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Regulatory Change for Registered Dental Assistants
Report to the Minnesota Legislature

Minnesota Board of Dentistry

January 15, 2004



MINNESOTA BOARD OF DENTISTRY

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The whole imposing edifice of modern
medicine is like the celebrated tower of Pisa...
slightly off balance.

— Charles, Prince Of Wales

"Justice requires that to lawfully constituted Authority
there be given that respect and obedience which is its due; that the laws which are
made shall be in wise conformity with the common good."

— Pope Pius XI

INTRODUCTION

This report responds to the Legislature's request¹ that the Minnesota Board of Dentistry² make recommendations to the Legislature regarding the appropriate level of regulation for dental assistants and the appropriate terminology used to distinguish the different levels of dental professionals. The Board of Dentistry recommends that currently Registered Dental Assistants be licensed in the state of Minnesota. Further, the Board recommends that the Legislature consider several options for changing the term "nonregistered dental assistants."

The Board has addressed the question of the appropriate level of regulation for Dental Assistants in the past. For several years, with increasing commitment and level of support, the Board has recommended that the state change the regulatory status of Registered Dental Assistants from *registration* to *licensure*. The grounds for the Board's support for licensure have not changed in that time, and the recent consultation with oral health care professionals affirmed the Board's support.

1. Licensure is an appropriate level of regulation for Registered Dental Assistants because these professionals currently fulfill the criteria for regulation according to Statute §214.001, subdivision 2 and other recognized definitions of licensure.
2. Changing the credential to licensure could help to retain professionals in the field and encourage new entrants, providing hope of further addressing the access to care challenges facing many people throughout the state.

To reach these conclusions, the Board consulted with representatives of registered and nonregistered dental assistants, as required by statute.³ The Board held a public meeting on October 31, 2003 (the "Halloween Summit") that included representatives from Minnesota Dental Assistants Association, the Minnesota Dental Hygienists Association and the Minnesota Dental Association, as well as representatives from the Dental Assistants National Board, the Minnesota Educators of Dental Assistants, Minnesota Association for Community Dentistry, and the Minnesota Dental Hygiene Educators Association. [An agenda is included in Appendix B]. After considering the testimony of the interested parties, the Board continues to strongly recommend that regulated Dental Assistants in Minnesota should be licensed.

This report discusses the regulatory status of Registered Dental Assistants. The "Background" section reviews the current status of dental assistants in Minnesota as well as some of the commonly recognized definitions of credentialing. Part I includes a section entitled "Arguments in Favor of Licensure," which outlines the Board's reasons for endorsing licensure of regulated Dental Assistants; and "Arguments Against" outlines some of the commonly stated arguments in opposition to licensure and the Board's refutation of those arguments. Part II, "Unregulated Dental Assistants" presents options for consideration regarding possible changes, if any, in the title or status of nonregistered dental assistants.

BACKGROUND

There are several definitions of “licensure” and “registration” in the context of professional regulation. The most commonly cited and widely accepted definitions come from the works of Benjamin Shimberg, a national expert on occupational regulation. Shimberg was also a highly respected authority within CLEAR, the international Council on Licensure, Enforcement, and Regulation. The usage of some credentialing terms by Minnesota boards and statutes, however, is unlike those defined by Shimberg. In addition, other states enforce their own credentialing definitions. Nationally and internationally, there is considerable variation in the application of these terms. The following table explores definitions of three common types of credential by several prominent commonly recognized sources.

Table 1. Definitions of Regulation			
	Registration	Certification	Licensure
Dental Assisting National Board⁴	1. Process by which professionals are assessed by the state and given status on a registry. 2. A listing of individuals	Process by which non-governmental organization attests that an individual has met certain requirements.	Process by which a state grants permission to individuals to practice a profession and/or use particular titles.
Minnesota Statute §214	“Practitioners who will be the only persons permitted to use a designated title are listed on an official roster after having met predetermined qualifications”		“A practitioner must receive recognition by the state of having met predetermined qualifications, and persons not so licensed are prohibited from practicing.”
Benjamin Shimburg⁵	<ul style="list-style-type: none"> Use when low probability of threat of inflicting harm on the public. Usually no qualifications demonstrated. Voluntary list.	<i>Statutory Certification</i> Title protection. Usually entails education, service requirements. Identifies providers who have met an established standard.	Scope of practice restrictions. Practice Acts address specific activities that “only licensees may perform, presumably because there is a significant risk of harm” without demonstrated training and experience.
Minnesota Office of the Legislative Auditor⁶	“A roster of enrolled practitioners is maintained by state government without any restriction on the right to practice or the right to use a title.	“Legally restricts the use of a professional or occupational title, but not the right to provide similar or identical services.	“Governs the right to practice a legally defined occupational scope of practice.”
Pew Taskforce on Health Care Workforce Regulation⁷	“State ‘registration’ is generally a matter of registering (by name, address, and qualifications) with a state authority, without necessarily meeting standards for entry-to-practice or continued competence.”	“Regulates the use of a specific occupational title, but does not provide a service monopoly; anyone may deliver the service, but only those actually certified may use a protected title.”	“Permission granted by government to engage in a business or occupation or in an activity otherwise unlawful. With licensure, the government asserts that the licensee has met minimum standards of qualification to ensure that the public health, safety, and welfare will be reasonably protected.” Confers a practice act.
American Academy of Family Physicians⁸			“Mechanism whereby a state grants permission to individuals to engage in the practice... The act of licensure in and of itself confers on the licensee certain legal rights and privileges. Likewise, eligibility to become and remain licensed is dependent on meeting specified standards and obligations established by the appropriate state entity.”
Minnesota House Research Department⁹	“...Usually involves requiring or permitting people who practice a certain occupation to provide their names and addresses... It usually does not require any prior showing of competence.”	Permits those “who meet certain education or experience qualifications to us a specified title... Does not prevent uncertified people from performing the occupation.”	“Grants authority to specified people to engage in a defined set of functions and activities constituting a scope of practice... and people without licenses are prohibited from engaging in the specific tasks.”

Minnesota's statutory definition differs from those of the others in that Minnesota statutes do not recognize a "certification" level of credential. Instead, the "registration" level, as applied in Minnesota, functions similarly to the commonly recognized definition of "certification."

Currently, Dental Assistants in Minnesota are regulated as Registered Dental Assistants by the Minnesota Board of Dentistry. To be qualified for registration, Dental Assistants must satisfactorily complete a training program approved by the Commission on Dental Accreditation including or with additional approved training in expanded duties, pass a Board-approved dental assisting written exam related to clinical duties, and pass a jurisprudence exam based on the Minnesota laws and rules pertaining to dental practice. Registered Dental Assistants are permitted to perform the following duties under the supervision of a licensed dentist:

- Recement intact temporary restorations and place temporary fillings
- Cut arch wires, remove loose bands, or remove loose brackets on orthodontic appliances
- Remove excess bond material with hand or rotary instruments; remove excess cement with hand instruments
- Etch enamel surfaces of teeth and apply and adjust sealants
- Administer and monitor nitrous oxide inhalation analgesia
- Place and remove matrix bands
- Fabricate, cement, and adjust temporary restorations
- Remove temporary restorations (with hand instruments)
- Perform mechanical polishing of clinical crowns
- Take radiographs (x-rays)
- Apply certain topical medications, topical fluoride, bleaching agents, and cavity varnishes
- Take impressions
- Place and restore rubber dams
- Pre-select orthodontic bands, and place & remove orthodontic separators
- Remove and replace ligature ties on orthodontic appliances
- Remove sutures
- Place and remove periodontal packs
- Dry root canals with paper points
- Place cotton pellets and temporary restorative materials into endodontic openings
- With additional training, perform restorative procedures (including amalgam, glass ionomer, and composite restorations)

Registered Dental Assistants in Minnesota must also comply with the Dental Practice Act, including provisions for Continuing Education and Professional Development.

Some individuals in Minnesota act in supportive roles within dental practices, but are not registered. These individuals are typically trained on the job to do specific, limited functions. This group is often referred to as "nonregistered dental assistants." Nonregistered dental assistants cannot perform many of the duties granted to Registered Dental Assistants, and nonregistered dental assistants are *unregulated*. Nonregistered dental assistants do not have to fulfill educational requirements and cannot perform duties ascribed to the Registered Dental Assistants' scope of practice; nonregistered dental assistants can, however, perform other low risk duties under the supervision of a licensed dentist.

PART I. ARGUMENTS IN FAVOR OF LICENSURE

★ The criteria for licensure outlined in MS Chapter 214 are fulfilled ★

Despite the sometimes confusing language, Shimberg's and Minnesota's statutory usage of the term "licensure" are appropriate because Registered Dental Assistants fulfill the statutory requirements for licensure outlined in MS §214:

1. The unregulated practice of Dental Assistants may harm or endanger the health, safety and welfare of citizens of the state and the potential for harm is recognizable and not remote;
Registered Dental Assistants legally perform duties that may harm or endanger the public. Procedures that are specified in Minnesota Rules as delegable under various levels of supervision require a professional level of expertise. Licensure is the appropriate status for dental professionals that perform such procedures.
2. The practice of Dental Assistants requires specialized skill and training and the public needs and will benefit by assurances of initial and continuing occupational ability;
To become eligible to perform expanded function duties, Dental Assistants must fulfill educational requirements and demonstrate competence. Registered Dental Assistants must graduate from an accredited Board-approved school [alternative qualifications, MR3100.1300, and an approved dental assisting curriculum are summarized in Appendix D]. Because of the sensitive and potentially harmful nature of the duties of Registered Dental Assistants, it is in the interest of the public to assure that Licensed Dental Assistants attain adequate initial and continuing ability.
3. The citizens of this state may not be effectively protected by other means;
Regulation of the profession is essential to public protection. The question faced is not *whether* to regulate, but rather *what level* of regulation is most appropriate. It is clear to the Minnesota Board of Dentistry, as the state agency charged with responsibility for establishing and enforcing regulatory standards for the dental professions, that licensure is the most appropriate level of regulation for these allied dental professionals, and that it provides a regulatory status consistent with that designated for other health professions.
4. and: The overall cost effectiveness and economic impact would be positive for citizens of the state.

This report does not include a formal analysis of the possible fiscal implications of changing the level of regulation of Registered Dental Assistants to licensure. [A copy of the Fiscal Note to the 2003 bill, as provided by the Board to the Department of Finance, is included as Appendix C.] There are several reasons, however, to expect that the financial impact on consumers of changing the level of regulation would be negligible. First, because Registered Dental Assistants are already regulated, the cost to the Board of Dentistry of changing their status is minimal. Second, as the requirements for assistant licensure would remain the same as the current requirements for assistant registration, there will be no

additional barriers to entry to the field. Entry into the profession will not be restricted any more than it is currently, thereby not adversely affecting the cost of licensing for the profession nor the cost of care for consumers. Third, changing the status of Registered Dental Assistants to licensure from registration may encourage more entrants into the profession and greater retention of current professionals (discussed below), thereby increasing the supply of professionals, which may ultimately decrease the costs of care to consumers.

★ Licensure could help increase the supply of dental professionals ★

The possibility that licensure could encourage the retention of current professionals and encourage new entrants into the profession is another reason the Board of Dentistry supports licensure for Registered Dental Assistants. Health professionals of many disciplines are in short supply, driving up the cost of care for consumers. Increasing access to dental care from qualified professionals is in the best interests of consumers.

★ Licensure could help increase the experience-base of dental professionals ★

The Dental Assisting National Board (DANB) has conducted studies which indicate greater retention and job satisfaction among higher-credentialed dental assistants¹⁰. Retaining a trained pool of professionals in Minnesota is more economical and otherwise more advantageous than relying on recruiting and training large numbers of people to replace frequent turnover of experienced staff.

Licensure would add to the cohesiveness, credibility and accountability of a dental team, thereby increasing retention. This would have the additional and desirable benefit of protecting the public by having more experienced professionals caring for patients.

ARGUMENTS AGAINST LICENSURE

Some arguments against changing the regulatory status of Registered Dental Assistants are summarized in Appendix A. This section will address four common arguments raised and perceptions expressed against changing the regulatory status of Registered Dental Assistants.

Perception 1: The new title will be confusing to dentists and the public.

The Minnesota Dental Association argues that the current status of dental assistants is confusing, and changing the name of the credentials could compound this confusion for dentists who supervise dental assistants. It is important to public safety, however, that dentists are aware of their regulatory obligations as supervisors as well as the capacity and expected proficiency of dental assistants under their supervision.

The Board of Dentistry recognizes the complexity of the current regulatory scheme. Changing the status of registered and unregistered dental assistants will not increase complexity, but rather result in the same number of titles: Licensed Dental Assistants and another title to represent unregistered dental assistants. These titles will replace the former titles and will involve no overlap among individuals.

Perception 2: Because dental assistants operate under the supervision of dentists, there is no need for a change in regulation.

Some have argued that because dentists are ultimately responsible for much of the professional behavior of dental assistants, the current situation adequately protects the public. However, dental assistants are performing tasks that pose a potential risk to patients.

The need is the desire not to “just do it,” but to *do it right* and to *right a wrong*. The Board is charged with the responsibility of regulating the dental professions. If this were a new or emerging profession, rather than an existing one, dental assistants would certainly enter the regulatory framework under licensure. This perspective was supported by a review by the Council of Health Boards of the 2003 application by dental assistants for consideration of licensure. The Council report states that:

Minnesota has previously established a regulatory framework for health occupations; were the occupation of dental assistant to be brought before the legislature today as a new occupation, it is conceivable that the initial proposal would be a request for licensure rather than the request for registration as an initial regulatory scheme for dental assistants.¹¹

The licensure of dental assistants was supported by the Council of Health Boards at its December 3, 2003 meeting.

Perception 3: Licensure requirements may present barriers to entry into the profession by new dental assistants.

Professional regulation has often been cited as a force that restricts entry of new professionals because it increases the barriers to entry into the profession and thereby restricts the supply of qualified practitioners. However, changing the level of regulation from registration to licensure will *not* increase the requirements to enter the profession to a level greater than that of the current regulatory scheme. In addition, as discussed above, changing the status of the credential to licensure may encourage practitioners to remain in the field longer and encourage new entrants into the profession.

Perception 4: Licensure will lead to demands for salary increases by dental assistants.

The marketplace— supply and demand— continues to determine employee salaries. The goal of the change in nomenclature is appropriateness, not financial. Continuing growth of the profession with regard to additional duties that may be delegated could increase the value of dental assistants within dental practices, irrespective of their regulatory title.

PART II. UNREGULATED DENTAL ASSISTANTS

The expressed purposes of changing the title or level of regulation of *nonregistered* dental assistants is to mitigate confusion on the part of consumers and other health professionals and to protect the public from a potential risk of harm. The Board has not made recommendations on a new title or level of regulation for nonregistered dental assistants, but instead presents options for the Legislature to consider. The Halloween Summit of oral health professionals and the Board of Dentistry drew no unregistered dental assistants as participants, therefore making recommendations on the topic is difficult. Despite seeking participation from unregistered dental assistants at the Summit and other discussion forums, unregistered dental assistants have not come forward. Nonregistered dental assistants have no professional organization that represents them, and it is not known who they are or how many are working in Minnesota.

Unregulated dental assistants do not have or use a common title, as they are not recognized professionally nor are they directly governed by the Dental Practice Act— except to be significantly limited in the duties they may perform. They are referred to, interchangeably, as “unregistered dental assistants,” “unlicensed dental assistants,” “nonregistered dental assistants,” or simply as “dental assistants.” Their training is typically office-based, on the job, rather than from an accredited school teaching an approved and standardized curriculum.

The existing statutes and rules refer to (unregistered) dental assistants in the briefest of terms, indicating that:

[MS §150A.10, Subd.2] Every licensed dentist who uses the services of any unlicensed person for the purpose of assistance in the practice of dentistry shall be responsible for the acts of such unlicensed person while engaged in such assistance. Such dentist shall permit such unlicensed assistant to perform only those acts which are authorized to be delegated to unlicensed assistants by the Board of Dentistry. Such acts shall be performed under supervision of a licensed dentist. The board may permit differing levels of dental assistance based upon recognized educational standards, approved by the board, for the training of dental assistants. The board may also define by rule the scope of practice of registered and nonregistered dental assistants. The board by rule may require continuing education for differing levels of dental assistants, as a condition to their registration or authority to perform their authorized duties. Any licensed dentist who shall permit such unlicensed assistant to perform any dental service other than that authorized by the board shall be deemed to be enabling an unlicensed person to practice dentistry, and commission of such an act by such unlicensed assistant shall constitute a violation... and

[MR 3100.8400, subp. 1] **Permissible duties.** Assistants may: perform all those duties not directly related with performing dental treatment or services on patients; retract a patient's cheek, tongue, or other parts of tissue during a dental operation; assist with the placement or removal of a rubber dam and accessories used for its placement and retention, as directed by an operating dentist during the course of a dental operation; remove such debris as is normally created or accumulated during the course of treatment being rendered by a licensed dentist during or after operative procedures by the dentist by the use of vacuum devices, compressed air, mouthwash, and water; provide any assistance, including the placement of articles and topical medication in a patient's oral cavity, in response to a specific direction to do so by a licensed dentist who is then and there actually engaged in performing a dental operation as defined in the act and who is then actually in a position to give personal supervision to the rendition of this assistance; and aid dental hygienists and registered dental assistants in the performance of their duties as defined in subpart 2 and part 3100.8700.

Additional confusion exists among practitioners and the public with regard to Certified Dental Assistants. Certification is a credential that is awarded by the Dental Assisting National Board following an exam. Eligibility to sit for the exam is based upon meeting educational and experiential pathways. In Minnesota, DANB certification in and of itself does not constitute an acceptable practice credential. Many of the state's Registered Dental Assistants are both Registered *and* Certified, however.

Should a title change for unregulated dental assistants be deemed necessary or desirable, options include:

1. **Retain the current commonly used reference of “unregistered dental assistants.”** This option may cause confusion among other oral health professionals and consumers if Registered Dental Assistants become Licensed Dental Assistants. However, health professionals and consumers are accustomed to the current verbiage, so the learning curve would be slight.
2. **Change title of nonregistered dental assistants.** Possible new titles include “Unlicensed Dental Assistant” or “Dental Aide.” Changing the title of nonregistered dental assistants could ameliorate confusion over the status of dental assistants both for consumers as well as other health care professionals.
3. **Require registration of unregulated dental assistants.** Requiring unregulated dental assistants to register on a roster would ensure that those professionals could be scrutinized as a group or individual and would place these individuals under the jurisdiction of the Board. In addition, maintaining registration of unregulated dental assistants would allow the public to be made aware of oral health professionals who otherwise have no credentials. This option provides an opportunity for consistency and appropriateness of title, as this group meets the criteria that are generally considered for registration.

PART III. CONCLUSIONS

The Minnesota Board of Dentistry recommends that the regulatory status of Registered Dental Assistants be changed from registration to licensure. After consultation with interested parties, the Board has reached the same conclusion reached in previous sessions: licensure is the appropriate level of regulation for Registered Dental Assistants. The Board has reached this conclusion because

1. Licensure is an appropriate level of regulation for Registered Dental Assistants because these professionals currently fulfill the criteria for regulation according to Statute 214.001, subdivision 2 and other recognized definitions of licensure.
2. Changing the credential to licensure could help to retain professionals in the field and encourage new entrants, providing hope of further addressing the access to care challenges facing many people throughout the state.

Some opponents have voiced various reasons for opposing a change from registration to licensure. The Board acknowledges these concerns, but continues to believe that the best interests of the public will be served by licensing Registered Dental Assistants.

The Board has not made recommendations on a new title or level of regulation for *nonregistered* dental assistants but instead presents options for the Legislature to consider. Options include:

1. Retain the current commonly used reference of “unregistered dental assistants.”
2. Change title of nonregistered dental assistants. Possible new titles include “Unlicensed Dental Assistant” or “Dental Aide.”
3. Require registration of unregulated dental assistants.

ENDNOTES

¹ 2003 First Special Session, MS §5, SF No 13, Section 10.

Sec. 10. [DENTAL ASSISTANT STUDY.]

The board of dentistry, in consultation with the Minnesota Dental Association, the Minnesota Dental Assistants Association, and the Minnesota Dental Hygienists' Association, shall make recommendations on the appropriate level of regulation for dental assistants and the appropriate terminology used to distinguish the different levels of training and education. The recommendations must include:

- (1) whether registered dental assistants should be licensed; and
- (2) whether the term "nonregistered dental assistants" should be changed to a term that better describes this position.

In making these recommendations, the board must consult with representatives of registered and nonregistered dental assistants and must review the issues in terms of the requirements of Minnesota Statutes, section 214.001, subdivision 2, and consumer safety and awareness. The board must report the recommendations to the chairs and ranking minority members of the house and senate health and human services policy committees by January 15, 2004.

² Hereinafter referred to as the "Board."

³ 2003 First Special Session, MS §5, op. cit.

⁴ Adapted from Margretta Madden Styles, EdD, RN, FAAN. *Quality Assurance Through Credentialing*, 2000.

⁵ Kara Schmitt and Benjamin Shimberg, *Demystifying Occupational and Professional Regulation: Answers to Questions You May Have Been Afraid to Ask*. Lexington, KY: Council on Licensure, Enforcement and Regulation, 1996.

⁶ Minnesota Office of the Legislative Auditor, *Occupational Regulation: A Program Evaluation Report*. 1999 available at <http://www.auditor.leg.state.mn.us/ped/pedrep/9905sum.pdf> (viewed Aug. 15, 2003).

⁷ Finocchio L J, Dower C M, McMahon T, Gragnola C M and the Taskforce on Health Care Workforce Regulation, *Reforming Health Care Workforce Regulation: Policy Considerations for the 21st Century*. San Francisco, CA: Pew Health Professions Commission, December 1995 at 1-2.

⁸ American Academy of Family Physicians, "Licensure/Relicensure, Definitions of," at <http://www.aafp.org/x6896.xml> (viewed Jan. 2, 2004).

⁹ Loehrke E, "Overview of the Regulation of Health Occupations," report to the Members of the Subcommittee on Licensing and Scope of Practice, Minnesota House of Representatives, November 19, 1997.

¹⁰ "Salary Survey," *Certified Press*, Dental Assisting National Board, Issue 37 Volume 3, Early Spring 2002.

¹¹ Review of Legislative Request: Health Occupation Review— Licensure of Dental Assistants (HF953/SF141), Minnesota Council of Health Boards, 2003-2004.

APPENDIX A – POSITIONS OF OTHER PARTIES

Minnesota Educators of Dental Assistants
Minnesota Dental Hygienists' Association
American Dental Assistants Association
Dental Assisting National Board, Inc.
Minnesota Dental Assistants Association
Minnesota Dental Association



MINNESOTA EDUCATORS OF DENTAL ASSISTANTS

March 20, 2000

Senator Jim Vickerman
226 Capitol
75 Constitution Avenue
St. Paul, MN 55156-1606

Dear Senator Vickerman:

I am writing this letter on behalf of the Minnesota Educators of Dental Assistants (MEDA). MEDA represents dental assistant educators from both the public and private dental assistant schools throughout Minnesota. Our organization is interested in the status of Senate File 1125, a bill that would change the credential of Minnesota dental assistants from "registration" to "licensure." After being approached by Kathy Zwieg, representative from the Minnesota Dental Assistants Association, the members of MEDA discussed and voted to support this bill.

The purpose of this bill is to bring consistency to the terms used to describe the status of dentists, dental hygienists and dental assistants in the state of Minnesota. Nationally the term registration means that a roster of practitioners is maintained by the state without any restrictions on the right to practice or the right to use a title. However, in order to become "registered" as a dental assistant an individual must meet certain educational and examination requirements. Dentists and dental hygienists must meet similar types of educational and examination requirements to become "licensed." The Minnesota Board of Dentistry regulates the duties permissible by dental hygienists and dental assistants. To bring consistency to the use of the terms "licensure" and "registration" as used by the Minnesota Board of Dentistry, the Minnesota Educators of Dental Assistants support this bill to change the credential of Minnesota dental assistants from "registration" to "licensure".

If you have any questions or desire additional information, please do not hesitate to contact me directly at 612.821.9536.

Sincerely,

A handwritten signature in black ink that reads 'Terry K. Anderson'. The signature is written in a cursive style with a large, stylized 'T' and 'A'.

Terry K. Anderson, DH, M.Ed.
President, Minnesota Educators of Dental Assistants

CC: Linda Boyum, President, Minnesota Dental Assistants Association
Teri Morin, Legislative Chairperson, Minnesota Dental Assistants Association

Enc: Permissible Duties



Minnesota
Dental
Hygienists'
Association

In acknowledgement of the high educational standards required for certification and registration of dental assistants, the Minnesota Dental Hygienists' Association therefore agrees with the Board of Dentistry on its position that registered dental assistants should be licensed to practice in Minnesota.

MDHA is however concerned with the fact that there appears to be inconsistency in the testing measures of the licensed dental health care professionals i.e. Dentists, Hygienists and possibly Registered Dental Assistants. With dentists and hygienists mandated to take written exams along with CRDTS and not having the dental assistant sit for a clinical board it would appear that the BOD will be setting precedence in which requirements are different for one group over another.

While the CRDTS exam is not a fair judge of a person's competence, it is the historical basis of how the Board of Dentistry assures competency. The MDHA would like to request that the Board of Dentistry readdress the mandatory CRDTS exam as a demonstration of competency for the dentists and hygienist or explore the idea of requiring dental assistants to sit for a practical exam to fulfill licensure requirements. While each candidate that sits for the CRDTS exam has successfully completed mandatory education and has met competency standards set by the Board of Dentistry via their educational facility there may be no need to designate one day of the students life to determine their future in their chosen profession. Standards and requirements **are** in place for each student to meet, for example, how many patients you need to successfully scale, polish, root plane, chart, take FMX on, impressions, sealants etc. and then on top of it all you find that one patient on one day of your life can make or break your career choice. Yes, testing is an important part of competency but now may be the time to look at the guidelines for testing and make changes to be consistent with each profession.

The dentist, hygienist and dental assistant must meet many of the same standards, graduation from an accredited program, successfully demonstrate competency, pass all exams and meet mandatory CE requirements to maintain their credentials. If the dental assistant education can validate competency-should not the dental hygiene programs and dental schools be able to validate competency?

It only speaks for itself that testing measures be uniform among the dental health care professionals. All of us can be held liable for our actions as professionals we should all carry the same licensure standards.

Respectfully submitted on behalf of the MDHA,

Sandy Nickolson
MDHA President



American Dental Assistants Association

September 20, 2003

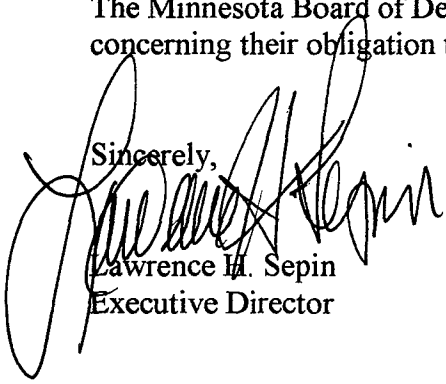
Marshall Shragg
Executive Director
Minnesota Board of Dentistry
University Park Plaza
2829 University Avenue SE,
Suite 450
Minneapolis, MN 55414

Dear Marshall:

This letter will serve as a strong recommendation and support for licensure for registered dental assistants in the state of Minnesota. Licensure not only helps to ensure the competency of dental assistants, but also enhances the delivery of oral health care to the public.

The Minnesota Board of Dentistry should be commended for their forward thinking concerning their obligation to provide quality dental care to the citizens of Minnesota.

Sincerely,



Lawrence H. Sepin
Executive Director

Cc: Kay Mosley, CDA, ADAA President\
Kristy Borquez, CDA, RDAEF, FADAA, ADAA President-elect



Dental Assisting National Board, Inc.

"Measuring Dental Assisting Excellence"

January 14, 2004

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Mr. Marshall Shragg, MPH, Executive Director
Minnesota Board of Dentistry
2829 University Avenue SE
Suite 450
Minneapolis, MN 55414

Dear Marshall:

I am aware that the Minnesota State Legislature is preparing to consider a report from the Minnesota Board of Dentistry recommending the licensure of dental assistants.

The Dental Assisting National Board, Inc. (DANB) supports the protection of the public through credentialing. The state regulation of professionals, particularly health care professionals, is aligned with DANB's mission.

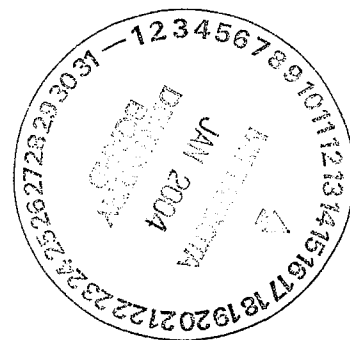
As recognized by the American Dental Association, since 1948 DANB has been the national testing and credentialing agency for dental assistants. Since DANB's mission is 'to promote the public good by providing testing and credentialing services to the dental community,' and because more than 30 states recognize or require that dental assistants pass DANB examinations as the basis for state registration or licensure or delegation of expanded duties, DANB is committed to assisting all states in pursuing the establishment of a baseline of professional dental assisting practice.

Licensure, certification, and registration can all be viewed as distinct types of credentials.

The concepts of certification, licensure, and registration lie within the umbrella term 'credentialing.'

Certification is the process by which a non-governmental agency or association attests that an individual has met certain predetermined standards specified by the certifying body. It assures the *public* that the individual has mastered a body of knowledge and acquired skills in a particular specialty. A periodic review and renewal process often accompanies certification.

Licensure is the process by which an agency of the state government grants permission to persons meeting pre-determined minimal competencies to engage in the practice of the profession and/or use particular titles to protect the public. Licensure is and should remain a state prerogative.



676 N. St. Clair
Suite 1880
Chicago, Illinois
60611

1-800-FOR-DANB
312/642-3368
Fax 312/642-1475
Fax 312/642-8507
www.danb.org
danbmail@danb.org

The term **registration**, when used in relation to dental assistants, has at least two meanings: one is the process by which individuals are assessed by an agency of state government and given status on a registry, attesting to the individual's ability and current competency (similar to licensure). Its purpose is to keep a continuous record of the past and current achievements of an individual. (This part of the definition is similar also to certification, only certification is issued by a non-governmental body.)

The other use of the term **registration** is simply a listing of practitioners, without educational, experiential, or competency-based prerequisites. For example, some states simply assess a fee to list a dental assistant on a 'registry,' terming them RDAs, without any proof of education, experience, or competency.

(Definitions adapted from "Credentialing as a Global Profession in Progress," Margretta Madden Styles, EdD, RN, FAAN, as published in Quality Assurance Through Credentialing, 2000.)

Licensure of dental assistants in Minnesota assists in protecting the public by recognizing practitioners who meet at least minimum competency standards. Many states use national certification as the basis for licensure. DANB has found empirically that employing DANB-Certified Assistants (Certified Dental Assistants (CDAs), Certified Orthodontic Assistants (COAs), Certified Dental Practice Management Administrators (CDPMAs), and Certified Oral and Maxillofacial Surgery Assistants (COMSAs)) decreases employee turnover and increases self-esteem, leading to increased practice productivity, as compared to their non-Certified counterparts.

The federal government also supports professional credentialing. The Workforce Investment Act (WIA) will provide principal assistance in employment, reemployment, and career assistance to citizens nationwide. The House WIA Bill passed in May 2003 and the Senate WIA Bill passed in November 2003. Final passage into law is expected in Spring 2004. The Senate WIA Bill includes two provisions to fund a Department of Labor study, including \$30 million allocated over the next three to four years to investigate the role of the benefits of credentialing and certification to businesses and employees, and the implications of credentialing to the services provided through the WIA.

Specifically, the Department of Labor will study the i) characteristics of a successful credentialing system, ii) the extent to which credentialing helps entry, retention, earnings, career advancement, and layoff aversion, and iii) the role of state and federal government in fostering the development of and the provision of information on the dissemination of credentialing and skills standards.

Marshall Shragg, MPH
Minnesota Board of Dentistry
January 14, 2004
Page 3

It is DANB's belief that states will want to be proactive by leading the charge to credential professionals and that the Minnesota State Legislature will wish to support the Minnesota Board of Dentistry in its proposal to license dental assistants.

Currently, there are 2,373 DANB Certified Assistants in the State of Minnesota: 2,343 CDAs, 10 COAs, 9 CDPMAs, and 11 COMSAs. DANB's CDA certification is comprised of three components – General Chairside Assisting (GC), Infection Control (ICE), and Radiation Health and Safety (RHS). Many assistants build their CDA credential by passing these components individually. In Minnesota, 1,445 dental assistants have passed the RHS component exam and 1,427 Minnesota assistants have passed the ICE component exam, and are on their way to DANB Certification.

If Minnesota determines that DANB certification will serve as the basis for dental assistant licensure, or for the provision of expanded duties, many dental assistants will already be qualified to meet future Minnesota Board of Dentistry requirements that might reflect DANB credentials.

Best wishes to you and your board as you report to the legislature regarding this issue of great public importance. Please contact me at 1-800-FOR-DANB, extension 428 or via email at cdurley@danb.org if I may be of further assistance.

Sincerely,



Cynthia C. Durley, MEd, MBA
Executive Director

Cc: DANB Board of Directors

DANB Staff Directors and Assistant Director, Test Administration and Recertification

Larry Sepin, Executive Director, American Dental Assistants Association (ADAA)

Kay Mosley, CDA, President, ADAA

Debra Von Alman, CDA, RDA, Vice President, ADAA

Natalie Kaweckyj, CDA, COA, CDPMA, COMSA, ADAA 7th District Trustee



MINNESOTA DENTAL ASSISTANTS ASSOCIATION

October 21, 2003

Randy Snyder, Executive Director
Board of Examiners of Nursing Home Administrators
University Park Plaza, Suite 440
Minneapolis, MN 55414

Mr. Snyder,

On behalf of the Minnesota Dental Assistants Association, we submit the attached information per the request of Senators Becky Lourey and Sheila Kiscaden. This is in regard to Senate File 141 and House File 953, Dental Assistant Licensure.

The Minnesota Dental Assistants Association is seeking to change the current credential for Dental Assistants in Minnesota from a "Registration" to a "Licensure".

The spokespersons are as follows:

Kathy Zwieg, RDA
(651) 238-2053
6701 Sherman Lake Road
Lino Lakes, MN 55038
Fax: 651-426-7362
Kzwieg@aol.com

Teri Morin, RDA
(763) 323-0678
12233 Champlin Drive
Champlin, MN 55316
Fax: 763-323-9102
tmorin@popp.net

Natalie Kaweckyj, RDA, FADAA
(763) 549-0414
3107 - 68th Avenue N
Minneapolis, MN 55429
Fax: 763-549-8249
nataliekaweckyj@hotmail.com

We would appreciate notification of meetings regarding our proposal and would be happy to be in attendance to answer any questions or provide further information.

Thank you in advance for your time and consideration. We look forward to your response.

Sincerely,

Kathy Zwieg
MDAA Legislative Chair

Teri Morin
MDAA Consultant to
the Board of Dentistry

Natalie Kaweckyj
MDAA Immediate
Past President

Cc: Pat Chromey, MDAA President
✓ Marshall Shragg, Executive Director, Board of Dentistry
Senator James Vickerman
Representative Bruce Anderson
Senator Becky Lourey
Senator Sheila Kiscaden



Minnesota Dental Association

2236 Marshall Avenue Suite 200, Saint Paul, Minnesota 55104 (651) 646-7454

Position Statement:

Minnesota Dental Assistant Regulatory Credential

Background

Dental assistants in Minnesota have been registered by the Board of Dentistry since 1977, allowing them to perform specifically listed patient care procedures under varying levels of dentist supervision. Some Minnesota dental assistants have chosen to obtain credentials from the Dental Assistant National Board (DANB) allowing them to use the title "certified." This certification is not required by Minnesota in order to become registered. The two credentials – certification and registration – are separate and distinct.

Dental assistants' credentials vary widely across the United States, with some states requiring no credential, to four states that use the term "licensure" in their statutes or rules relating to the dental assistant credential. By far, the most common title used by dental assistants is that of "registered dental assistant," denoting that the holder has received some form of training (and perhaps testing) in order to provide specific patient care services under dentist supervision.

This position statement is drafted in response to the 2003 legislative mandate to the Minnesota Board of Dentistry to submit a report to the legislature addressing two questions:

1. Should dental assistants' credential be changed from registration to licensure?
2. Should the title of "nonregistered dental assistant" be changed to better describe that position?

To date, these questions have been limited solely to changing titles: there has been no effort to change the entry requirements or allowable duties for those who hold the credential. Therefore, there appears to be no genuine need to advance this initiative.

I. Position Statement: Licensure vs. Registration for Dental Assistants

The MDA strongly believes that the most appropriate credential for dental assistants who perform expanded duties is that of registration, for reasons provided below.

Rationale

The Minnesota Dental Association recognizes that there are **various definitions** of licensure, registration and certification across state jurisdictions, credentialing organizations, and others. Discussions surrounding the appropriate credential for dental assistants have repeatedly acknowledged that **confusion exists** regarding the definitions of these terms. However, while some would contend that switching to licensure would eliminate confusion, the MDA believes the opposite: that changing the title would **add confusion**.

The American Dental Association opposes the licensure of dental assistants and sees benefit in at least **maintaining consistent terminology** across the United States, even in the face of inconsistencies in credentialing requirements and allowable duties. Such title consistency would not only benefit practicing dental health care professionals, but also the general public.

Numerous expanded duties for registered dental assistants have been added since 1977, with the most recent and significant being the addition of selected restorative procedures (which, although they include placing and adjusting fillings, *exclude* tooth preparation, an irreversible procedure that still must be performed by a dentist.) Although these new expanded restorative duties do require a clinical testing component, that **clinical examination is not performed by an external, objective testing agency** as is the case with dentists and dental hygienists. Unlike licensure requirements for dentists and dental hygienists, current registration requirements **do not include a clinical testing component**—nor should they.

The MDA's 2003 survey of a systematic random sample of currently Minnesota registered dental assistants revealed the following significant points:

- *only one-third* of the respondents wished to change their credential to licensure;
- *fewer than one-half* of the respondents who indicated they are members of the Minnesota Dental Assistants' Association – the group behind the legislative effort – said that they support this proposed change; and
- *slightly more than one-half* of respondents said that even if their credential is changed to licensure, they will continue to use the term "registered dental assistant" when referring to themselves.

The response rate of 32% is deemed very acceptable, particularly as it resulted from a single mailing with no follow-up effort. Also, the MDA holds that the responses would **not** be significantly different if more than ten percent of the registered dental assistant population had been sampled.

Although RDAs may legally perform a very small number of reversible procedures under the *general* supervision of a dentist (meaning the dentist is not present at the time the service is provided), the majority of services that RDAs may provide are done under *indirect or direct* supervision. In a practical sense, almost none of the typical duties performed by registered dental assistants require totally independent decision-making on the part of the assistant. **The dentist remains ultimately responsible for the services provided by the registered dental assistant.**

Given that the Minnesota Dental Practice Act and related Board rules provide adequate public protection by defining dental procedures that may be delegated under varying levels of dentist supervision, there is no legitimate need to impose the highest level of practice restriction on Minnesota's registered dental assistants, nor have compelling reasons been presented by supporters of this proposed credential change.

Finally, there exists a shortage of registered dental assistants in Minnesota. In 2003, the MDA sponsored the only legislative bill that addressed the dental access crisis. The MDA strongly believes that this legislation holds the potential to *restrict* entry to the profession, particularly if future changes include such things as requiring a clinical competency exam.

II. Position Statement: Appropriate Title/Credential for "Nonregistered Dental Assistants"

The Minnesota Dental Association supports the continued use of the term "nonregistered dental assistant" (or "chairside assistant") when referring to those who provide assistance to the dentist in his or her performance of dentistry, and who have not received formal dental assisting training.

Rationale

For many years, the commonly accepted terms "nonregistered dental assistant" and "chairside assistant" have been used to describe assistants who work directly with the dentist, but who perform duties that require no formal training and may be taught "on the job." This understanding is consistent with Minnesota Board of Dentistry Rules 3100.0100, Subp.4 and 3100.8400, which provides a fairly detailed description of the duties that may be performed by a non-credentialed dental assistant.

Introduction of another type or level of dental assisting - if only by virtue of creating a new title - seems unwarranted, and could lead to additional rulemaking

and regulation, both of which would be costly to those who are already subject to such regulation, i.e. dentists, dental hygienists and registered dental assistants. Moreover, simply changing a title is not likely to lend clarification to the legal distinction between "nonregistered" and "registered" dental assistants.

Conclusion

In both instances above, it is important to recognize that changing a credential should entail more than simply providing a group with a new title: To do otherwise diminishes the significance and real meaning of the credential.

APPENDIX B – AGENDA OF THE HALLOWEEN SUMMIT



MINNESOTA BOARD OF DENTISTRY

University Park Plaza, 2829 University Avenue SE, Suite 450

Minneapolis, MN 55414-3249 www.dentalboard.state.mn.us

Phone 612.617.2250 Fax 612.617.2260

MN Relay Service for Hearing Impaired 800.627.3529

HALLOWEEN SUMMIT ON DENTAL ASSISTANT LICENSURE

October 31, 2003

9:00 am

- | | |
|--|---|
| <input type="checkbox"/> Introduction and Background | Freeman Rosenblum, Board President
and Marshall Shragg, Board Executive Director |
| <input type="checkbox"/> Concerns and Considerations | Dick Diercks, MDA Executive Director |
| <input type="checkbox"/> Survey of Dental Assistants | Pat Glasrud, MDA Director of Policy Development |
| <input type="checkbox"/> Case for Licensure | Teri Morin/Kathy Zweig, MDAA |
| <input type="checkbox"/> Dental Hygiene Perspective | Rose Stokke, MDHA |
| <input type="checkbox"/> National Survey: Regulation | Natalie Kaweckyj, District Trustee to ADAA |
| <input type="checkbox"/> DANB Position | Karen Lauerman, DANB Director of Mktg/Comm |
| <input type="checkbox"/> Discussion | Audience Members/Presenters |
| <input type="checkbox"/> 10:45am <i>Break</i> | |
| <input type="checkbox"/> Unregistered Dental Assistants: Background and Discussion | |
| <input type="checkbox"/> Concluding Remarks | Freeman Rosenblum and Marshall Shragg |
| <input type="checkbox"/> 11:30am <i>Adjourn</i> | |

APPENDIX C – 2003 FISCAL NOTE

Fiscal Note – 2003-04 Session**Bill #:** S0141-0 **Complete Date:** 03/05/03**Chief Author:** VICKERMAN, JAMES**Title:** DENTAL ASSISTANTS LICENSURE

Fiscal Impact	Yes	No
State		X
Local		X
Fee/Departmental Earnings		X
Tax Revenue		X

Agency Name: Dentistry Board

This table reflects fiscal impact to state government. Local government impact is reflected in the narrative only.

Dollars (in thousands)	FY03	FY04	FY05	FY06	FY07
Expenditures					
-- No Impact --					
Less Agency Can Absorb					
-- No Impact --					
Net Expenditures					
-- No Impact --					
Revenues					
-- No Impact --					
Net Cost <Savings>					
-- No Impact --					
Total Cost <Savings> to the State					

	FY03	FY04	FY05	FY06	FY07
Full Time Equivalents					
-- No Impact --					
Total FTE					

Bill Description

SF 0141-0 – Dental Assistants Licensure

Assumptions

Currently the MN Board of Dentistry registers all dental assistants. This bill changes the title from Registered Dental Assistants to Licensed Dental Assistants. All fees and requirements remain the same. There is no fiscal impact to the MN Board of Dentistry.

Expenditure and/or Revenue Formula**Long-Term Fiscal Considerations****Local Government Costs****References/Sources**

FN Coord Signature: JULI VANGSNESS
Date: 03/03/03 Phone: 617-2120

EBO Comments

Agency indicated that forms and other office expenses currently are handled on an annual basis. This change wouldn't require any additional cost.

EBO Signature: TIM JAHNKE
Date: 03/05/03 Phone: 296-6237

APPENDIX D – ACCREDITED DENTAL ASSISTING CURRICULUM

Registered Dental Assistant

- Graduate from a school that is Board approved (and accredited by the Commission on Accreditation (ADA)).

OR:

- Graduate from a school that is ONLY ACCREDITED and not Board approved
- Have school submit course outlines, course content, laboratory/clinic performance requirements, with our checksheet, to determine if additional training is necessary.
- Complete additional training, if required.

OR:

- Graduate from a non-accredited, non-Board-approved program, OR DO NOT GRADUATE FROM ANY PROGRAM.
- Pass the Certification Exam administered by the Dental Assisting National Board (DANB).
- Complete an Expanded Functions course that includes training in radiology, at a Board approved program.

AFTER ONE OF THE ABOVE HAS BEEN COMPLETED:

- Pass:
 1. Minnesota Registration Exam (p/f).
 2. Minnesota Jurisprudence Exam (75%).
- Apply.

3100.1300 APPLICATION FOR REGISTRATION AS A REGISTERED DENTAL
ASSISTANT.

Any person desiring to be registered as a dental assistant shall submit to the board an application and credentials as prescribed by the act and shall conform to the following rules:

- A. An application on a form furnished by the board shall be completely filled out.
- B. The applicant shall furnish a certified copy or its equivalent of a diploma or certificate of satisfactory completion of a training program approved by the Commission on Accreditation or other program which, in the judgment of the board, is equivalent. If the curriculum of the training program does not include training in the expanded duties specified in part 3100.8500, the applicant must successfully complete a course in these functions which has been approved by the board.
- C. Submission of evidence of satisfactorily passing a board-approved registration examination designed to determine the applicant's knowledge of the clinical duties specified in part 3100.8500, subparts 1 to 1b.
- D. For identification purposes, the applicant shall furnish one notarized unmounted passport-type photograph, three inches by three inches, taken not more than six months before the date of the application.
- E. The applicant shall furnish evidence of good moral character satisfactory to the board.

DENTAL ASSISTANT

Associate of Applied Science Degree

Diploma



PROGRAM LENGTH

DENTAL ASSISTANT – AAS Degree 68 Credits

DENTAL ASSISTANT – Diploma 58 Credits

PROGRAM DESCRIPTION

The Dental Assistant Program is designed to provide an opportunity for students to acquire background knowledge and develop specialized skills for gaining employment in the dental profession. Specific training is provided in preparing instruments and materials, assisting the dentist at the chair, maintaining records and handling general office detail. Students are trained in the expanded functions performed by Registered Dental Assistants in Minnesota. Training in some laboratory procedures is also provided. This program is accredited by the American Dental Association Commission on Dental Accreditation.

A medical examination will be required prior to the start of the lab/clinic portion of the program. The ADA governing body has passed a resolution urging all education programs under their direction to encourage the vaccination of students and staff against infectious diseases. This includes vaccination for Hepatitis B. Students are strongly encouraged to have appropriate vaccinations or they will be asked to sign release forms.

CAREER OPPORTUNITIES

Graduates who have maintained a "C" grade in all courses, as well as an overall grade point average (GPA) of 2.0 or better in all of their classes, will be qualified to enter internship courses as well as write the state and national examinations.

A state registration certificate (RDA) and national certification (CDA) are awarded to graduates who successfully pass these examinations. Dental assistants are in demand in general and specialty practices as well as government institutions, public health clinics, sales, insurance companies, dental laboratories and educational institutions.

DENTAL ASSISTANT

AAS Degree

Technical Studies

DENT1400	Dental Sciences	3
DENT1408	Preclinical Dental Assisting	2
DENT1410	Infection Control in the Dental Environ.	1
DENT1420	Chairside Assisting I	4
DENT1434	Dental Materials I	2
DENT1440	Dental Radiology I	4
DENT1444	Expanded Functions I	4
DENT1460	Internship I	1
DENT2404	Dental Health	2
DENT2412	Dental Practice Management	3
DENT2424	Chairside Assisting II	4
DENT2440	Dental Materials II	2
DENT2446	Dental Radiology II	4
DENT2454	Expanded Functions II	4
DENT2460	Internship II	6

Core Studies

EMSC1480	Emergency Cardiac Care	1
HLTH1424	Patient Communications	1

General Education

COMM1300	Analytical Writing	4
COMM1320	Introduction to Speech Communication	3
CPTR1300	Exploring Computers	3
PSYC1300	Introduction to Psychology	3
SOC160	Principles of Sociology	3
HLTH 210	Nutrition	2
	Electives	2

Optional Studies

DENT2480	Dental Practice Act Review	1
DENT2484	Board Review	1

Estimated cost for uniforms, books, supplies, etc. **\$2,600**

PLEASE NOTE: All program plans are preliminary and curriculum may change without notice.

DENTAL ASSISTANT

Diploma

Technical Studies

DENT1400	Dental Sciences	3
DENT1408	Preclinical Dental Assisting	2
DENT1410	Infection Control in the Dental Environ.	1
DENT1420	Chairside Assisting I	4
DENT1434	Dental Materials I	2
DENT1440	Dental Radiology I	4
DENT1444	Expanded Functions I	4
DENT1460	Internship I	1
DENT2404	Dental Health	2
DENT2412	Dental Practice Management	3
DENT2424	Chairside Assisting II	4
DENT2440	Dental Materials II	2
DENT2446	Dental Radiology II	4
DENT2454	Expanded Functions II	4
DENT2460	Internship II	6

Core Studies

EMSC1480	Emergency Cardiac Care	1
HLTH1424	Patient Communications	1
HLTH1460	Nutrition	1

General Studies

BUSM1200	Microsoft Software OR	3
CPTR1300	Exploring Computers	3

DVRS1304	Diversity and Social Change OR	3
GBEH1300	Human Relations	3

GCOM1340	Written Communication OR	3
COMM1300	Analytical Writing	4

Optional Studies

DENT2480	Dental Practice Act Review	1
DENT2484	Board Review	1

Estimated cost for uniforms, books, supplies, etc. \$2,200

PLEASE NOTE: All program plans are preliminary and curriculum may change without notice.

DENTAL ASSISTANT COURSE DESCRIPTIONS (DENT)

DENT 1400 Dental Sciences

This course is designed to provide fundamental knowledge of embryonic development of the face and oral cavity, oral histology and development of the hard and soft tissues, and terminology related to the oral cavity and the teeth. Students will be introduced to the structures and functions of the head and neck as it relates to the oral cavity and dentistry.

Characteristics and functions of the adult human dentition and their supporting structures are studied. An introduction to basic body systems will also be covered.

Prerequisites: Acceptance into the Dental Assisting program.

(3 C: 3 lect/pres, 0 lab, 0 other)

DENT 1408 Preclinical Dental Assisting

This course will enable the dental assisting student to function effectively as part of the dental team in various medical and dental emergency situations.

Evaluation and understanding of medical and dental histories will be an integral part of this course.

Fundamentals of pharmacology and anesthesiology in the practice of dentistry will be taught.

Prerequisites: Acceptance into the Dental Assisting program.

(2 C: 2 lect/pres, 0 lab, 0 other)

DENT 1410 Infection Control in the Dental Environment

This course will enable the dental assisting student to function effectively as part of the dental health team within the concepts of infection control, bloodborne pathogen standards and hazard communication plans. It will also help to prepare the student to successfully write the ICE examination. This course provides essential background information on methods of sterilization and disinfection, barrier techniques, and infection control standards recommended by OSHA, CDC, Minnesota Board of Dentistry, and the American Dental Association. Various types

of microorganisms will be discussed as well as their mode of transmission. Topics will include terminology, disease transmission, sterilization and disinfection, occupational safety and infection control.

Prerequisites: Acceptance into the Dental Assisting program.

(1C: 1 lect/pres, 0 lab, 0 other)

DENT 1420 Chairside Assisting I

This course combines lecture and laboratory practice to help acquaint the dental assisting student to the basic fundamentals of working in the dental setting. It introduces students to basic equipment and supplies, instrumentation and infection control techniques used in dentistry, as well as concepts of four-handed and six-handed dentistry. Basic skills needed to work safely with the dentist and patient clinically are developed.

Prerequisites: DENT1400, DENT1408, DENT1410

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 1434 Dental Materials I

This course is designed to introduce the student to those materials and techniques utilized for various restorative and clinical applications. It includes both didactic information and laboratory practice with such products as gypsum, acrylic, impression materials, and other dental materials. Safety is emphasized.

Prerequisites: DENT1400, DENT1408

(2 C: 1 lect/pres, 1 lab, 0 other)

DENT 1440 Dental Radiology I

This course combines lecture and laboratory practice to introduce dental assisting students to knowledge and skills needed for working with dental radiology. Concepts including, but not limited to, patient positioning, films and film handling, film processing, paralleling vs. bisecting techniques, infection control and safety are discussed. Laboratory practice on

PLEASE NOTE: All program plans are preliminary and curriculum may change without notice.

phantoms, skulls and DXTTR is included.

Prerequisites: DENT1400, DENT1408

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 1444 Expanded Functions I

This course combines lecture and laboratory practice to help introduce dental assisting students to those advanced functions which the Minnesota Board of Dentistry allows registered dental assistant (RDA) to perform under Indirect Supervision of a licensed dentist. Minimal skill development is achieved on typodonts and models prior to patient experiences.

Prerequisites: DENT1400, DENT1408, DENT1410

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 1460 Internship I

This course is designed to allow the first year dental assisting student to transition into the second year by spending time in various specialty and general dentistry practices for observation during the summer between years. Students will spend approximately four (4) hours in each type of specialty office, as well as in both a smaller and a larger general dentistry office and a full service dental laboratory.

Prerequisites: Successful completion of all first semester and second semester technical courses.

(1 C: 0 lect/pres, 0 lab, 1 other)

DENT 2404 Dental Health

This course will provide an overview of dentistry from a preventative point of view. Current concepts of disease prevention will be discussed as they relate to diseases and pathologic conditions that affect hard and soft tissues of the oral cavity, head and neck. Development of appropriate personal oral hygiene practices, as well as accepted patient teaching techniques, is included.

Prerequisites: DENT1420

(2 C: 2 lect/pres, 0 lab, 0 other)

DENT 2412 Dental Practice Management

This course is designed to acquaint students with legal and ethical issues vital in dentistry today. It will expand into the procedures utilized in the management of the business office. Attention is given to appoint-

ment control, recall, telephone techniques, financial records maintenance, third-party reimbursement forms, office manual procedures, and supply inventory.

Prerequisites: GBEH1300 or equivalent

(3 C: 3 lect/pres, 0 lab, 0 other)

DENT 2424 Chairside Assisting II

This course combines lecture and laboratory/clinical practice to advance the student's skill development by expanding on restorative procedures, concepts and techniques used in various dental specialties and four-handed dentistry. Students assist each other, dental hygiene students, instructors and dentists in their skill development. Aseptic technique and patient safety principles are developed to a high level.

Prerequisites: DENT1420

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 2440 Dental Materials II

This course is designed to introduce the student to those materials and techniques utilized for various restorative and clinical applications. It includes both didactic information and laboratory practice with such products as cements, amalgams, composites, and other materials.

Prerequisites: DENT1434

(2 C: 1 lect/pres, 1 lab, 0 other)

DENT 2446 Dental Radiology II

This course combines lecture and laboratory practice to expand on the dental assisting students' knowledge and skills working with dental radiology. Concepts including, but not limited to, x-ray physics, production and safety are discussed. Clinical practice is expanded to include patients.

Prerequisites: DENT1440

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 2454 Expanded Functions II

This course combines lecture and laboratory/clinical practice to expand on the students' current knowledge and skills and to introduce those advanced functions which the Minnesota Board of Dentistry allows registered dental assistants (RDA) to perform under Direct Supervision of a licensed

PLEASE NOTE: All program plans are preliminary and curriculum may change without notice.

dentist. Minimal skill development having been achieved on typodonts and models is now expanded to patient experiences.

Prerequisites: DENT1444

(4 C: 2 lect/pres, 2 lab, 0 other)

DENT 2460 Internship II

This experience will consist of three rotations in different extramural assignments. The first assignment of approximately 6 weeks (120 hours MINIMUM) will be in a general practice dental office. The second assignment of approximately 6 weeks (120 hours MINIMUM) will be in a second (different) general practice dental office. The third assignment of approximately 3 weeks (60 hours MINIMUM) will allow the student to choose between either returning to their first office OR to intern in the specialty practice of their choice.

The intent of each extramural assignment is to allow the student to further develop speed and accuracy of the skills learned throughout the program. Integration of knowledge and skills to a job entry level by hands-on experience and evaluation of competence is expected. The student is given the opportunity to work with one or more dentists and staff in a real-life situation for each rotation.

Prerequisites: DENT1460 and meet ADA requirements for internship

(6 C: 0 lect/pres, 0 lab, 6 other)

DENT 2480 Dental Practice Act Review

This OPTIONAL course is a guided process to help the student to review the Minnesota Dental Practice Act and prepare to write the jurisprudence test required on that document by state law.

Prerequisites: None

(1 C: 1 lect/pres, 0 lab, 0 other)

DENT 2484 Board Review

This OPTIONAL course is a guided process to help the dental assistant student to review and prepare to write both the state (Registration) and national (Certification) board examinations.

Prerequisites: None

(1 C: 1 lect/pres, 0 lab, 0 other)

PLEASE NOTE: All program plans are preliminary and curriculum may change without notice.

APPENDIX E – SURVEY OF DENTAL REGULATION

**SURVEY OF DENTAL REGULATION
OF DENTAL ASSISTANTS
IN THE UNITED STATES**

CLASSIFICATION OF CREDENTIALS

CLASSIFICATIONS OF DENTAL ASSISTANTS

EXPANDED FUNCTIONS

DEGREES OF SUPERVISION

OCTOBER 2003

Natalie Kaweckyj, ADAA 7th District Trustee

Registered Dental Assistant

Certified Dental Assistant

Certified Dental Practice Management Administrator

Certified Orthodontic Assistant

Certified Oral & Maxillofacial Surgery Assistant

Fellow of the American Dental Assistants Association

Immediate Past President of Minnesota Dental Assistants Association

STATES WITH NO REGULATION OF DENTAL ASSISTANTS
(Licensure, Registration or Certification)
(DOES NOT INCLUDE SEPARATE REQUIREMENTS FOR RADIOGRAPHY)

**ALABAMA
ALASKA
COLORADO
CONNECTICUT
DELAWARE
DISTRICT OF COLUMBIA
HAWAII
ILLINOIS
INDIANA
KENTUCKY
LOUISIANA
MAINE
MISSOURI
MONTANA
NEBRASKA
NEVADA
NEW HAMPSHIRE
NEW MEXICO
UTAH
VIRGINIA
WASHINGTON
WEST VIRGINIA
WISCONSIN
WYOMING**

ALABAMA

Name of the agency that provides the regulation:

Board of Dental Examiners of Alabama
5346 Stadium Trace Parkway, Suite 112
Hoover, AL 35244
(205) 985-7267
www.dentalboard.org

Board structure: five dentists, one hygienist

The type/level of regulation: none

The legislative scope of practice: Dental Assistants work under the Direct Supervision of a duly licensed dentist.

Continuing education: none

No special state examination to expose radiographs. Dental Assistants work under the direct supervision of a duly licensed dentist as defined by the Alabama Board Rule. Neither certification, nor registration is required to perform expanded function duties.

Expanded Functions Allowed under **DIRECT SUPERVISION:**

Alabama Duties	Minnesota Supervision
Preliminary charting	X
Application of Fl_2 , Desensitizing agents, astringents	Indirect
Placement/Removal of Rubber Dam	Indirect
Placement/Removal Periodontal Dressings	Indirect
Placement/Removal Alveolar Socket Dressings	N/A
Construct/Remove interim restorations with hand instruments only	N/A
Construct/Place temporary crowns (excluding stainless)	Direct - limited
Contour stainless crowns (but not cementing)	Direct (with Board Approved Course)
Pre-fit/Pre-contour Ortho appliances intra/extra orally	N/A
Removal of excess cement from permanent restorations and ortho appliances with hand instruments	Indirect
Impressions for diagnostic purposes	Indirect
Placement of wedges and removal of matrices	Direct
Take and record case history, vital signs	X
Removal of sutures (excluding wire sutures)	Indirect
Expose dental radiographs	Indirect
Oral hygiene instruction	N/A
Placement of cavity liners (excluding pulp capping)	Indirect
Assist in the administration of N_2O and O_2	Indirect
Insert in the mouth patient wax models of dentures, partial dentures or any other structures and make adjustments extra orally per dentist instructions with the final approval being given by the dentists prior to being sent to the lab	N/A
Insert in the mouth the finished product of dentures, partial dentures, removable ortho appliances, prosthetic appliances, bridges or other structures and make adjustments outside the mouth pursuant to dentist's directions. The dentist shall make a final inspection before the appliances leave the dental office. The dentist makes final placement and cementation.	N/A
Apply reversible liners and bases to dentures, partial dentures, removable ortho appliances, prosthetic appliances, bridges or other structures orthodontic appliances. The dentist must make the insertion.	N/A

ALASKA

Name of the agency that provides the regulation:

Alaska State Board of Dental Examiners
 Division of Occupational Licensure
 P.O. Box 110806
 Juneau, AK 99811-0806
 (907) 465-2542
www.dced.state.ak.us/occ

Board structure: six dentists, 2 dental hygienists, 1 public member

The type/level of regulation: none

The legislative scope of practice: Dental Assistants work under the Direct Supervision of a duly licensed dentist.

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

COLORADO

Name of the agency that provides the regulation:

Colorado State Board of Dental Examiners
 1560 Broadway, Suite 1310
 Denver, CO 80202
 (303) 894-7758
www.dora.state.co.us/DENTAL

Board structure: five dentists, two dental hygienists, and three members from the public at large

The type/level of regulation: none

The legislative scope of practice: varies from personal supervision for coronal polishing, to general supervision for final impressions of dentures. Permit or DANB RHS exam completion needed for radiograph exposure.

Regulatory requirements

Continuing education: none

CONNECTICUT

Name of the agency that provides the regulation:

Connecticut State Dental Commission/ Dept. of Public Health
410 Capitol Ave MS #12 APP
P.O. Box 340308
Hartford, CT 06134-0308
(860) 509-7590
www.dph.state.ct.us

Board structure: Six practicing dentists, three public members

The type/level of regulation: none

The legislative scope of practice: a dentist may delegate to a dental assistant any such dental procedures he may deem advisable, performed under his Direct supervision. The DANB RHS exam is required to expose radiographs in Connecticut.

Regulatory requirements

Continuing education: none

COLORADO DUTIES (not limited to)	MINNESOTA SUPERVISION
Smoothing, polishing natural and restored teeth	N/A
Application of fluoride	Indirect
Oral charting (not perio)	X
Apply topical anesthetic	Indirect
Take preliminary impressions	Indirect
Take final impressions	N/A
Bite registration (including vertical dimensions)	N/A
Tooth selection for dentures	N/A
Wax-up procedures for the manufacturing of dentures	N/A
Denture adjustments	N/A
Denture repairs	N/A
Denture relines	N/A

DELAWARE

Name of the agency that provides the regulation:

Delaware Division of Public Health
Delaware State Board of Dental Examiners
861 Silver Lake Blvd., Cannon Bldg. Suite 203

Dover, DE 19904
 (302) 739-2711
www.state.de.us/research/profreg/dental.htm

The type/level of regulation: none; state certificate required to expose radiographs.

The legislative scope of practice: There are three recognized levels of supervision:

Direct Supervision - The dentist is present in the office, personally examines the patient and specifically authorized the work to be performed. The dentist checks the work before the patient leaves the office.

Indirect Supervision - A dentist is present in the office and generally authorizes the work to be performed. The dentist may examine the patient, either before or after work is performed. The dentist is available for consultation during the patient visit.

General Supervision - A dentist may or may not be present in the office while the work is performed. The dentist authorizes the work to be performed. Emergency care and consultant services are provided by an "on-call" dentist not present in the treatment facility, if the primary dentist is not present.

A dentist may delegate any duty to competent dental auxiliary personnel except:

- Diagnosis
- Treatment planning
- Cutting of soft or hard tissues
- Any intra oral procedures that would lead to the fabrication of an appliance

Continuing education: none

DISTRICT OF COLUMBIA

Name of the agency that provides the regulation:

Department of Health – DC Board of Dentistry
 825 N. Capitol St., NE-Rm. #2224
 Washington, DC 20002
 (202) 442-9431
www.dchealth.dc.gov

Board structure: five licensed dentists, one licensed dental hygienist, and one consumer professional.

The type/level of regulation: none

The legislative scope of practice: dental assistants are not mentioned in the practice act

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

Continuing education: none

HAWAII

Name of the agency that provides the regulation:

Hawaii State Board of Dental Examiners
Dept. of Commerce & Consumer Affairs
P.O. Box 3469
Honolulu, HI 96801
(808) 586-3000
www.state.hi.us/dcca/pvl/areas_dentist.html

Board structure: eight dentists, two dental hygienists, and two public members

The type/level of regulation: none

The legislative scope of practice: Direct Supervision

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

Dental Assistants in Hawaii may perform the following supportive dental procedures under **DIRECT SUPERVISION** of a licensed dentist:

HAWAII DUTIES	MINNESOTA SUPERVISION
Retraction	X
Placement and removal of rubber dam	Indirect
Mouth mirror inspection of the oral cavity	X
Remove debris with vacuum devices	X
Provide assistance to dentist	Varied
Remove post extraction dressings	N/A
Suture removal	Indirect
Placement of matrices	Direct
Removal of cement after permanent placement with hand instruments	Indirect

Impressions for study casts	Indirect
Place non aerosol and non-caustic anesthetic agents	Indirect
Place and remove orthodontic separators	Indirect
Take intra-oral measurements for ortho procedures	N/A
Check for loose bands and bonded brackets	General
Placement and removal of ligature ties	Indirect
Removal of arch wires	General
Fitting and removal of head appliances	N/A
Placement and removal of inter-arch elastics	N/A
Preliminary selecting and sizing of bands	Indirect
Oral hygiene instruction	N/A
Expose radiographs	Indirect
Take intra-extra-oral photographs	N/A
Take and record vital signs	X
Relate pre- and post-operative instructions	N/A
Monitor nitrous oxide/oxygen unit	Indirect

ILLINOIS

Name of the agency that provides the regulation:

Illinois State Board of Dentistry
 Dept. of Professional Regulation & Education
 320 W Washington, 3rd Floor
 Springfield, IL 62786
 (217) 782-7645
www.dpr.state.il.us/WHO/dent.asp

Board structure: eight dentists, two dental hygienists, and one public member

The type/level of regulation: None

The legislative scope of practice: Direct Supervision

Continuing education: None

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties, with the exception of the last three duties.

PROHIBITED DUTIES	MINNESOTA SUPERVISION
Diagnosis and treatment planning	Prohibited
Removal of, restoration of,	Prohibited Direct (with Board Approved Course)

or addition to the hard or soft tissues of the oral cavity	Prohibited
Any and all correction of malformation of teeth or of the jaws	Prohibited
Administration of anesthetic (except topical)	Prohibited
Removal of calculus from teeth	Prohibited
Taking final impressions	Prohibited
Oral prophylactic procedures	Prohibited
Making denture adjustments	Prohibited
Condensing or carving amalgam restorations	Direct (with Board Approved Course)
Placing and finishing composite restorations	Direct (with Board Approved Course) – Limited
Permanently cementing permanent crowns and bridges	Prohibited
Permanently recementing permanent crowns and bridges	Prohibited
Placement of any chemotherapeutic agent for the management of periodontal disease	Prohibited
Applying cavity bases	N/A
Cementing bands and/or bonding brackets	N/A
Performing supra- or subgingival scaling	Prohibited
Performing pulp vitality testing	N/A

EXPANDED FUNCTIONS WITH ADDITIONAL TRAINING^A	MINNESOTA SUPERVISION
Monitoring Nitrous Oxide ¹	Indirect
Coronal polishing ²	Indirect
Pit and fissure sealants ³	Indirect (with Board approved course)

A: must be at least 18 years of age and has 1000 hours of clinical dental assisting experience or has graduated from an accredited dental assisting program, or is currently certified as a Certified Dental Assistant by the Dental Assisting National Board.

- 1: 12 hour course on nitrous oxide monitoring, current CPR certification
- 2: 6 hour course on coronal polishing (4 hours of didactic, 2 hours clinical)
- 3: Sealant course of at least 2 hours didactic, 2 hours clinical

INDIANA

Name of the agency that provides the regulation:

Indiana Indoor and Radiologic Health
Indiana State Dept. of Health
2 Meridian Street, 5th Floor
Indianapolis, IN 46204
(317) 233-7565

Board structure: eight dentists, one dental hygienist, and one public member

The type/level of regulation: Radiology license; none for dental assistants

The legislative scope of practice: direct supervision –

dentists delegate whatever duties they feel the dental assistant is qualified/capable to do.

Continuing education: none

KENTUCKY

Name of the agency that provides the regulation:

Kentucky Board of Dentistry
10101 Linn Station Rd. #540
Louisville, KY 40223
(502) 423-0573
<http://dentistry.state.ky.us>

The type/level of regulation: none; radiology course certificate to expose radiographs

The legislative scope of practice: Direct Supervision

Continuing education: none

KENTUCKY ALLOWABLE DUTIES (Direct Supervision)	MINNESOTA SUPERVISION
Placing, condensing, carving amalgams	Direct (with Board approved course
Topical anesthetic application	Indirect
Applying cavity liners and bases	N/A
Bonding bands and brackets	N/A
Cement removal from coronal surfaces	Indirect
Placing and finishing composite restorations	Direct (with Board approved course)
Fabricating temporaries	Direct
Placing temporaries	Direct
Removing temporaries	Direct
Charting restorations/obvious lesions	X
Fluoride	Indirect
Preliminary impressions (not for ortho)	Indirect
Place/remove matrices	Direct
Monitor Nitrous	Indirect
Coronal Polish	Indirect

Pulp vitality testing	N/A
Place/remove periodontal dressings	Indirect
Exposing Radiographs	Indirect
Placing/packing/removing retraction cords	N/A
Placing/removing rubber dams	Indirect
Sealants	Indirect (with Board approved course)
Suture removal	Indirect

LOUISIANA

Name of the agency that provides the regulation:

Louisiana State Board of Dentistry
 365 Canal Street, Suite 2680
 New Orleans, LA 70130
 (504) 568-8574
www.lsbd.org

Board structure: eleven dentists, one dental hygienist

The type/level of regulation: none

The legislative scope of practice: dental assistants and expanded duty dental assistants both work under direct supervision

Continuing education: none

A dental assistant is one who is employed by, works in the office of a licensed, practicing dentist, and performs the duties authorized by the Louisiana State Board of Dentistry under the direct on-premises supervision, direction and responsibility of the dentist. A dental assistant may only perform the following under the direct on-premises supervision of the dentist who employs her or him as directly ordered by the dentist:

LOUISIANA DUTIES	MINNESOTA SUPERVISION
Serve as the dentist's chair side assistant	Varied
Take and develop dental radiographs Intra-oral photographs	Indirect N/A
Take and record pulse, blood pressure and temperature	X
Apply non-aerosol topical anesthetics	Indirect
Apply topical fluorides	Indirect
Chart existing restorations and missing teeth, floss teeth and make	X

preliminary inspections of the mouth and teeth with a mouth mirror and floss only	
Apply non-endodontic oxygenating agents	Indirect
Apply desensitizing agents	Indirect
Receive removable prostheses for cleaning or repair work	N/A
Place a removable retaining device in the mouth of a patient	N/A
Place or remove ligatures, cut and tuck ligatures, remove tension devices and any loose or broken bands or arch wires	General
Place or remove preformed crowns or bands for determining size only when recommended by the dentist and only under his or her supervision	Indirect
Remove cement from dental restorations and appliances, with hand instruments, limited to the clinical crown	Indirect
Make dental plaque smears	N/A
Give intra-oral instructions and demonstrations on oral hygiene procedures	N/A
Fabricate and remove interim crowns or bridges (interim meaning temporary while permanent restoration is being fabricated)	Direct
Condition teeth prior to placement of orthodontics bands or brackets	Direct
Remove final impressions	N/A
Place or remove temporary orthodontic separating devices	Indirect
Apply and remove rubber dams	Indirect
Make preliminary study model impressions and opposing model impressions	Indirect
Remove sutures	Indirect
Remove post-extraction dressing	N/A
Remove surgical ligature ties	N/A

Exception: A dental assistant who has been employed by a licensed, practicing dentist and has worked as a dental assistant prior to July 30, 1992, may continue performing the following duties without registering as an expanded duty dental assistant. These duties must also be performed under the direct, on-premises supervision of the dentist:

GRANDPARENTED DUTIES	MINNESOTA SUPERVISION
Apply cavity liners, excluding capping of exposed pulpal tissue	N/A
Place, wedge or remove matrices for restoration by the dentist	Direct
Place and remove periodontal dressings, except for the placement of the initial dressing	Indirect
Place and remove retraction cords	N/A

A person licensed to practice dentistry in the State of Louisiana may delegate to any expanded duty dental assistant any chairside dental act that said dentist deems reasonable, using sound professional judgment. Such act must be performed properly and safely on the patient and must be reversible in nature. Furthermore, the act must be under the direct supervision of the treating dentist.

MAINE

Name of the agency that provides the regulation:

Maine Board of Dental Examiners
143 State House Station/Two Bangor Street
Augusta, ME 04333-0143
(207) 287-3333
www.mainedental.org

Board structure: five dentists, one dental hygienist, one denturist and one representative of the public

The type/level of regulation: none – although Certified Dental Assistants are recognized

The legislative scope of practice: Dental Assistants – general and direct supervision depending upon the duty; Certified Dental Assistants – general supervision

Continuing education: None

General Supervision: "General supervision" shall mean that the dentist is not required to be in the dental office at the time the procedures are being performed on a patient of record.

- B. Direct Supervision: "Direct supervision" shall mean that the dentist must be in the dental office at the time the duties under his/her supervision are being performed. In order to provide direct supervision of patient treatment, the dentist must at least diagnose the condition to be treated, authorize the treatment procedure prior to implementation, and examine the condition after treatment and prior to the patient's discharge.
- C. A "dental assistant" is a person who assists the dentist and performs the duties listed in Parts 2 and 3 of this Chapter.
- D. A "certified dental assistant" ("C.D.A."), is a dental assistant who has successfully passed a certification examination administered by the Dental Assistants' National Board.

Section 2. GENERAL SUPERVISION OF DENTAL ASSISTANTS.

A dental assistant may perform the following duties under the general supervision of a dentist:

MAINE DUTIES	D A	C D A	MINNESOTA SUPERVISION
Retract lips, cheek, tongue and other tissue parts	G	G	General
Take intra-oral photographs	G	G	N/A
Expose and process radiographs, but only if licensed as a Dental Radiographer	G	G	Indirect
Irrigate and aspirate the oral cavity	G	G	General
Take dental plaque smears for microscopic inspection and patient education	G	G	N/A
For the purpose of eliminating pain or discomfort, remove loose, broken or irritating orthodontic appliances	G	G	General
Take and record the vital signs of blood pressure, pulse and temperature	G	G	X
Perform dietary analyses for dental disease control	G	G	N/A
Give oral health instructions	G	G	N/A
Take impressions for study casts	G	G	Indirect
Remove gingival retraction cord	D	D	N/A
Select and try in stainless steel or other preformed crowns for insertion by the dentist	D	D	Indirect
Remove sutures	D	G	Indirect
Place or remove temporary separating devices	D	D	Indirect
Irrigate and dry root canals	D	D	Indirect
Take impressions for single-arch athletic mouth guards and for custom fluoride trays	D	D	Indirect
Apply liquids, pastes and gel topical anesthetics	D	D	Indirect
Place and remove wedges	D	D	Direct
Place and remove rubber dams	D	D	Indirect
Recement temporary crowns with temporary cement	D	D	General (limited)
Place and remove matrix bands	D	D	Direct
Place, hold or remove celluloid and other plastic strips prior to or subsequent to the placement of a filling by the dentist	D	D	X
Apply cavity varnish	D	D	N/A
Deliver, but not condense or pack, amalgam or composite restoration material	D	D	X
Take impressions for opposing models and retainers	D	D	Indirect
Remove orthodontic arch wires and tension devices and any loose bands or bonds, but only as directed by the dentist	D	D	N/A
Place wires, pins and elastic ligatures to tie in orthodontic arch wires that have been fitted and approved by the dentist at the time of insertion	D	D	Indirect

Perform preliminary selection and fitting of orthodontic bands	D	D	Indirect
Prepare tooth sites and surfaces with a rubber cup and pumice for banding or bonding of orthodontic brackets	D	D	Direct
Remove excess cement from the supragingival surfaces of teeth	D	G	Indirect
Reapply, on an emergency basis only, orthodontic brackets	D	D	General
Place elastics and/or instruct in their use	D	D	Indirect
Place temporary fillings on an emergency basis, provided that the patient is informed of the temporary nature of the fillings	-	G	General

MISSOURI

Name of the agency that provides the regulation:

Missouri Dental Board
 3605 Missouri Boulevard
 P.O. Box 1367
 Jefferson City, MO 65102
 (573) 751-0040
www.ded.state.mo.us/regulatorylicensing/pofessionalregistration/

Board structure: five dentists, one dental hygienist, and one public member

The type/level of regulation: none; Certification through the Dental Assisting National Board is recognized

The legislative scope of practice: Direct Supervision

Continuing education: none

Dental auxiliary. Either a dental assistant or certified dental assistant as defined in subsections (1)(B) and (C).

(D) Direct supervision. The following conditions must be satisfied for direct supervision to apply:

1. The dentist is in the dental office or treatment facility;
2. The dentist has personally diagnosed the condition to be treated;
3. The dentist has personally authorized the procedures;
4. The dentist remains in the dental office or treatment facility while the procedures are being performed by the dental auxiliary; and
5. The dentist evaluates the performance of the dental auxiliary before the dismissal of the patient.

(E) Proof of competence. Any written document, such as a diploma, a certificate of mastery, or a letter from an approved competency testing agent stating that the dental auxiliary has successfully passed the competency testing for specific functions after having.

1. Completed an approved course. A course of study offered by an accredited school of dentistry, dental hygiene, or dental assisting or any course approved by the Missouri Dental Board; and

2. Passed an approved competency examination. An examination testing essential knowledge of specifically itemized functions constructed, administered and evaluated by an accredited school of dentistry, dental hygiene, or dental assisting, the Dental Assisting National Board, or any other competency-testing agent approved by the Missouri Dental Board.

(3) A dental assistant or certified dental assistant may assist the administration of and monitor nitrous oxide analgesia under direct supervision if s/he.

(A) Has successfully completed formal certified training in a course approved by the Missouri Dental Board; and

(B) Has successfully passed an approved competency test regarding the clinical and didactic training; or

(C) Has been certified in another state to assist the administration and monitor nitrous oxide subsequent to equivalent training and testing. The dental assistant may qualify to perform this function by presenting proof of competence of this equivalent training and testing to the Missouri Dental Board;

(D) The responsibility of the dental assistant or certified dental assistant shall be to provide the Missouri Dental Board proof of competence; and

(E) Upon presentation to the dental board of proof of competency that the dental assistant or certified dental assistant has complied with the requirements imposed by subsections (3)(A), (B) or (C) of this rule, and remitted the appropriate fee as specified in 4 CSR 110-2.170, the Missouri Dental Board will issue the appropriate certification to the dental assistant or certified dental assistant.

(4) A currently licensed dentist may delegate, under direct supervision, functions listed in subsection (4)(D) of this rule to a certified dental assistant or a dental assistant subsequent to submission to the Missouri Dental Board of the following satisfactory proof of competence:

(A) After June 1, 1995, all certified dental assistants graduating from accredited dental assisting programs in Missouri will have competency testing for all functions listed in subsection (4)(D) of this rule and may be delegated those functions by a currently licensed dentist;

(B) Certified dental assistants graduating prior to June 1, 1995, or from programs outside Missouri, may be delegated the functions in subsection (4)(D) of this rule with proof of competence issued by their educational institutions and may be delegated other specific functions if they have completed an approved course, passed an approved competency examination, and can provide proof of competency as defined in subsection (1)(D);

(C) Dental assistants, as defined in subsection (1)(B), may be delegated any specific function listed in subsection (4)(D) of this rule if they have successfully completed a basic dental assisting skills mastery examination approved by the board, completed an approved course, passed an approved competency examination, and can provide proof of competence as defined in subsection (1)(D);

(D) Functions delegable upon successful completion of competency testing are.

MISSOURI DUTIES	MINNESOTA SUPERVISION
Placement of post-extraction and sedative dressings	N/A
Placing periodontal dressings	Indirect
Size stainless steel crowns	Direct (with Board approved course)
Placing and condensing amalgam for Class I, V, and VI restorations	Direct (with Board approved course)
Carving amalgam	Direct (with Board approved course)
Placing composite for Class I, V, and VI restorations	Direct (with Board approved course) limited
Polishing the coronal surfaces of teeth (air polisher)	Indirect
Minor palliative care of dental emergencies (place sedative filling)	N/A
Preliminary bending of arch wire	N/A
Removal of orthodontic bands and Bonds	N/A
Final cementation of any permanent appliance or prosthesis	N/A
Minor palliative care of orthodontic emergencies (that is, bend/clip wire, remove broken appliance)	General
Making impressions for the fabrication of removable prosthesis	N/A
Placement of temporary soft liners in a removable prosthesis	N/A
Place retraction cord in preparation for fixed prosthodontic impressions	N/A
Making impressions for the fabrication of fixed prosthesis	N/A
Extra-oral adjustment of fixed prosthesis	N/A
Extra-oral adjustment of removable prosthesis during and after insertion	N/A
Placement and cementation of orthodontic brackets and/or bands	N/A

Upon request by the Missouri Dental Board, the licensed and supervising dentist must provide copies of proof of competence of dental auxiliaries.

The licensed dentist is responsible for determining the appropriateness of delegation of any specific function based upon knowledge of the skills of the auxiliary, the needs of the patient, the requirements of the task and whether proof of the competence is required.

MONTANA

Name of the agency that provides the regulation:

Montana Board of Dentistry
Department of Labor and Industry
P.O. Box 1728
Helena, MT 59624-1728
(406) 841-2390
www.discoveringmontana.com/dli/bsd

Board structure: five dentists, one denturist, two dental hygienists, and two public members. One of the public members must be a senior citizen.

The type/level of regulation: Specific testing requirements for radiology

The legislative scope of practice: Direct Supervision

Continuing education: none

MONTANA DUTIES (Direct Supervision) (not limited to)	MINNESOTA SUPERVISION
Exposing radiographs	Indirect
Monitoring nitrous	Indirect
Impressions for study casts	Indirect
Removing sutures	Indirect
Removing periodontal dressings	Indirect
Applying topical anesthetic	Indirect
Oral hygiene instructions	N/A
Applying topical fluoride	Indirect
Removing excess cement from coronal surfaces	Indirect
Place/remove rubber dam	Indirect
Place/remove matrices	Direct
Polishing amalgam restorations	N/A
Placing/removing temporary restoration with hand instruments	Direct
Sealants	Indirect (with Board approved course)
Coronal polishing	Indirect

Nebraska

Name of the agency that provides the regulation:

Nebraska Board of Dentistry
 Nebraska State Office Building
 HHS Regulation and Licensure
 Credentialing Division
 301 Centennial Mall South, 3rd floor
 P.O. Box 94986
 Lincoln, NE 68509-4986
 (402) 471-2115
www.hhs.state.ne.us/crl/crlindex.htm

The type/level of regulation: none; radiology requirements

The legislative scope of practice: Supervision varies by duty performed from general supervision to direct supervision

Continuing education: none

NEBRASKA DUTIES GENERAL SUPERVISION	MINNESOTA SUPERVISION
Exposing radiographs	Indirect
Impressions for stud casts	Indirect
Apply fluoride	Indirect
Remove periodontal dressings	Indirect
Remove sutures	Indirect
Oral brush biopsy	N/A

NEBRASKA DUTIES DIRECT SUPERVISION	MINNESOTA SUPERVISION
Inspecting oral cavity	X
Apply topical anesthetic	Indirect
Pulp vitality testing	N/A
Coronal polishing	Indirect
Place periodontal dressings	Indirect
Monitoring nitrous (with CPR cert.)	Indirect
Place/remove matrices	Direct
Place/remove rubber dam	Indirect
Fabricate temp restorations	Direct (limited)
Place temp restorations	Direct (limited)
Remove temp restorations	Direct
Impressions for bleaching trays, TMD splints	Indirect

NEBRASKA PROHIBITED DUTIES	MINNESOTA SUPERVISION
Excess cement removal with hand instruments	Indirect
Sealants	Indirect (with Board approved course)
Apply cavity liner/bases	N/A
Packing/carving/finishing amalgam restorations	Direct (with Board approved course)
Placing/finishing composite restorations	Direct (with Board approved course)
Packing/removing retraction cord	N/A
Etch enamel/dentin	Indirect/Direct
Final impressions for crowns/bridges	N/A
Apply bleaching products	Indirect

NEVADA

Name of the agency that provides the regulation:

Nevada State Board of Dental Examiners
 2295-B Renaissance Drive
 Las Vegas, Nevada 89119
 (702) 486-7044
www.nvdentalboard.org/index.html

Board structure: seven licensed dentists, two licensed dental hygienists, and one public member

The type/level of regulation: none

The legislative scope of practice: direct

Continuing education: none

NEVADA ALLOWABLE DUTIES	MINNESOTA SUPERVISION
Expose radiographs	Indirect
Place/remove rubber dam	Indirect
Place/secure ortho ligatures	N/A
Remove sutures	Indirect
Place/remove periodontal packs	Indirect
Remove excess cement from restorations or ortho appliances with hand instruments	Indirect
Apply non aerosol topical anesthetic	Indirect
Oral hygiene instruction	N/A
Preliminary impressions	Indirect
Fabricate and place temporary crowns and bridges	Direct (limited)
Place/remove gingival retraction cord	N/A
Apply fluoride	Indirect
Sealants	Indirect (with Board approved course)
Fit ortho bands and prepare teeth for bonding	Direct

NEW HAMPSHIRE

Name of the agency that provides the regulation:

New Hampshire Board of Dental Examiners
2 Industrial Park Drive
Concord, NH 03301-8520
(603) 271-4561
www.state.nh.us/dental

Board structure: six dentists, two dental hygienists, and one public member

The type/level of regulation: none; New Hampshire has several classifications of dental assistants: Assistant, Certified Dental Assistant (DANB) and Graduate Dental Assistant, and Qualified Dental Assistant.

The legislative scope of practice: Direct and General Supervision – depending upon duties performed and by whom

Continuing education: ten hours every two years

NEW HAMPSHIRE DUTIES	D A	C D A	Q D A	MINNESOTA SUPERVISION
Function as a dental lab tech	G	G		N/A
Perform tests on saliva	G	G		N/A
Oral hygiene instruction	G	G		N/A
Assist with rubber dam placement/removal	G	G		X
Remove debris during procedure	G	G		X
Take dental and medical histories	-	D		X
Place/remove rubber dams	-	D		Indirect
Place/remove matrices	-	D		Direct
Apply fluoride	-	D		Indirect
Apply topical anesthetics	-	D		Indirect
Take vitals	-	D		X
Remove impressions for study models, athletic guards, bleaching and fluoride trays	-	D		Indirect
Insert athletic guards	-	D		N/A
Perform pulp vitality testing	-	D		N/A
Remove sutures	-	D		Indirect
Remove periodontal dressings	-	D		Indirect
Remove surgical dressings	-	D		N/A
Expose radiographs	-	D		Indirect
Sealants	-	D		Indirect (with Board approved course)
Orthodontic duties	-	D		Varied

Fabrication of provisional crown and bridge restorations	-	D	Direct (limited)
Coronal polishing	-	D	Indirect

NEW MEXICO

Name of the agency that provides the regulation:

New Mexico Board of Dental Health Care
 2055 Pacheco Street, Ste. 400
 Santa Fe, NM 87504
 (505) 476-7125
www.rld.state.nm.us/b&c/dental/index.htm

Board structure: five dentists, two dental hygienists, and two public members

The type/level of regulation: acknowledge DANB Certification; certificates to perform certain expanded functions

The legislative scope of practice: Indirect Supervision

Continuing education: none

NEW MEXICO DUTIES REQUIRING A CERTIFICATE	MINNESOTA SUPERVISION
Exposing radiographs	Indirect
Coronal polishing	Indirect
Application of topical fluoride	Indirect
Sealants	Indirect (with Board approved course)

UTAH

Name of the agency that provides the regulation:

Utah Dentists and Dental Hygienists Licensing Board
 P.O. Box 146741
 Salt Lake City, UT 84114-6741
 (801) 530-6511
www.dopl.utah.gov/licensing/dental.html

Board structure: six licensed dentists, two licensed dental hygienists, and one member of the general public

The type/level of regulation: none – dental assistants are not recognized in the dental practice act

The legislative scope of practice: Direct Supervision

Continuing education: none

UTAH PROHIBITED DUTIES	MINNESOTA SUPERVISION
Diagnose	Prohibited
Place, condense, carve restorations	Direct (with Board approved course)
Finish or polish restorations	Direct (with Board approved course)
Final cementation of restorations	Prohibited
Administer nitrous	Direct (with Board approved course)
Remove bonded materials with rotary instruments	Direct (with Board approved course)

VIRGINIA

Name of the agency that provides the regulation:

Virginia Board of Dentistry
6603 W. Broad Street, 5th Floor
Richmond, VA 23230-1712
(804) 662-9906
www.dhp.state.va.us/dentistry/default.htm

Board structure: seven dentists, one citizen member and two dental hygienists

The type/level of regulation: none for dental assistants; radiology certificate needed

The legislative scope of practice: Direct Supervision

Continuing education: none

Successful completion of the Dental Assisting National Board Certified Dental Assistant examination is acceptable to expose radiographs in the state of Virginia.

NON DELEGATABLE DUTIES	MINNESOTA SUPERVISION
Final diagnosis and treatment planning	Prohibited
Performing surgical or cutting procedures on hard or soft tissues	Prohibited
Prescribing or parenterally administering drugs or medicaments	Prohibited
Authorization of work orders for any appliance or prosthetic device or restoration to be inserted into the patient's mouth	N/A

Operation of high speed rotary instruments in the mouth	Prohibited
Administering and monitoring general anesthetics	Prohibited
Administering nitrous oxide or oxygen analgesia	Direct (with Board Approved Course)
Condensing/contouring restorations	Direct (with Board Approved Course)
Adjusting fixed or removable prosthetic appliance in the mouth	Prohibited
Final positioning and attachment of ortho bonds and bands	N/A
Final impressions	Prohibited
Final cementation of crowns and bridges	Prohibited
Placement of retraction cord	Prohibited

Duties appropriate to the training and experience of the dental assistant and the supervising dentist may be delegated with the exception of the above listed and any hygiene duties listed in the Dental Practice Act 18 VAC 60-20-220.

WASHINGTON

Name of the agency that provides the regulation:

Washington State Dental Health Care
Quality Assurance Commission
310 Isreal Rd SE, P.O. Box 47867
Tumwater, WA 98501-7867
(360) 236-4700
www.doh.wa.gov/A-Z.htm

Board structure: thirteen dentists, two public members

The type/level of regulation: none

The legislative scope of practice: "Close supervision" means that a licensed dentist whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. A dentist shall be physically present in the treatment facility while the procedures are performed. Close supervision does not require a dentist to be physically present in the operator; however, an attending dentist must be in the treatment facility and be capable of responding immediately in the event of an emergency.

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

Unlicensed persons may perform the following acts under **DIRECT PERSONAL SUPERVISION**:

WASHINGTON DENTAL ASSISTING DUTIES	MINNESOTA SUPERVISION
Oral inspection with no diagnosis	X
Oral hygiene instruction	N/A
Place and remove rubber dam	Indirect
Hold and remove impression materials after the dentist has place them	X
Impressions for diagnostic and opposing casts	Indirect
Impressions for wax bites solely for study models	N/A
Removal of excess cements	Indirect
Coronal polish	Indirect
Give fluoride treatments	Indirect
Place/remove periodontal packs	Indirect
Remove sutures	Indirect
Placement of wedge and matrices	Direct
Place temporary fillings	General (limited)
Apply tooth separators as for placement for Class III gold foil	N/A
Fabricate temporary crowns or temporary bridges	Direct (limited)
Place temporary crowns or temporary bridges	Direct (limited)
Remove temporary crowns or temporary bridges	Direct
Pack and medicate extraction sites	N/A
Deliver a sedative drug capsule to patient	N/A
Place topical anesthetics	Indirect
Place retraction cord	N/A
Polish restorations at a subsequent appointment	N/A
Select denture shade and mold	N/A
Acid etch	Direct/Indirect
Apply sealants	Indirect (with Board approved course)
Expose dental radiographs	Indirect
Take intra- extra-oral photographs	N/A
Take health histories	X
Take and record vital signs	X
Give pre- and post-operative instructions	X
Assist in the administration of nitrous (not actually administer)	X
Select ortho band sizes	Indirect
Place and remove ortho separators	Indirect
Prepare teeth for ortho bonding of appliances	Direct
Fit and adjust head gear	N/A
Remove fixed ortho appliances	N/A
Remove and replace arch wires and ortho wires	N/A
Take face bow transfer for mounting study casts	N/A

WEST VIRGINIA

Name of the agency that provides the regulation:

WV Board of Dental Examiners
P.O. Drawer 1459
Beckley, WV 25802-1459
(877) 914-8266
www.wvdentalboard.org

Board structure: five dentists, one dental hygienist, one certified dental assistant, one public member

The type/level of regulation: none

The legislative scope of practice: Direct Supervision

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

A licensed dentist may assign the following duties and/or intra oral tasks to an assistant in his or her employment:

WEST VIRGINIA ASSIGNED DUTIES	D A	MINNESOTA SUPERVISION
Exposing dental radiographs	D	Indirect
Placing/removing rubber dams	D	Indirect
Charting of restorations and missing teeth	D	X
Holding and removing materials, trays	D	X
Removing sutures	D	Indirect
Removing excess cement with hand instruments	D	Indirect
Taking impressions for study models	D	Indirect

WISCONSIN

Name of the agency that provides the regulation:

Wisconsin Dentistry Examining Board
P.O. Box 8935
1400 E. Washington Ave
Madison, WI 53708
(608) 266-2811

The type/level of regulation: none

The legislative scope of practice: Direct Supervision

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

Dental assisting duties are somewhat limited, and done so under **DIRECT SUPERVISION**.

WISCONSIN DENTAL ASSISTING DUTIES	D A	MINNESOTA SUPERVISION
Inspection of the oral cavity	D	X
Application of topical anesthetic agents	D	Indirect
Removal of excess cement from coronal portions of teeth	D	Indirect
Exposing radiographs	D	Indirect
Pulp vitality testing	D	N/A
Impression for study casts	D	Indirect
Coronal polishing	D	Indirect
Application of topical anticariogenic agents	D	Indirect
Placement and removal of periodontal dressings	D	Indirect
Removing sutures	D	Indirect
Monitoring Nitrous Oxide analgesia	D	Indirect
Placing/removing matrices	D	Direct
Placing/removing rubber dam	D	Indirect
Placing temporary/interim restorations	D	General (limited)
Removing temporary/interim restorations	D	Direct
Applying cavity liner and bases	D	N/A

WYOMING

Name of the agency that provides the regulation:

Wyoming Board of Dental Examiners
2020 Carey Ave, Suite 201
Cheyenne, WY 82002
(307) 777-6529
<http://plboards.state.wy.us/dental/index.asp>

Board structure: five dentists, one hygienist

The type/level of regulation: Board of Examiners – pertaining mostly to dentists and hygienists; dental assistants do need a radiology permit.

The legislative scope of practice: three types of supervision: general, indirect, direct by the dentist; dental assistants may be trained by their employer or formally trained.

Continuing education: N/A

To expose dental radiographs, a dental assistant must meet one of the following:

- * Have successfully completed an ADA or Wyoming State Board of Dental Examiners approved course in radiology
- * Possess three years experience with a minimum of 1000 hours per year in the last four years prior to July 1, 1990
- * Have completed or enrolled in a course for radiologic technology, dental hygiene or dental assisting on July 1, 1990, or have completed a twenty-four month course in radiologic technology within two years prior to July 1, 1990 and be able to demonstrate proficiency
- * Be licensed by other states or certifying groups who have similar requirements
- * Complete a course of Wyoming State Board of Dental Examiners approved instruction, or
- * Pass the DANB CDA exam

Neither certification, nor registration is required to perform expanded function duties.

WYOMING DENTAL ASSISTING DUTIES	D A	MINNESOTA SUPERVISION
Take vital statistics and medical history	G	X
Mix dental materials to be used by the dentist	G	X
Oral hygiene instruction	G	N/A
Process radiographs	G	Indirect
Impressions for study models	I	Indirect
Apply topical medications	I	Indirect
Expose radiographs	I	Indirect
Remove sutures	D	Indirect
Assist the dentist in all operative and surgical procedures	D	Varied
Place and remove rubber dams	D	Indirect
Place and remove matrices	D	Direct
Remove excess cement from coronal surfaces	D	Indirect
Prepare periodontal packs	D	Indirect
Remove periodontal packs	D	Indirect
Polish the surfaces of the teeth with a rubber cup (not coronal polishing)	D	N/A
Tying of ligature wires and elastic ties	D	Indirect
Removing ligature wires and elastic ties	D	Indirect
Placement and removal of ortho wires activated by the dentist	D	N/A
Impressions for ortho removable appliances and retainers	D	N/A
Removal of ortho bands	D	N/A
Placement and removal of ortho separators	D	Indirect

STATES WITH LICENSURE

**CALIFORNIA
MICHIGAN
NEW YORK
SOUTH DAKOTA**

CALIFORNIA

Name of the agency that provides the regulation:

Dental Board of California
Committee on Dental Auxiliaries
1428 Howe Avenue, Suite 58
Sacramento, CA 95825
(916) 263-2595
www.dbc.ca.gov or www.comda.ca.gov

Board structure: eight practicing dentists, one registered dental hygienist, one registered dental assistant, and four public members.

The type/level of regulation: Licensure (RDA and RDAEF auxiliary are Registered)

COMDA or the Board does not license unlicensed dental assistants, but they are subject to certain laws governing their conduct.

Dental assistants with certain experience or educational backgrounds may qualify to apply for RDA licensure.

Registered Dental Assistant in Extended Functions (EF) COMDA examines and licenses Registered Dental Assistants in Extended Functions (RDAEFs). The term "EF" does not refer to certain "expanded" functions that RDAs are allowed to perform upon completion of certain courses.

The legislative scope of practice: A dental assistant may only expose radiographs after successful completion of a board-approved radiation safety course.

Regulatory requirements

Continuing education: Registered dental assistants (RDA) – 25 hours/2 years
Registered dental assistants in extended functions (RDAEF) - 25 hours/2 years

As part of the continuing education requirements, each renewal period, licensees must complete a course in basic life support approved by the American Red Cross or the American Heart Association.

CALIFORNIA EXPANDED FUNCTIONS	D A	R D A	R D A E F	MINNESOTA SUPERVISION
Arch wires, place and ligate	-	D		Indirect
Arch wires, remove	D	D		Indirect
Bands, loose, check for	D	D		General
Bands, ortho, remove	-	D		General
Bands, ortho, size	-	D		Indirect
Bases, place on sound dentin	-	D		Indirect
Bite registrations, for diagnostic models for case study only, take	-	D		Indirect
Bleaching agents, apply and activate with non-laser light curing device	-	D		Indirect
Bleaching trays, take impressions for	D	D		Indirect
Bonding, prepare enamel for bonding by etching	-	-		Indirect
Canals, dry with absorbent points	-	D		Indirect
Cement, remove excess from coronal surfaces of teeth under orthodontic treatment by means of an ultrasonic scaler after Board approved course	-	D		N/A
Cement, remove excess from supragingival surfaces of teeth with hand instrument or floss	-	D		Indirect
Cement, remove excess from subgingival surfaces of teeth with hand instrument	-	-		N/A
Cord retraction of gingivae for impression procedures	-	-		N/A
Coronal polishing after determined by DDS or RDH to be calculus – free after Board approved course	-	D		Indirect
Crowns, intra-oral fabricate temporary	-	D		Direct
Crowns, size stainless steel, fabrication	-	D		Direct (with Board Approved Course)
Crowns, sizing	-	D		Direct
temporary cementation	-	D		Direct
removal of temporary	-	D		Direct
Cure restorative or orthodontic materials in operative site with light-curing device	D	D		N/A
Dressing, post extraction, place	-	D		N/A
Dressing, post extraction, remove	D	D		N/A
Dressing, periodontal, place	-	D		Indirect
Dressing, periodontal, remove	D	D		Indirect
Enamel, prepare for bonding by etching	-	-		Direct
Endodontic cultures, obtain	-	D		N/A
Endodontic filling points, fit trial	-	-		N/A
Endodontic post and core castings, formulate indirect patterns for	-	-		N/A

CALIFORNIA EXPANDED FUNCTIONS CONITNUED	D A	R D A	R D A E F	MINNESOTA SUPERVISION
Etchant , apply for restorative materials	-	G		Indirect
Examination , mouth-mirror inspection, charting of obvious lesions, existing restorations, missing teeth	-	G		N/A
Extra-oral duties or functions specified by supervising dentist	G	G		X
Fluoride application	D	D		Indirect
Impressions , final for cast restorations, take	-	-		N/A
Impressions , for diagnostic and opposing models, take	D	D		Indirect
Impressions , for space maintainers, ortho appliances and occlusal guards	-	-		N/A
Intra-oral measurements for orthodontic procedures, take	D	D		N/A
Ligature ties , remove	D	D		Indirect
Liners , sound dentin	-	D		Indirect
Matrices , place, wedge or remove	D	D		Direct
Nitrous oxide and oxygen analgesia/sedation , assist under specific conditions	D	D		Indirect
Nitrous oxide and oxygen , administration	-	-		Direct (Board Approved Course)
Orthodontic appliances , examine	G	G		X
Orthodontic separators , elastic, place	D	D		Indirect
Orthodontic separators , other than elastic, place	-	D		N/A
Pit and fissure sealants , apply	-	-		Indirect (Board Approved Course)
Pulp vitality , test	-	D		N/A
Radiographs (Board approved course first)	G	G		Indirect
Retainers and headgear , seat adjust	D	D		N/A
Rubber dams , place and remove	D	D		Indirect
Sports guards , take impressions for	D	D		Indirect
Sutures , remove	D	D		Indirect
Temporary sedative dressings , place and remove	-	G		N/A
Topical agents , apply non aerosol, non-caustic	D	D		Indirect

There are two requirements for licensure in California – an educational component and an examination component.

MICHIGAN

Name of the agency that provides the regulation:

Michigan Board of Dentistry
P.O. Box 30670
Lansing, MI 48909-8170
(517) 335-1752

Board structure: ten dentists, five dental hygienists, three public members, and one registered dental assistant

The type/level of regulation: Licensure (Registered Dental Assistants)

There are two types of dental assistants – An “assistant” (unlicensed and unregistered) and a Registered Dental Assistant (licensed)

“Assistant” means a non-licensed person who may perform basic supportive procedures under the supervision of a dentist as provided in these rules.

“Registered dental assistant” means a person licensed by the board pursuant to the act and these rules. A dental hygienist may perform the functions of a registered dental assistant if the board as a registered dental assistant licenses him or her.

The legislative scope of practice: varies depending on duty – extra oral is usually general supervision, intra-oral is usually under direct supervision

“Direct supervision” means that a dentist has designated a patient of record upon whom services are to be performed by an assistant and has described the procedures to be performed. The dentist shall examine the patient before prescribing the procedure to be performed and again upon completion of the procedure. The dentist shall be physically present in the office at the time the procedures are being performed.

“General supervision” means that a dentist has designated a patient of record upon whom services are to be performed. The dentist shall be physically present in the office at the time the procedures are being performed.

Regulatory requirements

Continuing education: 36 hours every three years

R 338.11235 Licensure to practice as a registered dental assistant; requirements.

Rule 1235. An individual applying for a license to practice as a Registered Dental Assistant shall meet all of the following requirements:

- (a) Comply with section 16174 of the act.
- (b) Graduate or receive a certificate from a school which meets the standards set forth in R 338.11307.

(c) Pass the board comprehensive and clinical examination.

R 338.11239 Registered Dental Assistant examination; content; time; place; passing score.

Rule 1239. (1) The board shall conduct a comprehensive and clinical examination for individuals seeking licensure as a Registered Dental Assistant. (2) Examination for licensure as a Registered Dental Assistant shall be both comprehensive and clinical and shall include, but not be limited to, all of the following:

- Oral anatomy
- Law and rules governing dental auxiliaries
- Instrumentation and use of dental materials
- Mouth mirror inspection
- Rubber dam application
- Application of anticariogenics
- Placement and removal of temporary crowns and bands
- Radiography
- Periodontal dressings, application and removal
- Removal of sutures

(3) The examination shall be given at least once a year. The passing score for the examination shall be a converted score of 75 on each section.

(4) A candidate who fails to achieve a passing score on all parts within an 18-month period shall reapply to take the entire clinical and comprehensive examination.

MICHIGAN DUTIES	A S S T	R D A	MINNESOTA SUPERVISION
Trial sizing of orthodontic bands	D		Indirect
Holding the matrix for anterior resin restorations	D		X
Impressions for study and opposing models	D		Indirect
Application of topical anesthetic solutions (nonaerosol).	D		Indirect
Instructing in the use and care of dental appliances	D		N/A
Operation of dental radiographic equipment	D		Indirect
Placement and removal of orthodontic separators	D		Indirect
Placement and removal of orthodontic elastics, ligatures, and arch wires	D		Indirect
Placement and removal of rubber dam	-		Indirect
Placement and removal of nonmetallic temporary restorations	-		Direct (Removal only)
Removing excess cement from supragingival surfaces of a tooth with non-rotary instruments	-		Direct
Application of anticariogenics after oral prophylaxis, when ordered by a licensed dentist	-		Indirect
Mouth mirror inspection of oral cavity, including chartings of lesions, existing restorations, missing teeth, and classification of occlusion	-		N/A

Sizing of temporary crowns and bands	Indirect
Placement and removal of periodontal dressings	Indirect
Temporary cementation and removal of temporary crowns and bands	Direct
Removal of sutures	Indirect
Polishing specific teeth with a slow-speed rotary hand piece immediately before procedures that require acid etching, for:	
(i) Placement of sealants	Indirect
(ii) Placement of resin-bonded orthodontic appliances	N/A
(iii) Placement of direct restorations by the dentist	Direct (with Board approved course)

NEW YORK

Name of the agency that provides the regulation:

New York State Board for Dentistry
89 Washington Avenue
Albany, New York 12234
(518) 474-3817
www.nysed.gov/prof/dent.htm

Board structure: thirteen dentists licensed in this state for at least five years, three dental hygienists licensed in this state for at least five years, and one certified dental assistant licensed in this state for at least one year.

The type/level of regulation: Licensure of Certified Dental Assistants (DANB); limited permits for dental assistants

General Requirements

To become a New York State licensed "certified dental assistant" you must:

- Be at least 17 years of age
 - Submit an application, fee, and all required documents
 - Meet education requirements
1. (A) Have received a high school diploma, or its equivalent, and
 2. (B) Have successfully completed, in accordance with the commissioner's regulations, (i) an approved one-year course of study in dental assisting in a degree-granting institution or a board of cooperative educational services program which includes at least two hundred hours of clinical experience, (ii) or an equivalent approved course of study in dental assisting in a non-degree granting institution or (iii) an alternate course of

study in dental assisting acceptable to the department which includes at least one thousand hours of relevant work experience; and

- Meet examination requirements: pass an examination given by an organization that administers examinations for certifying dental assistants and which is acceptable to the department.

You must file an application for licensure in addition to the other forms indicated. Submit all forms, along with the appropriate fee, to the Division of Professional Licensing Services (DPLS) of the New York State Education Department's Office of the Professions. It is your responsibility to follow up with anyone you have requested to send processing materials to DPLS.

The legislative scope of practice: Direct Personal Supervision

Direct Personal Supervision - provided in the course of the procedure by a licensed dentist who remains in the dental office where the supportive services are being performed. The supervising dentist must personally diagnose the condition to be treated, personally authorize the procedure, and evaluate the services provided by the certified dental assistant before the patient leaves the office.

Regulatory requirements

Continuing education: none by state although Certification with DANB requires 12 credits per year

New York Duties of Certified Dental Assistants under Direct Personal Supervision	Minnesota Supervision
Providing patient education	N/A
Taking preliminary medical histories and vital signs to be reviewed by the dentist	X
Placing and removing rubber dams	Indirect
Selecting and pre fitting provisional crowns	Indirect
Impressions for study casts or diagnostic casts	Direct
Removing periodontal dressings	Indirect
Impressions for space maintainers, orthodontic appliances, and occlusal guards	Direct
Removing orthodontic arch wires and ligature ties	Indirect
Placing and removing matrix bands	Direct
Selecting and pre fitting orthodontic bands	Indirect
Remove temporary cement (not including temporary fillings)	Indirect
Apply topical anticariogenic agents to the teeth	Indirect
Apply desensitizing agents to the teeth	Indirect
Place and remove temporary separating devices	Indirect
Place orthodontic ligatures	Indirect
Other dental supportive services authorized in regulations promulgated by the commissioner	N/A

SOUTH DAKOTA

Name of the agency that provides the regulation:

South Dakota State Board of Dentistry
P.O. Box 1037
Pierre, SD 57501-1037
(605) 224-7426
www.state.sd.us/dcr/dentistry

Board structure: five dentists, one dental hygienist, and one public member

The type/level of regulation: License

Advanced Dental Assistants: the State Board of Dentistry as an Advanced Dental Assistant must license any dental assistant who performs expanded functions in a dental office. To be eligible for this license, an applicant must have either graduated from an accredited or board approved Dental Assisting Program OR has successfully passed the Dental Assisting National Board (DANB) Exam.

Dental Radiographer: the State Board of Dentistry as a dental radiographer must license any dental assistant who takes x-rays in a dental office. To be eligible for this license, an applicant must have either graduated from an accredited or board-approved Dental Assisting Program OR have taken at least a 16-hour, board-approved course in dental radiography.
None – for a regular dental assistant

Advanced Dental Assistant -- Requirements. In addition to the minimum requirements in § 20:43:08:02, an advanced dental assistant must meet one of the following requirements: (1) Successfully complete a dental assisting program approved by the board pursuant to § 20:43:08:05; (2) Hold current credentials as a nationally certified dental assistant; or (3) Hold a certificate of competency from the board. **Source:** 19 SDR 32, effective September 6, 1992

20:43:08:04. Qualifications by endorsement. A person who has a current certificate to perform expanded functions issued by another state, jurisdiction, agency, or recognized professional registry may, upon presentation of the certificate to the board be considered to meet the requirements of § 20:43:08:03 if the board finds that the standards and procedures for qualification in the state, jurisdiction, agency, or recognized professional registry which issued the certificate are equivalent to the standards of this chapter.

Source: 19 SDR 32, effective September 6, 1992.

Certificate of competency -- Examination. An applicant for a certificate of competency must pass a written examination on expanded functions

administered by the board or the dental assisting national board or any substantially similar test. The applicant must also present to the board written documentation from a South Dakota dentist attesting to the clinical proficiency of the applicant who has performed expanded functions under personal supervision of the dentist for at least 180 days. The passing grade for the examination is 75.

Source: 19 SDR 32, effective September 6, 1992.

The legislative scope of practice: dental assistant – indirect and direct, ADA – direct, dental radiographer - direct

Delegation of duties -- Supervision. Subject to the dentist exercising full responsibility, a dental assistant may perform duties and procedures incidental to patient treatment while under the direct or indirect supervision of a licensed dentist or under personal supervision of a licensed dental hygienist. An advanced dental assistant may perform expanded function procedures only under the direct supervision of a dentist

Regulatory requirements

Continuing education: Advanced Dental Assistants must earn 60 hours of continuing education in every 5-year CE cycle. Advanced dental assistants must maintain a current cardiopulmonary resuscitation (CPR) card issued to health care providers. Dental Radiographers are required to earn 1 hour of continuing education specifically in the area of dental radiography each year.

20:43:08:11. Procedures that may not be delegated. A dentist or dental hygienist to either a dental assistant or an advanced dental assistant may not delegate the following list of procedures

PROHIBITED DUTIES	MINNESOTA SUPERVISION
Cutting of hard or soft tissue	Prohibited
Intra oral procedures that will be used directly in the fabrication of a dental prosthesis	Prohibited
Irreversible procedures	Prohibited
The injection of medication	Prohibited
Administration of nitrous oxide analgesia	Direct (WITH BOARD APPROVED COURSE)
Placing, finishing, and adjusting of final restorations	Direct (WITH BOARD APPROVED COURSE)

**STATES WITH A FORM OF CERTIFICATION (STATE OR
NATIONAL) OR PERMITS REQUIRED FOR EXPANDED
FUNCTIONS**

**ARIZONA
ARKANSAS
FLORIDA
GEORGIA
IDAHO
KANSAS
MASSACHUSETTS
MISSISSIPPI
PENNSYLVANIA
OHIO
OKLAHOMA
OREGON
RHODE ISLAND
SOUTH CAROLINA
TEXAS**

ARIZONA

Name of the agency that provides the regulation:

Arizona State Board of Dental Examiners
5060 N. 19th Ave #406
Phoenix, AZ 85015
(602) 242-1492
www.azdentalboard.org

Board structure: six licensed dentists, two licensed dental hygienists and three public members

The type/level of regulation: none – although a “certificate” is needed in order to work.

The legislative scope of practice: To expose radiographs, the dental assistant must successfully complete the Dental Assisting National Board Radiation Health Safety examination and the Arizona Clinical Radiologic Proficiency examination.

Radiographs are then exposed under general supervision. All other duties are performed under direct supervision. “Direct supervision” means that a licensed dentist is present in the office and available to provide immediate treatment or care to a patient and observe a dental assistant’s work.

Regulatory requirements

Continuing education: none

Expanded Functions allowed in the state of Arizona under **DIRECT Supervision:**

ARIZONA	MINNESOTA SUPERVISION
Place dental materials into the patient's mouth per dentist instruction	Indirect
Cleanse the supragingival surfaces in preparation of bands, crowns, restorations, dental dam application, acid etch procedures, and removal of periodontal dressings and packs.	Indirect
Removal of excess cement from inlays, crowns, bridges and ortho appliances with hand instruments	Indirect
Removal of temporary cement, interim restorations and periodontal dressings with hand instruments	Indirect
Remove sutures	Indirect
Place and remove dental dams	Indirect
Place and remove matrices	Direct
Fabricate and place interim restorations with temporary cement	Direct
Apply sealants	Indirect
Apply topical fluoride	Indirect
Prepare patient for N ₂ O and O ₂ analgesia upon direct instruction and presence of dentist; or	Indirect
Observe patient during N ₂ O and O ₂ analgesia as instructed by the dentist	Indirect

Expanded Functions allowed in the state of Arizona under **GENERAL SUPERVISION:**

ARIZONA	MINNESOTA SUPERVISION
Oral Hygiene Instruction	N/A
Dietary Counseling	N/A
Collect/record information pertaining to extra oral conditions	X
Collect/record information pertaining to existing intra oral conditions	X

ARKANSAS**Name of the agency that provides the regulation:**

Arkansas State Board of Dental Examiners
101 E. Capitol, Suite 111
Little Rock, AR 72201
(501) 682-3543
www.asbde.org

Board structure: six licensed dentists, one licensed dental hygienist, one consumer member, one member to represent the elderly.

The type/level of regulation: permits are required to do certain expanded functions. When a dental assistant has two or more permits, they are then considered a **registered dental assistant**. Arkansas also recognizes certification with the Dental Assisting National Board.

Dental Assistant – a staff member of a duly licensed Dentist who is involved in direct patient care to include a Certified Dental Assistant or a Registered Dental Assistant.

Registered Dental Assistant – A Dental Assistant who has obtained a permit(s) from the Board to perform any or all of the following expanded duties:

- Administration of nitrous oxide/oxygen analgesia
- Operation of dental radiographic equipment
- Coronal Polishing

Certified Dental Assistant – A Dental Assistant who is currently certified by the Dental Assisting National Board

ALL FUNCTIONS OF THE DENTAL ASSISTANT MUST BE PERFORMED UNDER PERSONAL SUPERVISION. PERSONAL SUPERVISION MEANS:

1. The dentist is in the office or treatment facility
2. The Dentist has personally diagnosed the condition to be treated\
3. The Dentist has personally authorized the procedures
4. The Dentist remains in the office or treatment facility while the procedures are being performed
5. The Dentist evaluates the performance of the Dental Assistant before the dismissal of the patient

With the exceptions below, a Dental Assistant may perform any dental task or procedure assigned by the supervising dentist to the assistant. These duties may only be delegated when the effect of the procedure assigned is reversible.

LICENSING OF CERTAIN DENTAL ASSISTANTS

Effective Dates. Acts 1985, No. 473, § 7; Mar. 21, 1985.

Emergency clause provided: "It is hereby found and determined by the General Assembly of the State of Arkansas that existing laws regulating the practice of dentistry do not provide for the regulating of dental assistants who perform expanded duties, such as the monitoring of anesthetics to patients and radiology; that provisions by the Arkansas State Board of Dental Examiners to issue a permit to dental assistants who perform expanded duties are necessary to insure proper enforcement of educational and safety standards for the benefit of the public; that there is an emergency need for such provision; and that the

enactment of this measure will relieve this dangerous situation. Therefore, an emergency is declared to exist and this act being necessary for the preservation of the public peace, health and safety should take effect and be in force from the date of its approval."

17-82-401. LEGISLATIVE INTENT

The provisions of this subchapter are intended to be supplemental and in addition to subchapters 1, 2 and 3 of this chapter and are intended to authorize the Arkansas State Board of Dental Examiners to issue permits to dental assistants who perform expanded duties as provided in this subchapter. **History.** Acts 1985, No. 473, §1; A.S.A. 1947, §72-571.

17-82-403. PERMIT REQUIRED

No person shall perform the expanded duties of a dental assistant as defined by the Arkansas State Board of Dental Examiners in the Rules and Regulation of the Board without a permit.

The legislative scope of practice: all function done by a dental assistant are under personal supervision

Regulatory requirements

Continuing education: none

Certified Dental Assistants (Certified by the Dental Assisting National Board) are able to apply for a permit to expose radiographs and/or perform expanded duties such as monitoring nitrous oxide/oxygen analgesia and coronal polishing within the state of Arkansas. When receipt of one or more permits is received from the Arkansas Board, the dental assistant is then considered a **REGISTERED DENTAL ASSISTANT**.

Prohibited Duties

Diagnosis and treatment planning
Scaling, root planing and curettage
Surgical or cutting procedures on hard or soft tissues
Prescription, injection, inhalation, and parenteral administration of drugs (except where permitted by the Board)
Placement, seating, or removal of any final or permanent restorations
Final placement of ortho brackets
Any procedure that contributes to or results in the irreversible alteration of the oral anatomy
Performance of the following expanded duties without a permit: <ul style="list-style-type: none">➤ Administration of nitrous oxide/oxygen analgesia➤ Operation of dental radiographic equipment➤ Coronal polishing
Functions relegated to a dental hygienist

ARKANSAS REGISTERED DENTAL ASSISTANT EXPANDED FUNCTIONS WITH PERMIT	MINNESOTA SUPERVISION
Administration of nitrous oxide/oxygen analgesia	Direct (With Board Approved Course)
Operation of dental radiographic equipment	Indirect
Coronal polishing	Indirect

FLORIDA

Name of the agency that provides the regulation:

Florida Board of Dentistry
4052 Bald Cypress Way – Bin C08
Tallahassee, FL 32399
(850) 921-4474
www.doh.state.fl.us/mqa

Board structure: five dentists, two dental hygienists, and one public member

The type/level of regulation: Certification in order to do expanded functions

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

FLORIDA DUTIES	E F D A	E F O A	O J T	MINNESOTA SUPERVISION
Placing temporary restoration with hand instruments	D	D		Direct
Removing temporary restoration with hand instruments	D	D		Direct
Polishing amalgam restorations (but not changing contour) with rubber cups, bristle brushes, burnishers, slow sped handpiece	D	D		N/A
Polishing clinical crowns when not for the purpose of changing the contour with slow speed handpiece, rubber cups, bristle brushes, and porte polishers	D	D		N/A
Removing excess cement from dental restorations and appliances with non-mechanical hand	D	D		Indirect

instruments			
Cementing temporary crowns and bridges with temporary cement	D	D	Direct
Removing sutures	D	D	Indirect
Applying sealants	D	D	Indirect
Monitoring Nitrous oxide oxygen and making adjustments only as needed only during this administration, and turning it off at the end of the procedure	D	D	Indirect (monitoring only)
Selecting and pre-fitting orthodontic bands – does not include adjusting/contouring the band	D	D	Indirect
Selecting and pre-fitting arch wires – does not include bending or adjusting of the wires	D	D	Indirect
Selecting prescribed extra-oral appliances by pre-selection or pre-measurement which does not include the final fit adjustment	D	D	N/A
Placing prescribed pre-treatment separators	D	D	Indirect
Removing prescribed pre-treatment separators	D	D	Indirect
Preparing tooth surface for orthodontic appliances	D	D	Direct
Preliminary charting	D	D	X
Fabricating temporary crowns or bridges intraorally	D	D	Direct
Packing and removing retraction cord without vasoactive chemicals	D	D	N/A
Securing or unsecuring an arch wire by attaching or removing the fastening device	D	D	N/A
Removing properly contoured ortho ands not attached to any appliance	D	D	N/A
Recementing properly contoured ortho bands	D	D	N/A
Inserting dressings into alveolar sockets	D	D	N/A
Removing dressings from alveolar sockets	D	D	N/A
Impressions for diagnostic casts	I	I	Indirect
Impressions for opposing casts	I	I	Indirect
Impressions for bleaching trays	I	I	Indirect
Placing periodontal dressings	I	I	Indirect
Removing periodontal dressings	I	I	Indirect
Placing surgical dressings	I	I	N/A
Removing surgical dressings	I	I	N/A
Placement/Removal of rubber dam	I	I	Indirect
Placement/removal of matrices	I	I	Direct
Applying cavity liners, bases, varnishes	I	I	N/A
Exposing dental radiographs	I	I	Indirect
Exposing carpal radiographs	I	I	N/A
Fabricate temporary crowns and bridges in the laboratory	G	G	Direct
Provide educational services which do not include the diagnosis and treatment of dental conditions	G	G	N/A
Oral hygiene instruction	G	G	N/A

GEORGIA

Name of the agency that provides the regulation:

Georgia Board of Dentistry
237 Coliseum Drive
Macon, GA 31217
(478) 207-1685
www.sos.state.ga.us/plb/dentistry

The type/level of regulation: Certificate for expanded duties

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: None

Board structure: nine dentists, one dental hygienist, and one consumer member

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

There are two levels of dental assistants:

General dental assistants – Requirements: must be familiar with the procedures in the dental office, the sterilization of instruments, general hygiene of the mouth, and basic office operation.

Expanded duty dental assistant – Requirements: high school diploma or equivalent, current CPR, and one or more of the following: a Certified Dental Assistant, or graduate of an approved dental assisting program, or employed as a chairside assistant for at least six months in the last three years, or a full-time student in and accredited dental assisting program that is eligible for graduation.

GEORGIA DUTIES	D A D A	MINNESOTA SUPERVISION
Diagnostic impressions, casts, opposing models	D	Indirect
Expose radiographs	D	Indirect
Remove sutures (excluding wire sutures)	D	Indirect
Remove periodontal dressing	D	Indirect
Place and remove rubber dams	D	Indirect
Apply topical anesthetic	D	Indirect
Remove cement from supragingival areas of dental restorations and appliances with hand instruments	D	Indirect
Fabricate extra-orally temporary crowns and bridges	D	Direct
Cement temporary crowns and bridges with	D	Direct

intermediate cement		
Remove temporary crowns and bridges	D	Direct
Place intracoronal temporary restorations	D	General
Place drying agents prior to cementation of permanent crowns and bridges	D	N/A
Remove dry socket medication	D	N/A
Place and take off a removable prosthesis with a pressure sensitive paste after the appliance has been initially seated by the dentist	D	N/A
Etch unprepared enamel	D	Direct
Polish enamel and restorations with slow speed prior to bleaching, permanent cementation of fixed restorations and bonding procedures to include supramarginal enamel restorations after removal of orthodontic appliances	D	N/A
Dry endo canals	D	Indirect
Place endo medicaments	D	N/A
Place and remove temporary endo restorations with hand instruments	D	Indirect
Place matrices and wedges	D	Direct
Select, pre-size and seat orthodontic arch wires	D	Indirect
Select and pre-size ortho bands to be seated by dentist	D	Indirect
Place and remove pretreatment separators	D	Indirect
Cut and tuck ligatures	D	Indirect
Remove ligatures and arch wires	D	Indirect
Remove loose or broken bands	D	General
Remove and recement loose bands that have been previously fitted by a dentist	D	N/A
Apply desensitizing agents	-	Indirect
Place cavity liners, bases or varnish over unexposed pulp	-	Indirect
Intra-oral fabrication of temporary crowns	-	Direct
Extra-oral adjustments of temporary crowns	-	Direct
Perform face bow transfer	-	N/A
Impressions for broken prosthesis repair	-	N/A
Place periodontal dressings	-	Indirect
Redressing (not initial placement) and removal of dressing from alveolar sockets	-	N/A
Impressions for fabrication of night guard (for bruxism or muscle relaxation)	-	N/A
Adjustments made extra-orally (final adjustments by dentist)	-	N/A
Monitor administrations of nitrous oxide oxygen analgesia	-	Indirect
Apply topical anticariogenic agents	-	Indirect
Apply pit and fissure sealants using non-laser device	-	Indirect (after Board approved course)
Packing and removal of gingival retraction cord	-	N/A

Changing of bleaching agent during bleaching process or vital and non-vital teeth	-	Indirect
Rebond brackets	-	N/A
Remove bonded brackets with hand instruments	-	N/A
Impressions for passive orthodontic appliances	-	N/A
Application of primer and bonding agents to prepared teeth	-	Direct (with Board approved course)

IDAHO

Name of the agency that provides the regulation:

Idaho State Board of Dentistry
708 ½ W. Franklin St
Boise, ID 83720
(208) 334-3247
www2.state.id.us/isbd

Board structure: five dentists, two dental hygienists, and one public member

The type/level of regulation: Board Qualification to perform expanded functions

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

No special state examination to expose radiographs. Neither certification, nor registration is required to perform expanded function duties.

PROHIBITED DUTIES	MINNESOTA SUPERVISION
Diagnosis	Prohibited
The placement or carving of permanent restorative materials in any manner	Direct (limited classes with Board Approved Course)
Initiate or regulate the flow of nitrous oxide on a patient	Direct (with Board Approved Course)
The administration of any general anesthetics, infiltration anesthetic or any injectable nerve block procedure	Prohibited
Any oral prophylaxis (including polishing)	Indirect (polishing)

Also prohibited are the following expanded functions, unless authorized by a Certificate of Registration, certificate, or diploma of course completion by an approved teaching agency:

EXPANDED DUTIES WITH ADDITIONAL TRAINING	MINNESOTA SUPERVISION
Place and remove temporary restorations	General
Perform the mechanical polishing of restorations	N/A
Monitor the patient while nitrous oxide is being administered	Indirect
Application of Pit and Fissure Sealants	Indirect (after Board approved course)
Coronal polishing after prophylaxis	Indirect

Expanded Functions Qualifications: A dental Assistant may be considered Board qualified in expanded functions, authorizing the assistant to perform any or all of the expanded functions described in Subsection 035.01.f of the Idaho Dental Practice Act upon satisfactory completion of the following requirements:

- I. Completion of a Board approved training in each of the expanded functions.
 - A. The required training shall include adequate training in the fundamentals of dental assisting, which may be evidenced by:
 1. Current Certification by the Dental Assistant National Board; or
 2. Successful completion of a Board-approved course in the fundamentals of dental assisting;
 3. or successfully challenging the fundamentals course
 - B. Successful completion of a Board-approved competency examination in each of the expanded functions. There are no challenges for expanded functions.

KANSAS

Name of the agency that provides the regulation:

Kansas Dental Board
 900 SW Jackson, Room 564-5
 Topeka, KS 66612-1230
 (785) 296-6400
www.accesskansas.org/kdb

Board structure: six licensed and qualified resident dentists (one from each congressional district and two at-large), two licensed and qualified resident dental hygienists, and one representative from the general public.

The type/level of regulation: none; Certificates for certain expanded functions (supragingival scaling, coronal polishing)

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

ALLOWABLE DUTIES AFTER TRAINING AND CERTIFICATION	MINNESOTA SUPERVISION
Coronal Polishing	Indirect
Supra gingival scaling with mechanical and ultrasonic devices	N/A

MASSACHUSSETTS

Name of the agency that provides the regulation:

Massachusetts Board of Dentistry
239 Causeway Street, Suite 500
Boston, MA 02114
(617) 727-2197
www.state.ma.us/reg/boards/dn

Board structure: six dentists, two dental assistant advisors, and one public member

The type/level of regulation: Certification with DANB is required for expanded functions (CDA, COA)

Certified Dental Assistant (CDA). A person who is currently or was previously certified by the Dental Assisting National Board, Inc. (DANB) as a Certified Dental Assistant.

Formally Trained Dental Assistant (FTA). A person who has successfully completed a formal training program in dental assisting at a school accredited by the commission on Dental Accreditation of the American Dental Association or other recognized accrediting body.

Certified Orthodontic Assistant (COA). A person who is currently or was previously certified by the Dental Assisting National Board, Inc. (DANB) as a Certified Orthodontic Assistant.

On the Job Trained Dental Assistant (OJT). A person who is employed as a dental assistant and has received training in performing the appropriate delegated procedures from an employer dentist.

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

ALLOWABLE DUTIES AFTER TRAINING AND CERTIFICATION	MINNESOTA SUPERVISION
Coronal Polishing	Indirect
Supra gingival scaling with mechanical and ultrasonic devices	N/A

MASSACHUSSETTS

Name of the agency that provides the regulation:

Massachusetts Board of Dentistry
239 Causeway Street, Suite 500
Boston, MA 02114
(617) 727-2197
www.state.ma.us/reg/boards/dn

Board structure: six dentists, two dental assistant advisors, and one public member

The type/level of regulation: Certification with DANB is required for expanded functions (CDA, COA)

Certified Dental Assistant (CDA). A person who is currently or was previously certified by the Dental Assisting National Board, Inc. (DANB) as a Certified Dental Assistant.

Formally Trained Dental Assistant (FTA). A person who has successfully completed a formal training program in dental assisting at a school accredited by the commission on Dental Accreditation of the American Dental Association or other recognized accrediting body.

Certified Orthodontic Assistant (COA). A person who is currently or was previously certified by the Dental Assisting National Board, Inc. (DANB) as a Certified Orthodontic Assistant.

On the Job Trained Dental Assistant (OJT). A person who is employed as a dental assistant and has received training in performing the appropriate delegated procedures from an employer dentist.

The legislative scope of practice: levels of supervision vary by the type of assistant (certified or on the job trained) and the duty: general, direct and immediate supervision:

General Supervision (G). Supervision of dental procedures based on instructions given by a licensed dentist but not requiring the physical presence of a supervising dentist during the performance of those procedures.

Direct Supervision (D). Supervision of dental procedures based on instructions given by a licensed dentist who remains in the dental facility while the procedures are being performed by the auxiliary.

Immediate Supervision (I). Supervision of dental procedures by a licensed dentist who remains in the dental facility, personally diagnoses the condition to be treated, personally authorizes the procedures, and before dismissal of the patient, evaluates the performance of the auxiliary.

Regulatory requirements

Continuing education: none; 12 hours required by DANB for certified CDA's and COA's

MASSACHUSETTES DUTIES	C D A	C O A	O J T	MINNESOTA SUPERVISION
Give oral health instruction	G	G		N/A
Perform dietary analysis for dental disease control	G	G		N/A
Take and record vital signs	G	G		X
Chart dental restorations and record lesions	G	G		X
Take intra-oral photographs	G	G		N/A
Retract lips, cheek, tongue and other oral tissue parts	G	G		General
Place temporary restorations	G	G		General
Irrigate and aspirate the oral cavity	G	G		General
Isolate the operative field	G	G		General
Take impressions for study casts, athletic mouth guards, custom trays	G	G		Indirect
Take wax bite registrations for identification purposes	G	G		N/A
Apply topical anesthetic agents	G	G		Indirect
Take oral cytologic smears	G	G		N/A
Remove sutures	G	G		Indirect
Place and remove periodontal dressings	G	G		Indirect
Place and remove rubber dam	G	I		Indirect
Place amalgam in tooth for condensation by the dentist	I	I		X

Irrigate and dry root canals	I	I	Indirect
Expose radiographs	I	I	Indirect
Assist in administration of nitrous oxide	I	I	Indirect
Remove gingival retraction cord	I	I	
Apply cavity varnish	I	I	Indirect
Remove temporary restorations with hand instruments	I	I	Direct
Place and remove wedges	I	-	Direct
Place and remove matrix bands	I	-	Direct
Place gingival retraction cord	I	-	N/A
Perform minor emergency orthodontic adjustments to eliminate pain and discomfort	G	G	General
Remove excess cement and bonding agents from bridges and orthodontic appliances with hand instruments	D	D	Direct
Take impressions for orthodontic retainers	D	D	Indirect
Preliminary intra-oral fit of bands	D	D	Indirect
Preliminary oral fit of arch wires	D	D	Indirect
Place and remove orthodontic separators	D	D	Indirect
Select size of headgear	D	D	N/A
Prepare teeth for bonding of orthodontic appliances	I	I	Direct
Place and remove orthodontic arch wires	I	I	Indirect
Remove fixed orthodontic appliances	I	I	N/A
Place elastics and ligature wires	I	I	Indirect
Cement and remove temporary crowns and bridges	G	-	Direct
Insert and/or perform minor adjustment of athletic mouth guards and custom fluoride trays	G	-	N/A
Polish teeth after dentist or dental hygienist has determined that teeth are free of calculus	G	-	Indirect
Apply anti-cariogenic agents	G	-	Indirect
Remove surgical dressings	G	-	N/A
Apply dental sealants	I	-	Indirect (with Board approved course)
Place surgical dressings	I	-	N/A
Perform pulp testing	I	-	N/A
Select and try stainless steel crowns or other pre-formed crown for insertion by dentist	I	-	Direct (with Board approved course)
Apply cavity liner or base material	-	-	N/A
Place permanent or bonded restorations in or on natural teeth	-	-	Direct (with Board approved course)
Apply or finish composite or bonding materials for restorative or cosmetic procedures	-	-	Direct (with Board approved course)
Take impressions for fabrications of restorations, appliances, or prostheses-not to include #10 or #29 in 234 CMR 2.04(15)(b)	-	-	N/A

Permanently cement or recement cast restorations	-	-	N/A
Permanently cement or recement stainless steel crowns	-	-	Direct (with Board approved course)
Condense or carve amalgam or composite restorations	-	-	Direct (with Board approved course)
Intra orally finish margins or adjust the occlusion of restorations	-	-	Direct (with Board approved course)

MISSISSIPPI

Name of the agency that provides the regulation:

Mississippi State Board of Dental Examiners
600 East Amite Street, Ste. 100
Jackson, MS 39201-2801
(601) 944-9622
www.msbde.state.ms.us

Board structure: seven licensed and actively practicing dentists and one licensed and actively practicing dental hygienist

The type/level of regulation: expanded duty certificate (state)

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: 12 hours in radiology every two years if exposing radiographs, otherwise no CE requirement

Pursuant to Miss. Code Ann. §§ 73-9-3(9) and 73-9-5(2), the work of dental auxiliaries shall at all times be under the "direct" supervision of a licensed dentist. The Board herein defines "direct" supervision as follows:

A dentist is in the dental office or treatment facility, has personally diagnosed the condition to be treated, authorizes the procedures and remains in the dental office or treatment facility while the procedures are being performed by the auxiliary, and will evaluate the performance of the dental auxiliary.

The Board has further determined that the following procedures may not be delegated to dental auxiliary personnel.

MISSISSIPPI NON – DELEGATABLE DUTIES	MINNESOTA SUPERVISION
Intra oral restorative procedures	Direct (with Board approved course)

Activation or adjustment of orthodontic appliances	N/A
The taking of any impression of the human mouth or oral structure that will be used in the restoration, repair, or replacement of any natural or artificial teeth or for the fabrication or repair of any dental appliance. The Board has further determined that impressions for study models and opposing models, and the construction, adjustment, and cementation of temporary crowns (temporary means crowns placed while permanent restoration is being fabricated) do not require the professional judgment and skill of a dentist and may be delegated to competent dental auxiliary personnel in accordance with §73-9-3.	Indirect (Impressions) Direct (Fabrication)

OHIO

Name of the agency that provides the regulation:

Ohio State Dental Board
77 South High Street
Columbus, OH 43266-0306
(614) 466-2580
www.state.oh.us/den

Board structure: five dentists, one dental hygienist, and one public member

The type/level of regulation: Licensure for Radiographers; Certification (DANB) for expanded functions (optional)

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

OHIO DUTIES	D A	E F D A	MINNESOTA SUPERVISION
Aspiration/retraction	D	D	General
Preliminary charting	D	D	X
Elastomeric impressions	D	D	N/A
Impressions for guards, trays	D	D	Indirect
Caries susceptibility testing	D	D	N/A
Oral Hygiene Instruction	D	D	N/A
Shade selection	D	D	N/A
Application of topical anesthetic	D	D	Indirect
Pulp testing	D	D	N/A
Fluoride application	D	D	Indirect

Application of desensitizing agents	D	D	N/A
Place/remove periodontal dressings	D	D	Indirect
Suture removal	D	D	Indirect
Rubber dam placement/removal	D	D	Indirect
Application of cavity varnish	D	D	N/A
Fabrication, cementation temporary crowns/bridges	D	D	Direct
Temporary removal	D	D	Direct
Selecting and sizing of stainless steel crowns	D	D	Indirect
Selecting and sizing of ortho bands and arch wires	D	D	Indirect
Checking for and removal of loose ortho bands and brackets	D	D	General
Intra-oral bite registrations for diagnostic models, restorations, and appliances	D	D	N/A
Irrigation of root canals	D	D	N/A
Drying of root canals	D	D	Indirect
Temporizing root canal teeth	D	D	Indirect
Placement/removal of surgical dressings	D	D	N/A
Placement/removal of ortho arch wires	D	D	Indirect
Ligation of wires to ortho bands or brackets	D	D	Indirect
Placement/removal ortho separators/ties	D	D	Indirect
Polymerization of light-activated bonding or restorative materials	D	D	N/A
Taking photographs	D	D	N/A
Recording of vitals	D	D	X
Repair, construction and finishing of metallic or plastic prosthetic devices	D	D	N/A
Nutrition counseling	D	D	N/A
Behavior modification	D	D	N/A
Preparing teeth for bonding of restorations or ortho devices	D	D	Direct
Placement procedures for amalgam restorations	-	D	Direct (with Board approved course)
Placement procedures for non-metallic restorations	-	D	Direct (with Board approved course)

OKLAHOMA

Name of the agency that provides the regulation:

Oklahoma Board of Dentistry
201 N.E. 38th Terrace, No. 2
Oklahoma City, OK 73105
(405) 524-9037
www.dentist.state.ok.us

Board structure: eight dentist, one dental hygienist, and two public members

The type/level of regulation: Registration of Permits in Coronal Polishing, X-Ray Certification, Nitrous Oxide, Sealants

The legislative scope of: Direct Supervision

Regulatory requirements

Continuing education: awaiting board regulations

OKLAHOMA EXPANDED DUTY PERMITS	MINNESOTA SUPERVISION
Radiation Safety (exposing radiographs)	Indirect
Coronal polishing	Indirect
Application of topical fluoride	Indirect
Application of sealants	Indirect (with Board approved course)
Monitoring/assisting with nitrous oxide	Indirect/ Direct (Administration) – with Board approved course

OREGON

Name of the agency that provides the regulation:

Oregon Board of Dentistry
1515 SW 5th, Ste. 602
Portland, OR 97201-5451
(503) 229-5520
www.oregondentistry.org

Board structure: six dentists, two dental hygienists, and one public member

The type/level of regulation: Certification – Radiology, Expanded Functions; In order to take x-rays, perform general expanded functions (EFDA), or perform expanded orthodontic functions (EFODA), dental assistants in Oregon must first be certified in those procedures. The Dental Assisting National Board (DANB) performs the certification process.

The legislative scope of practice: indirect supervision

Regulatory requirements

Continuing education: none

OREGON DUTIES	E F D A	E F O D A	MINNESOTA SUPERVISION
Apply sealants	I		Indirect
Apply soft relines	I	-	N/A
Recement a temporary crown or recement a permanent crown with temporary cement for a patient of record providing that the patient is rescheduled for follow-up care by a licensed dentist as soon as is reasonably appropriate	G		General
Recement orthodontic bands if the dentist is not available and the patient is in discomfort, providing that a licensed dentist reschedules the patient for follow-up care as soon as is reasonably appropriate.	-	G	N/A
Place temporary restorative material (i.e., zinc oxide eugenol based material) in teeth	I	-	General
Polish amalgam restorations with a slow speed handpiece	I	-	N/A
Place and remove matrix retainers for alloy and composite restorations	I	-	Direct
Remove temporary crowns for final cementation and clean teeth for final cementation	I	-	Direct
Fabricate temporary crowns, and temporarily cement the temporary crown after it has been approved by the dentist	I	-	Direct
Preliminarily fit crowns to check contacts or to adjust occlusion outside the mouth	I	-	N/A
Remove any portion of an orthodontic appliance causing a patient discomfort and in the process may replace ligatures and/or separators if the dentist is not available providing that the patient is rescheduled for follow-up care by a licensed dentist as soon as is reasonably appropriate	-	G	General
Remove cement from cemented bands or brackets using an ultrasonic or hand scaler, or a slow speed hand piece	-	I	Direct (with Board approved course)
Recement loose orthodontic bands	-	I	N/A
Polish the coronal surfaces of teeth with a brush or rubber cup as part of oral prophylaxis to remove stains if a licensed dentist or dental hygienist has determined the teeth are free of calculus	I	-	Indirect
Remove excess supragingival cement from crowns, bridges, bands or brackets with hand instruments	I	-	Indirect
Adjust or attempt to adjust any orthodontic wire, fixed, removable appliance, or other structure while it is in the patient's mouth	-	-	N/A
Administer fluoride, topical anesthetic, or desensitizing agents	-	-	Indirect

Start nitrous oxide	-	-	Direct (with Board approved course)
Place periodontal packs	-	-	Indirect
Condense and carve permanent restorative material	-	-	Direct (with Board approved course)

PENNSYLVANIA

Name of the agency that provides the regulation:

Pennsylvania State Board of Dentistry
P.O. Box 2649
Harrisburg, PA 17105-2649
(717) 787-7769
www.dos.state.pa.us

Board structure: Consists of the Secretary of Health, or his designee, the Director of the Bureau of Consumer Protection in the Office of the Attorney General, or his designee, the Commissioner of Professional and Occupational Affairs and ten additional members, who shall be appointed by the Governor with the advice and consent of a majority of the members elected to the Senate. Two members shall represent the public at large.

The type/level of regulation: certification of Expanded Function Dental Assistants

The legislative scope of practice: Direct supervision – dentist is in the office, personally diagnosis the treatment and remains in the office while treatment is performed, evaluates work prior to patient dismissal. Radiology permit required.

Regulatory requirements

Continuing education: Expanded function dental assistants—10 hours

PENNSYLVANIA DUTIES (Direct Supervision)	MINNESOTA SUPERVISION
Placing amalgam restorations	Direct (with Board approved course)
Removing rubber dams	Indirect
Contouring amalgam restorations	Direct (with Board approved course)
Place matrices	Direct
Placing composite resin restorations	Direct (with Board approved course)
Removing matrices	Direct
Finishing composite	Direct (with Board approved course)
Placing rubber dams	Indirect

RHODE ISLAND

Name of the agency that provides the regulation:

Rhode Island State Board of Examiners in Dentistry
3 Capitol Hill, Room 104
Providence, RI 02908-5097
(401) 222-1392

Board structure: seven dentists, two dental hygienists, and four public members

The type/level of regulation: two types – regular dental assistant and Certified Dental Assistant

The legislative scope of practice: dental assistant works under personal supervision, certified dental assistant works under direct supervision

Regulatory requirements

Continuing education: none

RHODE ISLAND DUTIES	D A	C D A	MINNESOTA SUPERVISION
Apply sealants	-		Indirect
Apply fluoride	-		Indirect
Condensing and carving temporary restorative materials in teeth	-		General
Condensing and carving permanent restorative materials in teeth	-		Direct (with Board approved course)
Placement or removal of bonded orthodontic attachments and/or cementation or removal of orthodontic bands	-		N/A
Exposure of radiographs without successful completion of a course in dental radiography	-		Indirect

SOUTH CAROLINA

Name of the agency that provides the regulation:

South Carolina State Board of Dentistry
P.O. Box 11329
Columbia, SC 29211-1329
(803) 896-4596
www.llr.state.sc.us/pol/dentistry/default.htm

Board structure: seven dentists, one dental hygienist, one public member

The type/level of regulation: certification for radiology; two types of dental assistants: **Expanded Duty Dental Assistant and regular Dental Assistant**

The legislative scope of practice: Direct supervision

Regulatory requirements

Continuing education: none

The Board has approved performance of the following procedures by dental assistants in South Carolina. No formal academic dental training is required for dental assistants. These procedures must be performed under the direct supervision of a dentist present on the premises and licensed in South Carolina.

Under the direction and control" is defined to mean that the dentist or registered dental technician is present and directly supervising the performance of any and all dental technological work.

"Premises" is defined to mean the immediate location where the dentist or dental technician is present and engaged in the practice of dentistry or the performance of dental technological work respectively. In the case of a dentist, the premises is further defined to mean the physical area where the dentist is actually present and practicing dentistry, commonly known as the "dental office".

An ***Expanded Duty Dental Assistant*** is a dental assistant who is a graduate of an American Dental Association accredited dental assisting program, or one who has completed two (2) years of continuous full-time employment as a chairside dental assistant. In addition to the procedures listed for dental assistants, Expanded Duty Dental Assistants may perform the following procedures under the direct supervision of a dentist present on the premises and licensed in South Carolina.

SOUTH CAROLINA	D A	E D D A	MINNESOTA SUPERVISION
Assist in basic supportive chairside procedures	D	D	X
Place and remove rubber dam	D	D	Indirect
Place and remove matrix	D	D	Direct
Take and record vital signs (blood pressure, pulse, respiration, etc.)	D	D	X
Place and remove orthodontic ligatures	D	D	Indirect
Remove sutures	D	D	Indirect
Apply topical drugs as prescribed by the dentist	D	D	Indirect
Chart existing restorations, clinically missing teeth, and appliances within the oral cavity	D	D	X
Expose radiographs upon completion of a Board approved radiation safety course	D	D	Indirect

Place and remove periodontal packs	D	D	Indirect
Place gingival retraction cord	-	D	N/A
Take impressions for study models	-	D	Indirect
Application of pit and fissure sealant	-	D	Indirect (with Board approved course)
Place and remove socket dressing	-	D	N/A
Place temporary restorations	-	D	General
Cement temporary crowns or bridges	-	D	N/A
Polish restorations and supra-gingival tooth structure	-	D	N/A
Remove excess cement from restoration and/or appliances	-	D	Indirect/Direct
Monitor nitrous oxide anesthesia upon completion of a Board approved course and certification by the Board	-	D	Indirect

TEXAS

Name of the agency that provides the regulation:

Texas State Board of Dental Examiners
333 Guadalupe Street, Twr. 3, Suite 800
Austin, TX 78701
(512) 463-7452
www.tsbde.state.tx.us

Board structure: 10 dentists - 2 dental hygienists - 6 public members

The type/level of regulation: dental assistants are not regulated unless they hold a certificate for specific expanded functions (sealants, nitrous, radiology).

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: Dental Assistants holding a certification to apply pit and fissure sealants must provide six hours of continuing education at the time the certification is renewed each year. All hours must be scientific and technical as relates to clinical care of the individual patient.

Of the six hour requirement, up to 3 hours may be self-study. All courses must be offered or endorsed by an accredited dental, dental hygiene, or dental assisting school or by nationally recognized dental, dental hygiene, or dental assisting organizations.

This packet contains a compilation of information from the Dental Practice Acts of all 50 states and the District of Columbia. The intent of this project was to compare:

- **The various levels of regulation in relation to the Registration of Minnesota Dental Assistants**
 - ☐ Licensure
 - ☐ Registration
 - ☐ Certification (National, State)
 - ☐ No Regulation
- **The expanded functions or duties allowable/prohibited to the practicing dental assistants of other states in relation to the allowable duties of Minnesota Registered Dental Assistants**
- **Levels of supervision and definitions of supervision**
 - ☐ General
 - ☐ Indirect
 - ☐ Direct
 - ☐ Personal
- **Continuing education requirements (briefly)**
- **Composition of Board of Dentistry or Dental Examiners Board in each state**
- **Classifications of dental assistants (where applicable)**
 - ☐ Advanced Dental Assistant
 - ☐ Certified Dental Assistant
 - ☐ Certified Dental Practice Management Administrator
 - ☐ Certified Oral & Maxillofacial Surgery Assistant
 - ☐ Certified Orthodontic Assistant
 - ☐ Dental Assistant
 - ☐ Dental Assistant I
 - ☐ Dental Assistant II
 - ☐ Dental Assistant General Duties
 - ☐ Dental Assistant General Orthodontic Duties
 - ☐ Dental Assistant Trainee
 - ☐ Dental Nurse (Canada)
 - ☐ Expanded Function Dental Assistant
 - ☐ Expanded Function Orthodontic Assistant
 - ☐ Extended Function Dental Assistant
 - ☐ Formally Trained Dental Assistant
 - ☐ Limited Dental Assistant
 - ☐ Limited Registered Dental Assistant
 - ☐ On the Job Trained Dental Assistant
 - ☐ Registered Dental Assistant
 - ☐ Registered Dental Assistant Extended Functions
 - ☐ Practical Dental Assistant
 - ☐ Qualified Dental Assistant
 - ☐ Traditional Dental Assistant
- **To provide supporting material to the Minnesota Board of Dentistry for Licensure of Minnesota Registered Dental Assistants**

Sources Used:

Individual State Dental Practice Acts
Dental Assisting National Board State Fact Handbook
ADA Department of State Government Affairs Document #4 (Continuing Education) (on website)
AGD Sate Licensing Boards Link (on website)
Lori Barnhart, CDA, RDA (Michigan)
Kristy Borquez, CDA, RDAEF, FADAA (California)
Cindy Bradley, CDA, CDPMA, EFDA (Florida)
Luann Brownson, CDA, ADA (South Dakota)
Mary Govoni, CDA, RDH, MBA (Michigan)
Sarah Gresko, CDA, RDA (New Jersey/New York)
Sheryl Jacobs, CDA, RDA (North Dakota)
Carol Oeder, CDA, CDPMA, LPN (Wisconsin)
Cathy Roberts, CDA, CDPMA, COA, EFDA, FADAA (Indiana)
Sheryl Stuewe, CDA (Utah) ADAA Council on Legislation Chairperson

With ongoing active legislation in many states, the information provided in this packet may quickly become outdated as new duties are added and requirements in education and supervision are changed. The research for this project was done mid August thru mid October 2003 and is accurate to the best of my knowledge and sources used.

Natalie Kaweckyj, RDA, CDA, CDPMA, COA, COMSA, FADAA
ADAA 7th District Trustee
Immediate Past President of the Minnesota Dental Assistants Association
October 31, 2003

**AMERICAN DENTAL ASSISTANTS ASSOCIATION
STATEMENT OF PROFESSIONAL
COMMITMENT**

As a professional Dental Assistant, I will promote the advancement of career of Dental Assistants and the Dental Assisting profession in matters of ***education, legislation, credentialing and professional activities which enhance the delivery of quality dental health care to the public.***

Definitions of Supervision in Minnesota for Registered Dental Assistants

The legislative scope of practice in Minnesota: Varies by duty from general supervision to direct supervision

GENERAL - The dentist has authorized the procedures and they are being carried out in accordance with the dentist's diagnosis and treatment plan.

INDIRECT - The dentist is in the office, authorizes the procedures, and remains in the office while the allied dental professional is performing the procedures.

DIRECT - The dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and before dismissal of the patient, evaluates the performance of the allied dental professional.

Key

N/A Not Applicable (or in some cases Not Available)

X – Duty/function is done or is allowable

STATES WITH REGISTRATION

**IOWA
MARYLAND
MINNESOTA
NEW JERSEY
NORTH CAROLINA
NORTH DAKOTA
TENNESSEE
VERMONT**

IOWA

Name of the agency that provides the regulation:

Iowa Board of Dental Examiners
400 SW 8th St., Suite D
Des Moines, IA 50309-4687
(515) 281-5157
www.state.ia.us/dentalboard

Board structure: five dentists, two dental hygienists, and two public members

The type/level of regulation: Registration, radiology permit required

The legislative scope of practice: Registered Dental Assistant – Extra-oral duties under general supervision, intra-oral procedures under direct supervision; Expanded Functions Dental Assistant same as above.

“Direct supervision” means that the dentist is present in the treatment facility, but it is not required that the dentist be physically present in the treatment room while the dental assistant is performing acts assigned by the dentist.

“General supervision” means that a dentist has delegated the services to be provided by a dental assistant. The dentist need not be present in the facility while these services are being provided.

“Personal supervision” means the dentist is physically present in the treatment room to oversee and direct the services of the dental assistant.
There are two categories of dental

assistants. Both the supervising dentist and dental assistant are responsible for maintaining documentation of training. Such documentation must be maintained in the office of practice and shall be provided to the board upon request.

20.4(1) Dental assistant trainee. Dental assistant trainees are all individuals who are engaging in on-the-job training to meet the requirements for registration and who are learning the necessary skills under the personal supervision of a licensed dentist. Trainees may also engage in on-the-job training in dental radiography pursuant to 650—22.3(136C,153). The dental assistant trainee shall meet the following requirements:

a. Within six months of employment, the dental assistant trainee shall successfully complete a course of study and examination in the areas of infection control, hazardous materials, and jurisprudence.

The course of study shall be prior approved by the board and sponsored by a board-approved postsecondary school.

b. Prior to satisfactorily completing six months of work as a dental assistant within the previous 12-month period, the trainee must apply to the board to be reclassified as a registered dental assistant.

c. Dental assistant trainee status is valid for practice for a maximum of six months. If trainee status has expired, the trainee must meet the requirements for registration and receive a certificate of registration in order to practice as a dental assistant.

d. Notwithstanding paragraphs “b” and “c,” the expiration date for dental assistant trainee status for a person enrolled in a cooperative education or work-study program through an Iowa high school shall be extended until the trainee is 18 years of age and a high school graduate or equivalent. However, a trainee under 18 years of age shall not participate in dental radiography.

20.4(2) Registered dental assistant. A registered dental assistant may perform under general supervision all extra oral duties in the dental office or dental clinic that are assigned by the dentist that are consistent with these rules. During intra oral procedures, the registered dental assistant may, under direct supervision, assist the dentist in performing duties assigned by the dentist that are consistent with these rules. The registered dental assistant may take radiographs if qualified pursuant to 650—Chapter 22.

20.4(3) Expanded function dental assistant. Rescinded IAB 9/17/03, effective 10/22/03.

Regulatory requirements

Continuing education: 20 hours/biennium to include:

At least two continuing education hours must be in the subject area of infection control; a maximum of three hours may be in cardiopulmonary resuscitation; for dental assistants who have a special endorsement in radiography, at least two hours of continuing education must be obtained in the subject area of radiography.

IOWA DUTIES – delegation based on the education and experience of the dental assistant	D A T	R D A	MINNESOTA SUPERVISION
Placement of sealants	-	-	Indirect
Taking occlusal registrations	-	-	Indirect
Placement of gingival retraction cord	-	-	N/A
Removal of gingival retraction cord	-	-	
Fabrication and removal of provisional restorations	-	-	Direct
Application of cavity liners/bases, desensitizing agents	-	-	Indirect
Application of bonding systems	-	-	N/A
Placement and removal of dry socket material	-	-	N/A
Placement of periodontal dressings	-	-	Indirect
Testing pulp vitality	-	-	N/A
Monitoring of nitrous	-	-	Indirect

MARYLAND

Name of the agency that provides the regulation:

Maryland State Board of Dental Examiners
The Benjamin Rush Building/Spring Grove Hospital Ctr.
55 Wade Avenue
Baltimore, MD 21228
(410) 402-8500
www.dhmf.state.md.us/dental

Board structure: nine dentists, three dental hygienists, and three consumer members

The type/level of regulation: Registration

National Certification

Certified Dental Assistant (CDA)
Certified Orthodontic Assistant (COA)

State Qualified (MDG) and (MDO)

Maryland Dental Assistant General Duties
Maryland Dental Assistant General Duties in Orthodontics

Radiology Certification needed to expose radiographs.

The legislative scope of practice: Direct Supervision

"Direct supervision" means that the supervising dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and, before dismissal of the patient, personally evaluates the performance of the dental assistant.

Regulatory requirements

Continuing education: none

Dental Assistants Recognized as Qualified in General Duties:

(State or Certified by the Dental Assisting National Board)

A. A dentist may use the services of a dental assistant to perform certain duties if the dental assistant:

(1) Is certified by the Dental Assisting National Board as a CDA qualified in general duties; or

(2) Was recognized by the Board of Dental Examiners, on or before the effective date of these regulations, as a dental assistant qualified in general duties.

B. If a dental assistant meets the qualifications of §A of this regulation, a dentist may use the services of the dental assistant qualified in general duties to perform intra oral tasks, provided that the tasks are performed only in response to a specific instruction from and under the direct supervision of a licensed dentist:

Dental Assistants Recognized as Qualified in Orthodontics

(State or Certified by the Dental Assisting National Board)

A. A dentist may use the services of a dental assistant to perform certain duties if the dental assistant:

(1) Is certified by the Dental Assisting National Board in orthodontics as a COA or

(2) Was recognized by the Board of Dental Examiners, on or before the effective date of these regulations, as a dental assistant qualified in orthodontics.

B. If a dental assistant meets the qualifications of §A of this regulation, a dentist may permit the dental assistant qualified in orthodontics to perform intra oral tasks, provided that the tasks are performed only in response to a specific instruction from and under direct supervision of a licensed dentist.

A dentist may not permit a dental assistant to place and expose radiographs unless the dental assistant is a dental assistant certified to practice dental radiation technology.

MARYLAND DUTIES	D A	M D G	M D O	C D A	C O A	MINNESOTA SUPERVISION
Rinsing and aspiration of the oral cavity	D	D	D			X
Retraction of the lips, cheek, tongue, and flaps	D	D	D			X
Placement and removal of materials for the isolation of the dentition, provided that the material is not retained by the dentition	D	D	D			X
Instructing on oral hygiene	D	D	D			N/A
Checking for loose bands	D	D	D			General
Performing intra oral photography	D	D	D			N/A
Taking impressions for study models or diagnostic casts	D	D	D			Indirect
Constructing athletic mouth guards on models	D	D	D			Indirect
Applying topical anesthesia	D	D	D			Indirect
Curing by the use of halogen light	D	D	D			N/A
Polishing of teeth/rotary instruments	-	-	-			Indirect
Performing pulp vitality testing	-	D	-			N/A
Placing an initial surgical dressing	-	-	-			N/A
Placing or removing a rubber dam	-	D	-			Indirect
Placing or removing a matrix band	-	D	-			Direct
Preparing and fitting stainless steel crowns	-	D	-			Direct (with Board approved course)
Placing or removing retraction cord	-	D	-			N/A
Condensing, carving, or finishing any restoration	-	-	-			Direct (with Board approved course)
Applying pit and fissure sealants	-	-	-			Indirect (with Board approved course)
Drying a root canal	-	D	-			Indirect
Removing or placing a periodontal dressing (except initial placement)	-	D	-			Indirect
Adjusting prosthetic appliances	-	-	-			N/A
Cementing temporary or permanent crowns or restorations	-	D	-			Direct (temporary only)
Preparing temporary crowns	-	D	-			Direct
Taking alginate impressions for intra oral appliances	-	D	D			N/A
Applying topical fluoride	-	D	D			Indirect
Preparing and fitting orthodontic bands	-	-	D			Indirect
Applying desensitizing agents	-	D	D			N/A
Fabricating indirect restorations	-	D	-			N/A
Remove sutures	-	D	-			Indirect
Etching	-	D	D			Indirect/Direct
Removing excess cement from around orthodontic bands	-	-	D			Indirect

Placing and removing arch wires	-	-	D	N/A
Cementing of orthodontic bands, placement of bonded attachments	-	-	D	N/A
Removal of cemented or bonded orthodontic bands and attachments	-	-	D	N/A
Placing elastics and ligatures	-	-	D	Indirect
Selecting headgear	-	-	D	N/A
Removal of excess cement from restorations	-	D	-	Indirect
Any other duty approved by the Board	D	D	D	X

MINNESOTA

Name of the agency that provides the regulation:

Minnesota Board of Dentistry
2829 University Ave SE, Suite 450
Minneapolis, MN 55414
(612) 617-2260
www.dentalboard.state.mn.us

Board structure: five dentists, one registered dental hygienist, one registered dental assistant, and two public members

The type/level of regulation: Registration

The legislative scope of practice: Varies by duty from general supervision to direct supervision

GENERAL - The dentist has authorized the procedures and they are being carried out in accordance with the dentist's diagnosis and treatment plan.

INDIRECT - The dentist is in the office, authorizes the procedures, and remains in the office while the allied dental professional is performing the procedures.

DIRECT - The dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and before dismissal of the patient, evaluates the performance of the allied dental professional.

Regulatory requirements

Continuing education: 25 credits every 5 years

MINNESOTA DUTIES	LEVEL OF SUPERVISION
Apply topical medications that are physiologically reversible, topical fluoride, bleaching agents, and cavity varnishes all of which must be prescribed by dentists	Indirect
Cut arch wires, remove loose bands, or remove loose brackets on orthodontic appliances to provide palliative treatment	General
Remove excess bond material from orthodontic appliances with hand instruments	Direct
Recement intact temporary restorations and place temporary fillings (not including temporization of inlays, onlays, crowns, and ridges) to provide palliative treatment	General
Take impressions for casts and appropriate bite registration	Indirect
Remove excess bond material from teeth with rotary instruments after removal of orthodontic appliances	Direct (with Board approved course)
Etch appropriate enamel surfaces, apply and adjust pit and fissure sealants	Indirect (with Board approved course)
Monitor a patient who has been induced by a dentist into nitrous oxide-oxygen relative analgesia	Indirect
Administer nitrous oxide inhalation analgesia pursuant to the rule provisions	Direct (with Board approved course)
Perform restorative procedures limited to placing, contouring, and adjusting amalgam restorations, glass ionomers, and supragingival composite restorations (class I & IV)	Direct (with Board approved course)
Adapting and cementing stainless steel crowns	Direct (with Board approved course)
Place and remove matrix bands	Direct
Preselect orthodontic bands	Indirect
Place cotton pellets and temporary restorative materials into endodontic openings	Indirect
Place and remove rubber dam	Indirect
Remove excess cement from inlays, crowns, bridges and orthodontic appliances with hand instruments only	Indirect
Take radiographs	Indirect
Perform mechanical polishing to clinical crowns not including instrumentation. Removal of calculus by instrumentation must be done by the dentist or dental hygienist before mechanical polishing	Indirect
Etch appropriate enamel surfaces before bonding of orthodontic appliances by a dentist	Indirect
Remove temporary restorations with hand instruments only	Direct
Fabricate, cement, and adjust temporary restorations extra orally or intra orally	Direct
Dry root canals with paper points	Indirect
Place and remove elastic orthodontic separators	Indirect
Remove and replace ligature ties on orthodontic appliances	Indirect
Remove sutures	Indirect
Place and remove periodontal packs	Indirect

NEW JERSEY

Name of the agency that provides the regulation:

New Jersey Board of Dentistry
P.O. Box 45005
Newark, NJ 07101
(973) 504-6405
www.state.nj.us/lps/ca/medical.htm#den3

Board structure: eight dentists, one dental hygienist, and two public members

The type/level of regulation: Registration for Expanded Functions, Limited Registration, License for Radiology; also unlicensed dental assistants are not regulated by the Board

The legislative scope of practice: Direct Supervision

"Direct supervision" means that a licensed dentist is physically present in the office at all times during the performance of any act and that such acts are performed pursuant to the licensed dentist's order, control and full professional responsibility.

Regulatory requirements

Continuing education: 20 hours

New Jersey Duties	L D A	L R D A O	R D A	MINNESOTA SUPERVISION
Placement/removal of rubber dams	-	-		Indirect
Place and remove matrices and wedges	-	-		Direct
Place temporary sedative restorations	-	-		N/A
Perform bite registration procedures to determine occlusal relationships of diagnostic models only	-	D		Indirect
Place and remove periodontal dressings	-	-		Indirect
Place and remove surgical dressings	-	-		N/A
Place and remove retraction cords	-	-		N/A
Place and remove medicated pellets	-	-		N/A
Place amalgam and gold foil in a tooth for consideration by the dentist	-	-		N/A
Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intra-oral occlusal adjustment	-	-		Direct
Take impressions for diagnostic models and models to be used as counters for fixed or removable prostheses	-	D		Indirect
Remove sutures	-	-		Indirect
Remove excess cement from crowns or other restorations and orthodontic appliances	-	D		Indirect

Pre-select stainless steel crowns and temporary crowns intra-orally	-	-	Direct
Pre-select stainless steel crowns and temporary crowns on diagnostic models	D	D	Indirect
Select shades of prosthetic appliances	D	-	N/A
Take dental photographs including the use of intra-oral cameras	D	D	N/A
Hold a curing light for any dental procedure. Such curing light shall not include a laser	D	-	N/A
Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes and water	D	D	General
Assist a licensed dentist in the administration of nitrous oxide, provided the licensed dentist is physically present in the operatory at all times during the procedure	D	-	Indirect
Provide a written work authorization for emergency repair of a dental prosthesis provided that the prosthesis shall not require any intra-oral procedure and shall be thereafter inserted by a licensed dentist	D	D	N/A
Provide oral health education including dietary analysis and clinical instruction in order to promote dental health	D	D	N/A
Take and record vital signs	D	-	X
Apply topical anesthetic agents	D	-	Indirect
Take radiographs	D	D	Indirect
Take impressions for and perform laboratory fabrication of athletic mouth guards. This shall not include insertion of the appliance	-	D	Indirect
Remove arch wires and ligature wires	-	D	X
Trial size (pre-select) orthodontic bands and wires	-	D	Indirect
Retract patient's cheek, tongue or other tissue parts during a dental procedure	D	D	General

NORTH CAROLINA

Name of the agency that provides the regulation:

North Carolina State Board of Dental Examiners
15100 Weston Parkway, Ste. 101
Cary, NC 27513
(919) 678-8223
www.ncdentalboard.org

Board structure: six dentists, one dental hygienist, and one public member

The type/level of regulation: A Dental Assistant I is a dental assistant who does not qualify by training and experience for classification as a Dental Assistant II.

A Dental Assistant II is an expanded duty assistant who has completed training in accordance with Rule .0104 of this Section.

All delegated procedures must be reversible in nature.

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: none

NORTH CAROLINA DUTIES	DA I	DA II	MINNESOTA SUPERVISION
Impression for opposing and study models	-	-	Indirect
Apply sealants	-	-	Indirect (after board approved course)
Insert matrices and wedges	-	-	Direct
Place cavity liners and bases	-	-	Indirect
Place/remove rubber dam	-	-	Indirect
Cement temporary restorations	-	-	Direct
Apply acid etch materials	-	-	Indirect/direct
Apply bonding agents	-	-	Direct
Remove periodontal dressings	-	-	Indirect
Remove sutures	-	-	Indirect
Place gingival retraction cord	-	-	N/A
Remove excess cement	-	-	Indirect
Flush, dry and temporary close root canals	-	-	Indirect
Place and remove temporary restorations	-	-	Direct
Place, tie, remove ortho arch wires	-	-	Indirect
Insert spacers	-	-	Indirect
Fit/size ortho bands and brackets	-	-	Indirect
Apply desensitizing solutions	-	-	Indirect
Perform extra oral adjustments of any temporary restoration or appliance	X ³	-	Direct
Apply topical anesthetic/DentiPatch®	X	-	Indirect
Apply topical fluoride	X	-	Indirect
Expose radiographs	X ¹	-	Indirect
Write laboratory work orders	X ²	-	N/A
Write prescriptions (drugs)	X ²	-	N/A
Polish dentures	X ³	-	N/A
Take wax bites	-	-	Indirect
Monitor patient under nitrous	X ⁴	-	Direct
Oral Hygiene Instruction	X	-	N/A
Polish coronal portion of tooth	-	-	Indirect

Place amalgam in prep with carrier	X	Direct
Take blood pressure and vitals	X	X
Place ligature wires or lock pins		Indirect
Insert spacer wires or springs		N/A

X¹ After satisfactory completion of ONE of the following:

- 1) NC radiography equivalency examination
- 2) Dental assisting school (ADA accredited)
- 3) The Dental Assisting National Board Exam
- 4) Classification as a DA II in North Carolina

X² Exact words must be dictated by the dentist

X³ Extra-orally, upon instruction by the dentist and re-insertion by the dentist

X⁴ After completing a 7 hour board approved course in nitrous, unless included in the ADA-accredited program (DAII)

X⁵ after completing a 7 hour course (3 hours didactic, 4 hours clinical) in coronal polishing

NORTH DAKOTA

Name of the agency that provides the regulation:

North Dakota State Board of Dental Examiners
P.O. Box 7246
Bismarck, ND 58507-7246
(701) 258-8600
www.nddentalboard.org

Board structure: four dentists, one dental hygienist, and two public members

The type/level of regulation: Registration

Registered Dental Assistants, Qualified Dental Assistants

The legislative scope of practice: Direct Supervision

Regulatory requirements

Continuing education: eight hours annually

NORTH DAKOTA DUTIES	D A	Q D A	R D A	MINNESOTA SUPERVISION
Take and record vitals	X	X	X	X
Take and record preliminary medical history	X	X	X	X
Apply topical anesthetic	X	X	X	Indirect
Receive removable appliance or prosthesis for cleaning or repair	X	X	X	N/A
Take impressions for study casts	X	X	X	Indirect
Take dental radiographs	-	X	X	Indirect
Remove sutures	-	-	X	Indirect
Apply anticariogenic agents topically	-	-	X	Indirect
Place/remove rubber dams	-	-	X	Indirect
Remove excess cement from inlays, crowns, bridges, ortho appliances with hand instruments	-	-	X	Indirect
Place or remove ortho wires that have been activated by the dentist	-	-	X	N/A
Place and remove ligature wires and elastic ties	-	-	X	Indirect
Pre-select and pre-fit ortho bands	-	-	X	Indirect
Fabricate, place and remove a temporary crown, bridge, or onlay (teeth actively in treatment)	-	-	X	Direct
Monitor patient under nitrous	-	-	X	Indirect
Place/remove perio dressings	-	-	X	Indirect
Place/remove dry socket packing	-	-	X	N/A
Place elastic ortho separators	-	-	X	Indirect
Remove arch wires	-	-	X	Indirect
Cut arch wires	-	-	G	General
Remove loose bands or brackets	-	-	G	General
Provide palliative treatment	-	-	G	General
Perform nonsurgical clinical and laboratory oral diagnosis tests	-	-	X	N/A
Pulp testing	-	-	X	N/A
Coronal polish after prophylaxis by dentist or hygienist	-	-	X	Indirect
Acid-etch enamel surface prior to direct bonding of ortho appliances or composite restorations	-	-	X	Indirect/Direct
Take impressions for palliative post ortho treatment ortho retainers which do not replace missing teeth	-	-	X	N/A
Impressions for mouth guards, bleaching trays, splints, and rapid palatal expanders	-	-	X	Indirect

Apply desensitizing agents to external surfaces	-	-	X	Indirect
Place matrices and wedges	-	-	X	Direct
Apply sealants	-	-	X	Indirect (after Board approved course)
Dry root canal with paper points	-	-	X	Indirect

TENNESSEE

Name of the agency that provides the regulation:

Tennessee Board of Dentistry
1ST Floor, Cordell Hull Bldg.
425 5th Ave N
Nashville, TN 37247-1010
(888) 310-4650 x 25073
www2.state.tn.us/health/Boards/Dentistry

Board structure: seven practicing dentists, two practicing dental hygienists, one practicing registered dental assistant, and one citizen member

The type/level of regulation: Registration; two types of dental assistants a practical dental assistant is an auxiliary employee of a licensed dentist(s) who is receiving practical chair side dental assisting training from a licensed dentist(s) or is a dental assistant student in an educational institution accredited by the Commission on Dental Accreditation of the American Dental Association. They are not registered.

A dental assistant who has received a registration from the Board pursuant to rule 0460-4-.02.

Certificates for some of the expanded duties (nitrous oxide and coronal polishing)

The legislative scope of practice: both practical and registered dental assistants practice under direct supervision

Regulatory requirements

Continuing education: All registered dental assistants are all required to fulfill 24 hours of continuing education, in subject matters pertaining to the delegable or assignable registered dental assistant duties or additional certifications (coronal polishing, etc.), during the two calendar year cycle (January 1 of an odd year - December 31 of an even year) and keep a current C.P.R. card at all times. A minimum of 2 of the required 24 biennial hours must be obtained in the area of chemical dependency education.

TENNESSEE DUTIES	P D A	R D A	MINNESOTA SUPERVISION
Taking Radiographs	-	-	Indirect
Apply fluoride	-	-	Indirect
Dietary instruction	-	-	N/A
Charting of oral conditions	-	-	X
Vital stats recording	-	-	X
Placement/removal of matrices	-	-	Direct
Cement removal form bands and restorations	-	-	Indirect
Removal of staples	-	-	N/A
Removal of sutures	-	-	Indirect
Fabrication, placement and removal of temporary restorations	-	-	Direct
Place/remove rubber dam	-	-	Indirect
Place/remove dry socket material	-	-	N/A
Place/remove periodontal dressing	-	-	Indirect
Taking of dental smears	-	-	N/A
Alginate impressions	-	-	Indirect
Removal of ligature and arch wires	-	-	Indirect
Pre-selecting arch wires	-	-	N/A
Bending arch wires	-	-	N/A
Placement of arch wires (after approval of dentist)	-	-	N/A
Selection of ortho bands	-	-	Indirect
Refitting, Cementation	-	-	N/A
Curing, Removal of brackets or bands	-	-	N/A
Packing/removing retraction cord	-	-	N/A
Ligation of arch wires to brackets	-	-	N/A
Placement of chain elastics on brackets	-	-	N/A
Placement of hooks on brackets	-	-	N/A
Placement of springs on wires	-	-	N/A
Removal of loose or broken bands or brackets	-	-	General
Placement/removal or pretreatment separators	-	-	Indirect
Removal of excess cement from supragingival surfaces with hand instruments	-	-	Indirect
Application of topical anesthetic	-	-	Indirect
Application of desensitizing agents	-	-	Indirect
Placement of cavity liners/bases	-	-	N/A
Application of tooth conditioners for bonding	-	-	N/A
Select and pre-fit stainless steel crowns	-	-	Direct (with Board approved course)
Take oral cytologic smears	-	-	N/A
Pulp vitality testing	-	-	N/A
Packing of pulpotomy paste	-	-	N/A
Drying canals with paper points	-	-	Indirect
Call in prescriptions as instructed by DDS	-	-	N/A
Fitting, adjusting, cementation correctional appl.	-	-	N/A

Wound care as directed	N/A
Irrigate extraction site	N/A
Place exposure chains and attachments	N/A
Administration of nitrous	Direct (with Board approved course)
Monitoring of nitrous	Indirect
Coronal polishing	Indirect
Application of sealants	Indirect (with Board approved course)

*** Additional certificate needed for Registered Dental Assistants to legally perform these duties**

VERMONT

Name of the agency that provides the regulation:

Vermont State Board of Dental Examiners
109 State Street
Montpellier, VT 05609-1106
(802) 828-2465
www.vtprofessionals.org/opr1/dentists

Board structure: six dentists, one dental hygienist, and one public member

The type/level of regulation: Registration and Certification

There are three categories of dental assistants:

Traditional Dental Assistant.

A traditional dental assistant may perform all extra-oral duties in the dental office or dental clinic, which are assigned by the dentist. During intra-oral procedures, the traditional dental assistant may assist the dentist or clinical staff as assigned by the dentist. The traditional dental assistant may take radiographs under a special endorsement of the registration.

Certified Dental Assistant.

A certified dental assistant may perform all the duties for which the certified dental assistant has received formal training in an approved program accredited by the Commission on Dental Accreditation of the American Dental Association and for which the certified dental assistant has been certified.

Expanded Function Dental Assistant.

A certified dental assistant or a licensed dental hygienist who has successfully completed a formal program in expanded function duties at an accredited dental assisting program accredited by the Commission on Dental Accreditation of the American Dental Association may perform those functions for which the certified dental assistant or licensed dental hygienist has been trained upon becoming employed by a licensed dentist.

The legislative scope of practice: Direct supervision

Regulatory requirements

Continuing education: none

Delegation of duties is left to the practicing dentist. Non-allowable duties include:

- Diagnosis
- Treatment planning and prescription
- Authorization for restorative, prosthodontic or endodontic appliances
- Surgical procedures on hard and soft tissues within the oral cavity or any other intra oral procedure that contribute to or results in an irremediable alteration of the oral anatomy.