, and will be evaluated on the quality of diagnosis, treatment planning, alternative treatment considerations, and treatment provided to the patient, including justification of **all** care provided and/or not provided by other dentists. Candidates must be prepared to justify treatment rendered and techniques/materials used, as well

as rationale for not managing pre-existing conditions and restorations if such is the case. Patient treatments will serve as the primary focus of the oral examination; however, questioning may include principles and concepts related to the broad scope of prosthodontics.

#### 4.1.3 DENTAL CASTS AND ARTICULATION

- Magnetic mounting plates are the required method for securing casts to articulators for all patient presentations.
- All articulated diagnostic, working, and definitive casts must be accompanied by the articulator used during patient treatment.
- All physical dies and working casts (printed, milled, or cast) associated with the fabrication of fixed prosthodontics restorations must be available during the examination and properly mounted in a physical (not virtual) articulator.

#### 4.1.4 DIGITAL PROSTHODONTICS

Digital technologies may be used during the treatment of patients presented for Section B examinations. Candidates must be prepared to provide evidence-based support for any patient treatment methods used, digital or otherwise. The following guidelines must be considered when digital technologies are used during the

treatment of patients presented for Section B examination. All required documentation for the Section B examinations remains the same, regardless of the incorporation of digital processes.

- It is appropriate that the candidate consider application of digital technology during patient management when such technology: (1) augments otherwise available diagnostic information and diagnostic assessment, and/or (2) when it improves therapeutic logistics and/or quality of care. Depending on patient needs, this may include, but not be limited to, procedures associated with diagnosis, virtual planning, implant placement, interim restoration, definitive prosthodontic care, and maintenance.
- Intraoral or laboratory digital surface scan technology must be selected and applied in a manner consistent with optimal fabrication of clinically acceptable interim and definitive prostheses.
- When digital surface scans are used to render definitive information for examination, diagnosis, treatment planning, and/or direct patient care, Section B documentation requirements must be satisfied with diagnostic quality physical casts (printed, milled, or poured) appropriately mounted in a physical (not virtual) articulator.

- Physical (not virtual) articulation using a programmed physical (not virtual) articulator is the standard for assessing definitive occlusal relationships for all ABP examinations. Articulation presented on the physical casts must visually correspond to all required clinical images presented during the examination.
- Semi-adjustable or highly-adjustable articulators may be used to demonstrate required articulation as indicated for the patient situation.
- Digital complete denture protocols may be used for the Section B, Part 4 examination. However, physical (not virtual) casts must be presented to satisfy all applicable requirements of the Section B, Part 4 examination. Physical (not virtual) trial dentures must be present in all required clinical and laboratory images and articulations.

#### 4.1.5 REQUIREMENTS FOR THE SECTION B, PART 2 EXAMINATION

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- A removable partial denture or a removable partial obturator prosthesis in either arch. Presentation of maxillofacial prosthetics patients in **both** Part 2 and Part 4 is NOT permitted.
- At least four (4) crowns restoring natural teeth in either arch. Unless clinically indicated, it is NOT required

that these crowns restore removable partial denture abutments.

- Implants supporting removable partial overdentures DO NOT fulfill the global ABP requirement for “4 implants supporting fixed restorations.”

#### 4.1.6 REQUIREMENTS FOR THE SECTION B, PART 3 EXAMINATION

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- Fixed prosthodontic treatment comprising at least fourteen (14) fixed prosthodontics units restoring articulating occlusal surfaces.
- At least six (6) of these fixed prosthodontics units must restore natural teeth.
- For fixed implant restorations (screw or cement retained), all dental units that provide articulating occlusal surfaces may be counted in the total number of fixed prosthodontics units.

#### 4.1.7 REQUIREMENTS FOR THE SECTION B, PART 4 EXAMINATION

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- At least one complete denture, complete overdenture, or complete denture obturator prosthesis restoring one arch. Specifically, removable prosthodontic options for this examination include any of the following:
  - complete denture opposing a complete denture; or
  - complete denture or

complete overdenture opposing an overdenture (overdentures may be supported and/or retained by natural teeth or dental implants); or

- complete denture, complete overdenture, or complete obturator prosthesis opposing natural teeth or any method of restoring the opposing arch.

The patient's opposing arch may consist of any combination of natural unrestored or restored teeth, implant restorations, or removable prostheses. The candidate is responsible for, and will be evaluated on, comprehensive care of the patient. As such, dental restoration of the opposing arch, and dental therapy provided or required in the opposing arch, are the responsibility of the candidate.

NOTE: All complete arch removable prostheses fabricated for the Part 4 examination **MUST demonstrate bilateral (cross-arch) balanced articulation**. Refer to the [ABP Certification Exam Evaluation Categories and Criteria](#) for additional details on bilateral (cross-arch) balanced articulation.

Presentation of maxillofacial prosthetic patients in **both** Part 2 and Part 4 is not permitted.

Implants supporting overdentures will not fulfill the global ABP requirements for

“4 implants supporting fixed restorations.”

## 4.2 SECTION B PRESENTATION FORMATS

Each Part of the Section B examination is conducted over a one-hour time period. The examination begins with an uninterrupted, 20-minute, patient-treatment presentation developed and presented by the candidate, immediately followed by a 40-minute (approximate) oral examination conducted by a team of two ABP examiners.

Oral Section B patient presentations must be delivered to examiners in the following order:

1. Health History and Chief Complaint
2. Clinical Findings
3. Diagnosis
4. Treatment Plan
5. Treatment
6. Completed Treatment
7. Prognosis, Outcomes, and Maintenance Plan

Digital presentations should be populated by well composed, properly focused, color images. There is no limit to the number of images that can be included in the presentation, but candidates must complete their verbal/visual presentation within the allotted 20-minute time period. **Only one image may be included per screen** with exceptions noted below.

For all Section B examinations, candidates must provide the following documentation to the ABP on a USB drive separated into four (4) folders:

- PRESENTATION: The original PowerPoint or Keynote patient treatment presentation (PDF files are not accepted).
- NARRATIVE: The narrative (Microsoft Word or Pages).
- RADIOGRAPHS: A complete series of individual periapical and bitewing radiographs depicting pre- and post-treatment conditions of teeth and implants, when included (PNG or JPEG files).
- LABORATORY: All dental laboratory work authorization forms (PDF, PNG, or JPEG files).

### 4.2.1 REQUIRED IMAGES FOR SECTION B, PART 2 AND PART 3

At minimum, images for the Part 2 and Part 3 treatments must clearly show:

#### 1. Pre-treatment

- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, repose (front and profile views)
- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, smile (front and profile views)
- Teeth in maximal intercuspal position (front, left side, and right side views)

- Teeth in laterotrusion and mediotrusion (left side and right side views)
- Teeth in protrusion (front, left side, and right side views)
- Maxillary and mandibular arches (occlusal views)
- Complete mouth periapical and bitewing radiographs
- Panoramic radiograph
- For Part 2 presentations, if the patient is edentulous in one arch, the maximal intercuspal position, laterotrusion, mediotrusion and protrusion images should be made with the pre-existing complete denture prosthesis in place. If the patient presented with no complete denture prosthesis, these images are not required.

## 2. Treatment

- Tooth preparations (occlusal view)
- Tooth preparations (front, left side, and right side views)
- Interim restorations (front, left side, and right side views)
- Final impressions

## 3. Post-Treatment

- Same series of images as defined for pre-treatment above
- At the end of the presentation, include 4 slides depicting a series of full-head images (cropped to eliminate eyes and above; see examples in Chapter 1) arranged as follows:
  - a. Slide 1 — side-by-side (pre-treatment and

post-treatment), repose, front views

- b. Slide 2 — side-by-side (pre-treatment and post-treatment), repose, profile views
- c. Slide 3 — side-by-side (pre-treatment and post-treatment), smile, front views
- d. Slide 4 — side-by-side (pre-treatment and post-treatment), smile, profile views

### 4.2.2 REQUIRED IMAGES FOR SECTION B, PART 4

At a minimum, images for Part 4 treatment must clearly show:

#### 1. Pre-Treatment

- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, repose, no dental prosthesis (front and profile views); if the patient was wearing removable dental prostheses when they presented for treatment, provide the same images with that prostheses in place.
- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, smile, no dental prosthesis (front and profile views); if the patient was wearing removable dental prostheses when they presented for treatment, provide the same images with that prostheses in place.

- Maxillary and mandibular edentulous or partially edentulous ridges (occlusal views)
- Maxillary and mandibular ridges at approximate occlusal vertical dimension (front view)
- Complete mouth periapical radiographic series or panoramic radiographic

#### 2. Treatment

- Border molded impression trays (intaglio surface view)
- Final impressions (intaglio surface view)
- The intraoral technique and materials used to record maxillomandibular relationships (front, left side, and right side views)
- Trial denture on articulator (front, left side, right side, maxillary occlusal, and mandibular occlusal views)

#### 3. Post-Treatment

- Maxillary and mandibular arches without the prosthesis (occlusal views), if implants or natural teeth are present
- Completed prostheses (intaglio surface views)
- Prostheses in place, teeth in maximal intercuspal position (front, left side, and right side views)
- Laterotrusion and mediotrusion (left side and right side views)
- Teeth in protrusion (front, left side, and right side views)

- At the end of the presentation, include 4 slides depicting a series of full-head images (cropped to eliminate eyes and above; see examples in Chapter 1) arranged as follows:
  - a. Slide 1 — side-by-side (old prostheses, no prostheses, new prostheses), repose, front views
  - b. Slide 2 — side-by-side (old prostheses, no prostheses, new prostheses), repose, profile views
  - c. Slide 3 — side-by-side (old prostheses, no prostheses, new prostheses), smile, front views
  - d. Slide 4 — side-by-side (old prostheses, no prostheses, new prostheses), smile, profile views
- Articulated working casts/dies
- Duplicate master cast for RPD framework fabrication with RPD design drawn on cast (must be surveyed and tripoded)

## 2. Removable Complete Prosthodontic Treatment

- Pre-treatment articulated casts of edentulous or partially edentulous ridges at the occlusal vertical dimension
- Post-treatment articulated casts of completed prostheses
- Duplicate master casts
- Working casts/dies for any fixed prosthodontic restorations used in conjunction with the removable prosthodontic treatment

**IMPORTANT NOTE:** If the patient presents for treatment and does not possess, or is not wearing removable prostheses, all images requiring existing (or “old”) removable prostheses to be in place are not required.

### 4.2.3 REQUIRED CASTS & DIES

The following casts and dies must be presented:

#### 1. Removable Partial Prosthodontic and Fixed Prosthodontic Treatments

- Pre-treatment and post-treatment articulated casts
- Articulated casts with diagnostic patterns

If the candidate fails to present all required documentation noted here, they will be disqualified from the examination and will forfeit the examination fee. This will require the candidate to return at a future date to repeat the examination Section in question and pay the appropriate fee for repeat examination.

All articulated diagnostic, working, and definitive casts must be accompanied by the articulator used during patient treatment. All dies and work-

ing casts (gypsum, printed, or milled) used to fabricate fixed prosthodontics restorations must be available during the examination and properly mounted in the articulator used for restoration fabrication. If digital workflow is used, articulated gypsum, milled, or printed casts and dies must be presented.

### 4.2.4 REQUIRED RADIOGRAPHIC IMAGES

Digital radiographs must be of high resolution, exceptional diagnostic quality, and must include:

- Mounted periapical and bitewing pre-treatment and post-treatment complete mouth radiographs/images of all teeth and implants
- Panoramic radiograph (pre-treatment and post-treatment)

All images become the property of, and will be retained by, the ABP.

Missing documents, images, radiographs, records, articulators, casts, dies, or any other materials required by the ABP will result in disqualification from the examination and forfeiture of the examination fee.

### 4.3 SECTION B PART 2 EXAMINATION - CHECKLIST

#### **Certification Process, Application, and Related Fees:**

- Review Chapter 2 of Examination Guidelines for the Certification Process.

The Part 2 Patient:

- The candidate will provide a PowerPoint or Keynote presentation depicting therapy involving a removable partial denture or a removable partial obturator prosthesis in either arch. However, presentation of maxillofacial prosthetics patients in both Part 2 and Part 4 is NOT permitted.
  - At least four (4) crowns restoring natural teeth in either arch. Unless clinically indicated, it is NOT required that these crowns restore removable partial denture abutments.
  - Implants supporting removable partial overdentures DO NOT fulfill the global ABP requirement for “4 implants supporting fixed restorations.”

IMPORTANT: Presentation of maxillofacial prosthetic patients in both Part 2 and Part 4 is NOT permitted.

#### **Required Pre-Treatment Photographic Images:**

- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, repose (front and profile views)
- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, smile (front and profile views)
- Teeth in maximal intercuspatal position (front, left side, and right side views)
- Teeth in laterotrusion and mediotrusion (left side and right side views)
- Teeth in protrusion (front, left side, and right side views)
- Maxillary and mandibular arches (occlusal views)
- Complete mouth periapical and bitewing radiographs
- Panoramic radiograph

#### **Required Treatment Photographic Images:**

- Tooth preparations (occlusal view)
- Tooth preparations (front, left side, and right side views)
- Interim restorations (front, left side, and right side views)
- Final impressions

#### **Required Post-Treatment Photographic Images:**

- Same series of images as defined for pre-treatment above

*Checklist continues on next page.*

### 4.3 SECTION B PART 2 EXAMINATION - CHECKLIST

- At the end of the presentation, include 4 slides depicting a series of full-head images (cropped to eliminate eyes and above; see examples in Chapter 1) arranged as follows:
  - Slide 1: side-by-side (old prostheses, no prostheses, new prostheses), repose, front views
  - Slide 2: side-by-side (old prostheses, no prostheses, new prostheses), repose, profile views
  - Slide 3: side-by-side (old prostheses, no prostheses, new prostheses), smile, front views
  - Slide 4: side-by-side (old prostheses, no prostheses, new prostheses), smile, profile views

#### **Required Removable Partial and Fixed Prosthodontics Casts and Dies:**

- Pre-treatment and post-treatment articulated casts
- Articulated casts with diagnostic patterns
- Articulated working casts/dies
- Duplicate master cast for RPD framework fabrication with RPD design drawn on cast (must be surveyed and tripoded)

#### **Required Radiographic Images**

Digital radiographs must be of high resolution, exceptional diagnostic quality, and must include:

- Mounted periapical and bitewing pre- and post-treatment complete mouth radiographs/images of all teeth and implants
- Panoramic radiograph (pre-treatment and post-treatment)

#### **Additional Considerations**

(review Chapter 4, Section 4.1 of Examination Guidelines for the Certification Process):

- Patient and treatment presentation to examiners.
- Dental implant requirement for the Section B examination.
- Completion of clinical procedures and comprehensive patient care.
- Direct operative and foundation restorations.
- Resistance/retention form and ferrule.
- Dental casts and articulation.
- Appropriate incorporation of digital technology in the examination process.

PLEASE NOTE: This checklist is not intended to contain all information required for this examination. The candidate is encouraged to thoroughly review the entire **Examination Guidelines for the Certification Process** in preparation for the examination.



**4.4 SECTION B PART 3 EXAMINATION – CHECKLIST****Certification Process, Application, and Related Fees:**

- Review Chapter 2 of Examination Guidelines for the Certification Process.

**The Part 3 Patient:**

- The candidate will provide a PowerPoint or Keynote presentation depicting fixed prosthodontic treatment comprising at least fourteen (14) fixed prosthodontics units restoring articulating occlusal surfaces. At least six (6) of these fixed prosthodontics units must restore natural teeth. For fixed implant restorations (screw or cement retained), all dental units that provide articulating occlusal surfaces may be counted in the total number of fixed prosthodontics units.

IMPORTANT: Implants supporting overdentures DO NOT fulfill the global ABP requirement for “4 implants supporting fixed restorations.”

**Required Pre-Treatment Photographic Images:**

- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, repose (front and profile views)
- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, smile (front and profile views)
- Teeth in maximal intercuspal position (front, left side, and right side views)
- Teeth in laterotrusion and mediotrusion (left side and right side views)
- Teeth in protrusion (front, left side, and right side views)
- Maxillary and mandibular arches (occlusal views)
- Complete mouth periapical and bitewing radiographs
- Panoramic radiograph
- If the patient is edentulous in one arch, the maximal intercuspal position, laterotrusion, mediotrusion and protrusion images should be made with the pre-existing complete denture prosthesis in place. If the patient presented with no complete denture prosthesis, these images are not required.

**Required Treatment Photographic Images:**

- Tooth preparations (occlusal view)
- Tooth preparations (front, left side, and right side views)
- Interim restorations (front, left side, and right side views)
- Final impressions

**Required Post-Treatment Photographic Images:**

- Same series of images as defined for pre-treatment above
- At the end of the presentation, include 4 slides depicting a series of full-head images (cropped to eliminate eyes and above; see examples in Chapter 1) arranged as follows:
  - Slide 1: side-by-side (old prostheses, no prostheses, new prostheses), repose, front views
  - Slide 2: side-by-side (old prostheses, no prostheses, new prostheses), repose, profile views
  - Slide 3: side-by-side (old prostheses, no prostheses, new prostheses), smile, front views
  - Slide 4: side-by-side (old prostheses, no prostheses, new prostheses), smile, profile views

IMPORTANT:

- If the patient presents for treatment and does not possess, or is not wearing removable prostheses, all images requiring existing (or “old”) removable prostheses to be in place are not required.

#### 4.4 SECTION B PART 3 EXAMINATION – CHECKLIST

- Digital presentations should be populated by well composed, properly focused, color images.
- There is no limit to the number of images that can be included in the presentation, but candidates must complete their verbal/visual presentation within the allotted 20-minute time period.
- All digital images presented by candidates must be original images with no alterations except peripheral cropping. Presentation of images with unauthorized alterations (including but not limited to “instant alpha” or similar, background elimination, or like manipulations) will result in automatic disqualification of the candidate and forfeiture of the examination fee.

##### **Required Removable Partial and Fixed Prosthodontics Casts and Dies:**

- Pre-treatment and post-treatment articulated casts
- Articulated casts with diagnostic patterns
- Articulated working casts/dies
- Duplicate master cast for RPD framework fabrication with RPD design drawn on cast (must be surveyed and tripoded)

##### **Required Removable Complete Prosthodontic Casts:**

- Pre-treatment articulated casts of edentulous ridge at the occlusal vertical dimension
- Post-treatment articulated casts of completed prosthesis
- Duplicate edentulous master casts
- Working casts/dies for any fixed prosthodontic restorations used in conjunction with removable prosthodontic treatment

##### **Required Radiographic Images**

Digital radiographs must be of high resolution, exceptional diagnostic quality, and must include:

- Mounted periapical and bitewing pre- and post-treatment complete mouth radiographs/images of all teeth and implants
- Panoramic radiograph (pre-treatment and post-treatment)

##### **Additional Considerations**

(review Ch. 4 Sect. 4.1 of Examination Guidelines for the Certification Process):

- Patient and treatment presentation to examiners.
- Dental implant requirement for the Section B examination.
- Completion of clinical procedures and comprehensive patient care.
- Direct operative and foundation restorations.
- Resistance/retention form and ferrule.
- Dental casts and articulation.
- Appropriate incorporation of digital technology in the examination process.

PLEASE NOTE: This checklist is not intended to contain all information required for this examination. The candidate is encouraged to thoroughly review the entire **Examination Guidelines for the Certification Process** in preparation for the examination.

## 4.5 SECTION B PART 4 EXAMINATION – CHECKLIST

### Certification Process, Application, and Related Fees:

- Review Chapter 2 of Examination Guidelines for the Certification Process.

### The Part 4 Patient:

- The candidate will provide a PowerPoint or Keynote presentation depicting therapy using at least one complete denture, complete overdenture, or complete denture obturator prosthesis restoring one arch. Specifically, removable prosthodontic options for this examination include any of the following:
  - complete denture opposing a complete denture; or
  - complete denture or complete overdenture opposing an overdenture (overdentures may be supported and/orw retained by natural teeth or dental implants); or
  - complete denture, complete overdenture, or complete obturator prosthesis opposing natural teeth or any method of restoring the opposing arch.

The patient's opposing arch may consist of any combination of natural unrestored or restored teeth, implant restorations, or removable prostheses.

#### IMPORTANT:

- All complete arch removable prostheses fabricated for the Part 4 examination MUST demonstrate *bilateral (cross-arch) balanced articulation*. Refer to the [ABP Certification Exam Evaluation Categories and Criteria](#) for additional details on bilateral (cross-arch) balanced articulation.
- Presentation of maxillofacial prosthetic patients in both Part 2 and Part 4 is NOT permitted.
- Implants supporting overdentures DO NOT fulfill the global ABP requirement for “4 implants supporting fixed restorations.”

### Required Pre-Treatment Photographic Images:

- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, repose, no dental prosthesis (front and profile views); if the patient was wearing removable dental prostheses when they presented for treatment, provide the same images with prostheses in place
- Full-head (cropped to eliminate eyes and above; see examples in Chapter 1), upright posture, smile, no dental prosthesis (front and profile views); if the patient was wearing removable dental prostheses when they presented for treatment, provide the same images with prostheses in place
- Maxillary and mandibular edentulous or partially edentulous ridges (occlusal views)
- Maxillary and mandibular ridges at approximate occlusal vertical dimension (front view)
- Complete mouth periapical radiographic series or panoramic radiographic

### Required Treatment Photographic Images:

- Border molded impression trays (intaglio surface view)
- Final impressions (intaglio surface view)
- Intraoral technique and materials used to record maxillomandibular relationships (front, left side, and right side views)
- Trial denture on articulator (front, left side, right side, maxillary occlusal, and mandibular occlusal views)

*Checklist continues on next page.*

**4.5 SECTION B PART 4 EXAMINATION – CHECKLIST****Required Post-Treatment Photographic Images:**

- Maxillary and mandibular arches without the prosthesis (occlusal views), if implants or natural teeth are present
- Completed prostheses (intaglio surface views)
- Prostheses in place, teeth in maximal intercuspal position (front, left side, and right side views)
- Laterotrusion and mediotrusion (left side and right side views)
- Teeth in protrusion (front, left side, and right side views)
- At the end of the presentation, include four(4) slides depicting a series of full-head images (cropped to eliminate eyes and above; see examples in Chapter 1) arranged as follows:
  - Slide 1: side-by-side (old prostheses, no prostheses, new prostheses), repose, front views
  - Slide 2: side-by-side (old prostheses, no prostheses, new prostheses), repose, profile views
  - Slide 3: side-by-side (old prostheses, no prostheses, new prostheses), smile, front views
  - Slide 4: side-by-side (old prostheses, no prostheses, new prostheses), smile, profile views

**IMPORTANT:**

- If the patient presents for treatment and does not possess, or is not wearing removable prostheses, all images requiring existing (or “old”) removable prostheses to be in place are not required.
- Digital presentations should be populated by well composed, properly focused, color images.
- There is no limit to the number of images that can be included in the presentation, but candidates must complete their verbal/visual presentation within the allotted 20-minute time period.
- All digital images presented by candidates must be original images with no alterations except peripheral cropping. Presentation of images with unauthorized alterations (including but not limited to “instant alpha” or similar, background elimination, or like manipulations) will result in automatic disqualification of the candidate and forfeiture of the examination fee.

**Required Removable Complete Prosthodontic Casts:**

- Pre-treatment articulated casts of edentulous or partially edentulous ridges at the occlusal vertical dimension
- Post-treatment articulated casts of completed prostheses
- Duplicate master casts
- Working casts/dies for any fixed prosthodontic restorations used in conjunction with removable prosthodontic treatment

**Required Removable Partial and Fixed Prosthodontics Casts and Dies:**

- Pre-treatment and post-treatment articulated casts
- Articulated casts with diagnostic patterns
- Articulated working casts/dies
- Duplicate master cast for RPD framework fabrication with RPD design drawn on cast (must be surveyed and tripoded)

*Checklist continues on next page.*

## 4.5 SECTION B PART 4 EXAMINATION – CHECKLIST

### Required Radiographic Images

Digital radiographs must be of high resolution, exceptional diagnostic quality, and must include:

- Mounted periapical and bitewing pre- and post-treatment complete mouth radiographs/images of all teeth and implants
- Panoramic radiograph (pre-treatment and post-treatment)

### Additional Considerations (review Ch. 4 Sect. 4.1 of Examination Guidelines for the Certification Process):

- Patient and treatment presentation to examiners.
- Dental implant requirement for the Section B examination.
- Completion of clinical procedures and comprehensive patient care.
- Direct operative and foundation restorations.
- Resistance/retention form and ferrule.
- Dental casts and articulation.
- Appropriate incorporation of digital technology in the examination process.

PLEASE NOTE: This checklist is not intended to contain all information required for this examination. The candidate is encouraged to thoroughly review the entire **Examination Guidelines for the Certification Process** in preparation for the examination.



# 5

## 5. Section C: Scenario-Based Oral Examination

### 5.1 SECTION C GENERAL INFORMATION

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This scenario-based examination consists of three (3) separate 20-minute oral examinations in which two (2) examiners present scripted questions based on a clinical scenario created by the ABP. Each clinical scenario incorporates four (4) 5-minute themes: Diagnosis, Treatment Planning, Treatment, and Prognosis, Outcomes and Maintenance Plan. Within each theme, multiple questions are asked. The content of the examination is consistent

with current Commission of Dental Accreditation (CODA) Standards for Advanced Specialty Education Programs in Prosthodontics. Scenarios serve to evaluate depth and breadth of candidate knowledge in prosthodontics and related disciplines and sciences. A video depicting the conduct of a mock examination may be found at [www.abpros.org/exams/section-c/](http://www.abpros.org/exams/section-c/).





## 6. Section D: Implant-Based Patient Presentation and Oral Examination

# 6

For questions about the examination process or logistics not covered in these Guidelines, contact The ABP Chief Professional Officer at [exams@abpros.org](mailto:exams@abpros.org). **PLEASE NOTE**, the ABP and its Directors will not address questions related to Section D patient selection, patient treatment decisions, or patient examination presentation. Candidates must refer to the most current published “Examination Guidelines for the Certification Process” for appropriate answers to all questions. The American Board of Prosthodontics will not provide guidance regarding specific therapies. Determination, justification, and defense of specific therapies and all related matters are the responsibility of the candidate during the examination.

### 6.1 SECTION D GENERAL INFORMATION

With the evolution in scope of prosthodontic care to include dental implant placement, examination of candidate knowledge, skill, and experience in providing such care is the focus of Section D. Candi-

dates should be prepared to present and defend implant therapy with an emphasis on biologic interfaces associated with implantation of biomaterials into osseous structures and surrounding soft tissues. Design of the Section D examination permits ABP Examiners the latitude to explore a candidate’s understanding of implant diagnosis and treatment planning, the biology of implant placement, adjunctive/incidental hard and soft tissue procedures, definitive prosthodontic restoration, and prognosis, outcomes and maintenance planning for implant therapy.

This 60-minute examination involves three (3) 20-minute segments that include:

1. Candidate-generated patient treatment presentation depicting the surgical placement and restoration of a minimum of two (2) implants in one or more partially edentulous or completely edentulous patients.
2. Oral examination based on unrestricted questioning that may relate to the patient

treatment presentation.

3. Oral examination based on standardized questioning.

The broad scope of implant dentistry will serve as the focus of the oral examination during both unrestricted and standardized questioning.

Candidates must be prepared to defend diagnosis, treatment planning, treatment, prognosis, and maintenance planning using available evidence. Any laboratory work not completed by the candidate must be accompanied by dental laboratory work authorizations.

The candidate:

- must perform all surgical and prosthodontic procedures of the treatment being examined;
- will be evaluated on the quality of, and justification for, all care provided or not provided by other clinicians; and
- is also responsible to defend the quality of pre-existing restorations and conditions.

Failure to abide by the instructions and examination policies provided here may

lead to **disqualification** from the current exam.

## 6.2 SECTION D PRESENTATION FORMAT

The candidate will provide a PowerPoint or Keynote presentation depicting the surgical placement and restoration of a minimum of two (2) implants in one or more partially edentulous or completely edentulous patients.

The candidate **must** surgically place a minimum of two (2) implants for the treatment being examined. A document attesting to this will be supplied by the ABP and must be signed by the candidate at the time of the examination.

At the start of all Section D examinations, candidates must provide the following documentation to the ABP on a USB drive separated into 4 folders:

- **PRESENTATION:** The original PowerPoint or Keynote patient treatment presentation (PDF files are not accepted).
- **NARRATIVE:** The narrative (Microsoft Word or Pages).
- **RADIOGRAPHS:** Required pre- and post-treatment individual radiographic images (PNG or JPEG files).
- **LABORATORY:** All dental laboratory work authorization forms (PDF, PNG, or JPEG files).
- Candidates will provide 2 paper copies of their

narrative for the examiners to use during the exam.

### Presentation Order

Oral Section D patient presentations must be delivered to examiners in the following order:

- Health History and Chief Complaint
- Clinical Findings
- Diagnosis
- Treatment Plan
- Treatment
- Completed Treatment
- Prognosis, Outcomes, and Maintenance Plan

### 6.2.1 REQUIRED IMAGES AND DOCUMENTATION FOR SECTION D

For the implant treatments being examined, the following well-composed, high-quality, color images are **required**:

#### Pre-Treatment Photographic Documentation of Maxilla, Mandible, and of Anticipated Surgical Site(s):

- Teeth and/or prostheses in maximal intercuspal position (front, left lateral and right lateral views)
- Lateral and occlusal views of surgical site.

#### Pre-Treatment Radiographic Imaging, to Include Anticipated Implant Site(s):

- Dental radiographic images appropriate for comprehensive analysis

- Documentation of the anticipated surgical site:
  - Cross-sectional images from 3-dimensional imaging of anticipated implant sites (cross-sectional images to include mesial-distal, buccal-lingual, and coronal slices of the anticipated implant sites).

#### Treatment Documentation:

- Demonstration of surgical site(s) with osteotomy(s) after implant placement showing soft tissue management and implant position consistent with prosthetic treatment plan.
- Occlusal and lateral views of surgical site post-implant placement demonstrating wound healing.
- For all treatments presented, lateral and occlusal photographs demonstrating soft tissue (emergence) contours with and without interim prostheses where utilized.

#### Post-Treatment Intraoral Photographic Images:

- Front, left lateral, and right lateral views of teeth and/or prostheses in maximal intercuspal position
- Occlusal view of definitive prostheses

#### Post-Treatment Demonstration of Care Consistent with Comprehensive Planning and Treatment:

- Must have photographic images (front, left lateral and right lateral views)
- Must have mounted dental

casts that include all dental prostheses

- Must have 2- and/or 3-dimensional dental radiographic images appropriate for demonstration of comprehensive care
- When 3-dimensional imaging is used in the post-treatment assessment, cross-sectional images of the implant sites must be shown (cross-sectional images to include mesial-distal, buccal-lingual, and coronal slices of the implant sites)

When cement-retained prostheses are part of the treatment being examined, clear photographic documentation of all involved abutments, prior to cementation, must be included in the presentation.

When overdentures are part of the treatment, clear documentation of the definitive abutments or bars and attachments in the prostheses must be included in the presentation.

Additional photographic/radiographic documentation may be provided at the candidate's discretion. Only high-quality digital images are acceptable. All images presented by candidates must be original with no alterations except peripheral cropping. Presentation of images with unauthorized alterations (including but not limited to "instant alpha" or similar, background elimination, or like manipulations) will result in automatic disqualification of

the candidate and forfeiture of the examination fee. The presentation should include one(1) photographic image per screen. Periapical and bite-wing radiographic images may be grouped to include more than one (1) image per screen. However, each panoramic or CBCT image incorporated in the presentation must be displayed on separate screens and not grouped.

For both implant treatments, additional documentation may be presented. Although there is no limit to the number of images included, the presentation segment of the examination must be completed in 20 minutes or less.

Articulated diagnostic and post-treatment casts for both implant treatments are required and must be available for review during the examination. Magnetic mounting plates are required for securing casts to the articulator.

A checklist of required items is available at the end of this chapter.

### 6.3 PRESENTATION LOGISTICS

Section D patient presentations are developed by candidates following the same guidelines as presented for the Section B patient-based examinations. Digital radiographs, as required by these Guidelines, must be of exceptional resolution and quality. Once submitted, the USB drive and the required contents, be-

come the property of the Board and may be used as material for future ABP examinations.

### 6.4 DENTAL LABORATORY WORK

Dental laboratory technicians may be used to aid in the fabrication of prostheses for patient treatments presented. Candidates must be able to demonstrate a thorough understanding of dental laboratory procedures. Candidates are responsible for the outcome of all dental laboratory procedures associated with the patients and patient treatments presented, and must be accompanied by properly executed dental laboratory work authorizations.

### 6.4 THE 60-MINUTE SECTION D EXAMINATION TIMELINE

- |          |  |
|----------|--|
| 20 Mins. | The candidate will provide a PowerPoint or Keynote presentation of treatment rendered (20 minutes maximum time allotted).                      |
| 20 Mins. | Examiners will pose general unrestricted questions related to the candidate's treatment presentation and the broad scope of implant dentistry. |
| 20 Mins. | Examiners will pose predetermined standardized questions related to the broad scope of implant dentistry.                                      |
| 60 Mins. | TOTAL  |

The candidate will provide a PowerPoint or Keynote presentation depicting the surgical placement and restoration of a minimum of two (2) implants in one or more partially edentulous or completely edentulous patients.

The candidate must surgically place a minimum of two (2) implants for the treatments being examined. A document attesting to this will be supplied by the ABP and must be signed by the candidate at the time of examination.

For the implant treatments being examined, the following well-composed, high-quality, color images are required (missing elements will result in candidate disqualification and forfeiture of the examination fee):

**Pre-Treatment Photographic Documentation of Maxilla, Mandible, and of Anticipated Surgical Site:**

- Teeth in maximal intercuspal position (front, left lateral and right lateral views)
- Lateral and occlusal views of surgical sites.

**Pre-Treatment Radiographic Imaging, to Include Anticipated Implant Site(s):**

- Dental radiographic images appropriate for comprehensive analysis
- Documentation of the anticipated surgical site:
  - Cross-sectional images from 3-dimensional imaging of anticipated implant sites (cross-sectional images to include mesial-distal, buccal-lingual, and coronal slices of the anticipated implant sites).

**Treatment Documentation:**

- Demonstration of surgical site(s) after implant placement showing soft tissue management and implant position consistent with prosthetic treatment plan.
- Occlusal and lateral views of the surgical site post implant placement demonstrating wound healing.
- For all treatments presented, lateral and occlusal photographs demonstrating soft tissue (emergence) contours with and without interim prostheses where utilized.

**Post-Treatment Intraoral Photographic Images:**

- Front, left lateral, and right lateral views of teeth and/or prostheses in maximal intercuspal position
- Occlusal view of definitive prostheses

**Post-Treatment Demonstration of Care Consistent with Comprehensive Planning and Treatment:**

- Must have photographic images (front, left lateral and right lateral views)
- Must have mounted dental casts that include all completed prostheses
- Must have 2- and/or 3-dimensional dental radiographic images appropriate for demonstration of comprehensive care
- When 3-dimensional imaging is used in the post-treatment assessment, cross-sectional images of the implant sites must be shown (cross-sectional images to include mesial-distal, buccal-lingual, and coronal slices of the implant sites).
- When cement-retained prostheses are part of the treatment being examined, clear photographic documentation of all abutments (stock or custom), prior to cementation, must be included in the presentation.
- When overdentures are part of the treatment, clear documentation of the definitive abutments or bars and attachments in the prostheses must be included in the presentation.
- Only high-quality digital images are acceptable. All images presented by candidates must be original with no alterations except peripheral cropping. Presentation of images with unauthorized alterations (including but not limited to “instant alpha” or similar, background elimination, or like manipulations) will result in automatic disqualification of the candidate and forfeiture of the examination fee.
- For both implant treatments, additional documentation may be presented. Although there is no limit to the number of images included, the presentation segment of the examination must be completed in 20 minutes or less.
- Articulated diagnostic and post-treatment casts for both patient treatments are required and must be available for review during the examination. Magnetic mounting plates are the preferred method for cast mountings.

**PLEASE NOTE:** Additional photographic/radiographic documentation may be provided at the candidate’s discretion.

**PLEASE NOTE:** The presentation should include one photographic image per screen. Periapical and bite-wing radiographic images may be grouped to include more than one image per screen. However, each panoramic or CBCT image incorporated in the presentation must be displayed on separate screens and not grouped.

**PLEASE NOTE:** This checklist is not intended to contain all information required for this examination. The candidate is encouraged to thoroughly review the entire **Examination Guidelines for the Certification Process** in preparation for the examination.





## 7. Guideline Update Log

### 2024

- March 18, 2024

Updated the patient treatment criteria for the Section-B, Part 2 examination. Patient therapy may now include a complete denture or complete overdenture in the arch opposing the removable partial denture. *Sections Affected: Section 1.6, Section 4.1.5, and Section 4.3*



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