

# Written Assessment for Registration

## GENERAL INFORMATION

The Written Assessment for Registration will give you the opportunity to demonstrate that your knowledge, skills and judgment are current to allow you to practise. Full details about the assessment are contained in this document.

If you have any questions, contact the Manager, Registration at [registration@cdho.org](mailto:registration@cdho.org) or 1-800-268-2346 ext. 244.

## DATE AND TIME

The assessment will take place at a mutually agreed-upon date and time at CDHO's office:

175 Bloor Street East, North Tower, Suite 601  
Toronto, Ontario M4W 3R8

Once your completed application is received, CDHO will contact you to confirm your availability.

## FEES

The fee to complete the Written Assessment is \$675 for the first attempt. The fee is reduced to \$575 if you are also applying for the [Clinical Competency Evaluation](#) at the same time. The fee for the subsequent attempts for the Written Assessment is \$575 per attempt.

Fees must be paid before the assessment. Payment can be made online by Visa/Visa Debit or MasterCard/MasterCard Debit after the application has been approved. Failure to make payment may result in the cancellation of your application and loss of your reserved space for the assessment date.

## NUMBER OF ATTEMPTS

Candidates are permitted a total of three attempts at the Written Assessment. If you are unsuccessful after the third attempt, your application will be referred to the Registration Committee for consideration. The Committee may reject your application, require you to complete training or examinations, or other action.

## IDENTIFICATION

You must present photo identification issued by a federal or provincial authority (e.g., passport, driver's licence) before and during the Written Assessment. You will not be permitted to participate in the assessment if you do not bring suitable identification.

## ASSESSMENT FORMAT

The Written Assessment is a 90-question, multiple-choice proctored exam, and it is available in either English or French. The assessment is open book (please bring your own books). You are not permitted to use a cellphone, laptop, tablet or other internet-connected device during the assessment.

You will be given two hours to complete the assessment.

## ASSESSMENT BLUEPRINT

Based on accepted examination guidelines, the reasonable question/time ratio is one minute per question. The Written Assessment is designed to ensure that you have sufficient knowledge of Dental Hygiene theory and practice by asking you to answer knowledge, application, and critical thinking questions.

**Knowledge questions** combine the ability to recall previously learned material and show that you understand its meaning. These questions may include definitions, facts, principles or interpreting data. Knowledge questions make up about 20%-30% of the assessment.

**Application questions** require the application of knowledge to new situations and may include applying rules and theories to the provision of Dental Hygiene care. Application questions account for about 45%-55% of the assessment.

**Critical thinking questions** are higher-level problems that may require skills such as solving problems, judging the relevance of data, and determining cause and effect. Critical thinking questions make up about 20%-30% of the assessment.

Each question stem will refer to only one question and will have three or four multiple-choice options associated with it. There are no case studies that require you to answer multiple questions.

The passing score for any given test will be unique to the combination of questions that appear on that particular test. For example, a test that has a combination of more difficult questions will not have a passing score as high as a test that has a combination of easier questions. The questions that appear on any test will be completely randomized, but will match the blueprint for the competencies and types of questions below:

**TABLE: ASSESSMENT BLUEPRINT**

COMPETENCIES	PERCENT OF EXAM
Community health	5
Emergency protocols	7
Health and safety/WHMIS	5
Infection prevention and control	22
Pharmacology	7
Process of care	20
Professionalism/communication	7
Radiography (exposure and interpretation)	5
Special needs/medically compromised	7
Jurisprudence/ethics/record keeping	15
<b>Totals</b>	<b>100</b>

## PREPARING FOR THE WRITTEN ASSESSMENT

The questions on the Written Assessment will be based on the knowledge, skills and judgment needed to practise Dental Hygiene competently in Ontario. The following may be useful in helping to prepare for and take the exam:

- Any current Dental Hygiene textbook and/or Dental Hygiene review book
- CDHO resources, such as the:
  - a. Standards of Practice and Guidelines
  - b. Registrants' Handbook
  - c. Jurisprudence Education Module
  - d. Drugs in Dental Hygiene practice course
  - e. Knowledge Network
  - f. Legislation and Bylaws

## SPECIAL ACCOMMODATIONS

CDHO recognizes that applicants with physical, cognitive, or other special needs may require special accommodations when taking the Written Assessment for Registration. You can submit a request for an accommodation by email to [registration@cdho.org](mailto:registration@cdho.org). The request must be submitted with supporting documentation. Please also submit details of any accommodations previously provided to you in any other exam, test, or academic situation. All information collected, along with any supporting documentation, will be treated confidentially and will not be shared with any source without your permission.

If you have a disability or medical condition that requires an accommodation, please submit a letter from a qualified health professional (e.g., physician, psychologist, rehabilitation counsellor, special educator, or other professional) to certify that your condition requires the requested test accommodations. Examples of documentation completed by a qualified health professional that would support the accommodation request include:

- Identification of the disability and/or diagnosis.
- The approximate date when the disability was first diagnosed and/or identified.
- A brief history and description of the disability.
- Identification of the tests and/or protocols used to confirm the diagnosis.
- A description of past accommodations granted for the disability.
- The nature/type of the accommodation currently being requested.
- An explanation of why the specific accommodation is needed.
- A legible signature, title, and qualifications, and contact information (telephone, e-mail) of the qualified health professional; and
- History of accommodations provided to the candidate in testing situations during their education program.

## RESULTS

Results will be emailed to you within four weeks of completing the assessment. CDHO cannot release results by telephone. Results will not be discussed with a third party, other than another Dental Hygiene regulatory body, unless written consent to do so has been submitted from you to CDHO in advance.

Candidates will not receive a final score or percentage, but will receive an overall exam result (i.e., either successful or unsuccessful). Additional feedback will include whether the standard was met or not in each of the ten question competencies (see **Assessment Blueprint** above). This information can be used to help you identify areas of relative strengths and weaknesses if you need to prepare for another attempt. Being unsuccessful in a specific competency does not necessarily indicate that you will be unsuccessful on the assessment overall. **Notification of incorrect answers at the completion of the test will not be provided.**

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July 2025