CANDIDATES MUST SUBMIT A COMPLETED JURISPRUDENCE EXAM ALONG WITH A COMPLETED APPLICATION WITH NECESSARY DOCUMENTS IN ORDER TO HAVE A COMPLETE APPLICATION.

Name ___________________________ Social Security Number _____________
Address ___________________________
__________________________________ Date _____________________________

JURISPRUDENCE
DENTAL HYGIENE EXAMINATION

TRUE OR FALSE: Place the appropriate word in the space provided. Each question will be awarded 4 points.

(Questions 1 thru 5)
A dental hygienist holding a license in Georgia may be disciplined if he/she has:

_____ 1. provided dental screening at a pre-approved health fair setting.
_____ 2. made misleading, deceptive, or untrue representations in the practice of dental hygiene.
_____ 3. had his/her license revoked, suspended, or annulled by any lawful licensing dental authority other than the Georgia Board of Dentistry.
_____ 4. been convicted of a crime involving moral turpitude.
_____ 5. allowed an unlicensed person to practice dental hygiene by using his/her license registration.

GENERAL (Questions 6 thru 12)

_____ 6. Dr. Joe performs an initial oral exam; Mrs. B, Dr. Joe’s assistant, polishes the patient’s teeth and the patient is charged for prophylaxis. This is an appropriate charge.
_____ 7. A dental hygienist was asked to perform dental screenings at a board approved health fair setting. The requirement of direct supervision does not apply.
_____ 8. A licensed dental hygienist is allowed to air polish, micro etche, and also use air abrasion.
_____ 9. It is fair and ethical to use any means to draw patronage from the practice of the hygienist’s former dentist-employer.
_____ 10. The requirement of direct supervision does not apply to the educational training of hygiene students.
11. All continuing education hours must be received during the two-year Renewal period to which they are applied.

12. A dental assistant may perform a rubber cup prophylaxis on a patient with primary dentition only after completing a curriculum approved by the Board or a minimum of eight hours of on-the-job training in the provision of rubber cup prophylaxes by a Georgia licensed dentist.

(Questions 13 thru 16)
Georgia Law allows a hygienist to:

13. condense a final amalgam restoration.

14. make final impressions for crowns and bridges.

15. dry the MB canal of #30 with an absorbent point and place a soothing medicament if instructed to do by Dr. Jones a licensed and registered dentist.

16. make final impressions for partial dentures.

Multiple Choice. Choose the BEST answer to make the statement a true statement.

17. Who is responsible for the actions of the dental assistant?
   (a) the office manager
   (b) the attending dentist
   (c) the dental hygienist
   (d) the treatment coordinator

18. A dental assistant may perform all of the duties of a dental hygienist under which conditions?
   (a) no circumstance.
   (b) when the hygienist is on sick leave.
   (c) when there are too many patients to be seen.
   (d) when the hygienist instructs the dental assistant to do so

19. According to Georgia Rules, how many scientific hours are required for continuing education?
   (a) 5
   (b) 12
   (c) 15
   (d) 20
20. How many hours does CPR count toward continuing education credits for a dental hygienist?
   (a) four
   (b) five
   (c) eight
   (d) ten

21. The dentist has administered Nitrous Oxide to the patient and has left the operatory. The patient informs you that he does not feel any effects of the gas. It is legal for you as a dental hygienist to increase the Nitrous Oxide level:
   (a) 0%
   (b) 10%
   (c) 15%
   (d) 20%

22. According to Georgia Law, practicing as a dental hygienist without a license is:
   (a) a felony
   (b) a misdemeanor
   (c) unethical conduct
   (d) exploitation

23. Current CPR certification may be obtained by demonstrating skills in:
   (a) one and two man CPR with management for airway for seniors.
   (b) one and two man CPR with management for airway for adults.
   (c) one and two man CPR with management for airway for adults, children, and infants.
   (d) one and two man CPR with management for airway for adults, children, and special needs citizens.

24. To practice under general supervision a dental hygienist must:
   (a) maintain professional liability insurance with minimum coverage of $1,000,000
   (b) have at least 2 years of experience
   (c) be in compliance with CE and CPR requirements
   (d) be licensed in good standing
   (e) all of the above

25. A dental hygienist practicing under general supervision in a private office can perform which of the following functions?
   (a) oral prophylaxis
   (b) scaling and root planing
   (c) fluoride treatment
   (d) both A and C
Georgia Board of Dentistry
Jurisprudence Examination Dental/Dental Hygiene

Rule 150-3-.01(6); Rule 150-5-.02(9): In determining whether an applicant has met the requirements for licensure, an applicant must receive a passing score of 75 or greater on the Georgia jurisprudence examination. Such score will be deemed valid for a period not to exceed one year from the date in which the examination was administered.

AFFIDAVIT of Applicant:

I, ____________________________, do hereby certify under oath the following:

I understand that this is an open book examination and the only authorized sources of assistance for completing this examination are the Georgia Law and Rules.

I have read the Georgia Law and Rules regulating the practice of dentistry in its entirety and have completed this examination without the aid or assistance of any individual or other unauthorized source.

I further understand that in accordance with O.C.G.A. § 43-11-47(a)(2) and O.C.G.A. § 43-11-72, the Board shall have the authority to refuse to grant a license or to revoke a license or to discipline a licensee upon a finding by a majority of the Board that a licensee or applicant has knowingly made misleading, deceptive, untrue, or fraudulent representations in the practice of dentistry or on any document connected therewith.

Witness my signature, the ______ day of ________, 20__. 

______________________________
Signature of Affiant

Sworn to and subscribed before me this ____ day of ________, 20__. 

______________________________
Notary Public

My Commission Expires: