Answers to frequently asked questions about the Dental Licensure Objective Structured Clinical Examination (DLOSCE) are provided below. To view the answer, click the question and the answer will appear. For additional information, read the March 10, 2017 and April 24, 2017 articles in ADA News. Additionally, the recent DLOSCE Presentation is available to download.

What is an objective structured clinical examination (OSCE)?
The ADA’s Dental Licensure OSCE (DLOSCE) is envisioned as a high-stakes examination consisting of multiple, standardized stations each of which will require candidates to use their clinical skills to successfully complete one or more dental problem solving tasks. The OSCE format often includes physical materials, such as radiographs, photographs, models, and order/prescription writing. Standardized patients (actors) have been used in medical OSCEs. The National Dental Examining Board (NDEB) of Canada’s OSCE is presented as a written, multiple-choice examination that presents stimulus materials in multiple stations. Advances in simulated patient and haptic technologies suggest that simulations may be incorporated in a dental OSCE sooner rather than later.

Why were OSCEs developed and where are they used?
OSCEs were developed to help accurately assess the complex notion of clinical competence in the medical field. More specifically, Harden, Stevenson, Wilson Downie, and Wilson (1975) indicated that they introduced the OSCE format to avoid many of the weaknesses and disadvantages of traditional clinical examinations.

OSCEs are widely used in the health sciences, including: optometry, medicine, physical therapy, radiography, rehabilitation medicine, nursing, pharmacy, podiatry, and veterinary medicine. Since their inception in the 1970s, OSCEs are now part of the US Medical Licensing Examination for all US medical graduates. Similarly, the NDEB Canada OSCE is used for dental licensure in Canada.

Are there any states that currently accept an OSCE for initial licensure?
Colorado accepts an OSCE for initial licensure. Minnesota accepts the Canadian OSCE for initial licensure. The Canadian OSCE is administered annually at the University of Minnesota, exclusively for graduates of that institution. Other states are currently considering an OSCE for initial licensure. The ADA DLOSCE will serve as another tool state boards can use to help determine candidate clinical qualifications for licensure. Each dental board will make its own choice as to whether to use or not use the DLOSCE.

Do any of the regional clinical examination agencies administer an OSCE for initial dental licensure?
None of the regional clinical examination agencies (CDCA, CITA, CRDTS, SRTA and WREB) currently offers or administers a dental licensure examination in the OSCE format.

What is the purpose of the ADA DLOSCE?
The ADA DLOSCE will be designed to provide information to US dental boards, concerning whether a candidate for dental licensure possesses the necessary level of clinical skills to safely practice entry-level dentistry. This will be accomplished through the use of a valid and reliable examination that has been professionally developed.

Why is the ADA developing a DLOSCE?
There are many reasons why the ADA is developing a DLOSCE and why the ADA feels it is uniquely positioned to build a high quality clinical licensure examination:
• The development of the DLOSCE supports current ADA policy calling for the elimination of patients from the dental licensure examination process.
• The ADA possesses the in-house expertise to develop an OSCE through its Department of Testing Services (DTS), which is staffed by testing professionals with advanced degrees in psychological measurement and related fields.
• The ADA also supports OSCE development to help support licensure portability for practicing dentists.
• Lastly and most importantly, the ADA feels that a DLOSCE can protect the public health more effectively than existing clinical licensure solutions.

Will the DLOSCE be a regional clinical examination?
The DLOSCE will be available nationally, to all state dental boards. Exam content will remain the same regardless of the region of the country where it is administered, and regardless of the curriculum implemented at different dental schools.

How will DLOSCE content be determined?
Consistent with the Standards for Educational and Psychological Testing established by the American Educational Research Association, American Psychological Association, and the National Council on Measurement in Education (2014), the content of the DLOSCE will be based on a practice analysis involving entry level general dentists. The DLOSCE practice analysis would involve collecting information on the tasks performed by entry-level practicing dentists, with regard to their frequency and criticality for patient care. This information will be used to identify the clinical areas to be tested, and the numbers of items and OSCE stations devoted to these areas.

How was the decision made to pursue DLOSCE development and who supported this decision?
The ADA’s Council on Dental Education and Licensure (CDEL) requested that the ADA Department of Testing Services (DTS) create a business plan to develop an OSCE. CDEL believed that developing an OSCE for dental licensure would help achieve goals stated within several long-standing ADA policies on licensure, including the elimination of patients from the clinical examination process, and dental license portability. Subsequent to business plan development, both CDEL and the Joint Licensure Task Force (co-sponsored by the ADA and the American Dental Education Association) reviewed and strongly endorsed the business plan. In February 2017, the ADA Board of Trustees’ Finance Committee recommended approval of the requested funds so exam development could begin in 2017. After a thorough review and discussion, the Board of Trustees voted to fund the startup costs for exam development.

When will the DLOSCE be available?
It is anticipated that a pilot examination will be available in 2020, with deployment occurring in 2021.

Who will oversee the DLOSCE during development and deployment?
The Board of Trustees authorized formation of a DLOSCE Steering Committee charged with the task of developing and validating the DLOSCE. In January 2020, the Board of Trustees approved the transfer of final development and future administration oversight of the DLOSCE to the Joint Commission on National Dental Examinations (JCNDE).

The DLOSCE Steering Committee is composed of the following individuals, based on criteria established by the Board of Trustees:

• Two ADA BOT members:
  o Roy Thompson, TN, Chair
  o Craig Armstrong, TX
• Two general dentist members of CDEL
  o Edward J. Hebert, LA
  o Prabu Raman, MO
Two educators with experience teaching comprehensive clinical dentistry:
  o Michael Kanellis, IA
  o Frank Licari, UT

Two current state dental board members
  o David Carsten, WA
  o Mark R. Stetzel, IN

Two members of the JCNDE
  o Cataldo Leone (Chair), MA
  o William Robinson, FL

**What specific tasks have been assigned to the DLOSCE Steering Committee?**
The DLOSCE Steering Committee has been charged with the task of developing and validating the DLOSCE. This includes corresponding efforts in the following areas:

- Identify and establish content areas and test specifications for the examination (using results from a practice analysis)
- Establish the general structure of the examination (number of stations) and permissible item formats (manikin, haptic feedback device, etc.)
- Identify and contract with key vendors (e.g., technology, administration) in support of the examination
- Identify and establish test construction committee (TCC) structure
- Identify the first state(s)/region(s) for the DLOSCE field test
- Develop the candidate guide
- Prepare software tools (e.g. Aptify) for DLOSCE candidates and test users
- Identify an appropriate governance structure for DLOSCE administration