



Oregon

Kate Brown, Governor

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TELECONFERENCE

MEETING NOTICE

LICENSING, STANDARDS AND COMPETENCY COMMITTEE

Oregon Board of Dentistry
1500 SW 1st Ave, Suite 770
Portland, OR 97201

October 14, 2015
6:00 p.m.

Committee Members:

Amy B. Fine, D.M.D., Chair

Gary Underhill, D.M.D.

Yadira Martinez, R.D.H., E.P.P.

Daren L. Goin, D.M.D. – ODA Representative

Susan Kramer, R.D.H. – ODHA Representative

Mary Harrison, CDA, EFDA, EFODA – ODAA Representative

AGENDA

Call to Order Amy B. Fine, D.M.D., Chair 6:00 p.m.

Review Minutes of December 18, 2014 Committee Meeting
December 18, 2014 Minutes – **Attachment #1**

Review and discuss DANB certifications for dental assistants and correspondence from DANB-
Attachment #2

Review and discuss the request for the addition of a certificate for pediatric expanded function assistant.

Review and discuss the request for the addition of a certificate for a prevention focused dental assistant.

EFDA coronal polishing timing in regards to provider (dentist or hygienist) seeing patient.
Rule OAR 818-042-0070 – Expanded Function Dental Assistants (EFDA) – **Attachment #3**

Review and discuss EFDA packing cord subgingivally.
Rule OAR 818-042-0090 – Additional Functions of EFDAs – **Attachment #4**

Any other business

Adjournment



**Licensing, Standards and Competency Committee Meeting
Minutes
December 18, 2014**

MEMBERS PRESENT: Gary Underhill, D.M.D.
Yadira Martinez, R.D.H., E.P.P.
Daren L. Goin, D.M.D., ODA Representative
Lisa J. Rowley, R.D.H., M.S., ODHA Representative

STAFF PRESENT: Patrick D. Braatz, Executive Director
Paul Kleinstub, D.D.S., M.S., Dental Director/Chief Investigator
Stephen Prisby, Office Manager
Teresa Haynes, Examination and Licensing Manager

ALSO PRESENT: Lori Lindley, Sr. Assistant Attorney General

BOARD MEMBERS PRSENT: Todd Beck, D.M.D.; Alton Harvey, Sr.; Brandon Schwindt,
D.M.D., via telephone (portion of meeting); Julie Ann Smith,
D.D.S., M.D. (portion of meeting)

VISITORS PRESENT: Steven Duffin, D.D.S., Shore Dental; R. Mike Shirtcliff,
D.M.D., Advantage Dental; Lynn Ironside, R.D.H., ODHA;
Alex Shebiel, Lindsay, Hart/ODHA

Call to Order: The meeting was called to order by Dr. Underhill at 7:07 p.m. at the Board office; 1500 SW 1st Ave., 7th Floor Conference Room, Portland, Oregon.

MINUTES

Dr. Goin moved and Ms. Martinez seconded that the minutes of the August 23, 2012 meeting be approved as presented. The motion passed with Dr. Underhill, Ms. Martinez, Dr. Goin and Ms. Rowley voting aye.

Silver Diamine Fluoride

OAR 818-035-0025 – Prohibitions

OAR 818-035-0030 – Additional Functions of Dental Hygienists

OAR 818-042-0040 – Prohibited Acts

Ms. Rowley moved and Dr. Goin seconded that the Committee recommend to the Board that based on the Committee's review of information on silver diamine fluoride and based on the interpretation of the Board rules, that silver diamine fluoride is just another fluoride and there is no prohibition from allowing dental hygienists and dental assistants from applying fluoride under the supervision of a licensed dentist. The motion passed Dr. Underhill, Ms. Martinez, Dr. Goin and Ms. Rowley voting aye.

818-035-0025

Prohibitions

A dental hygienist may not:

- (1) Diagnose and treatment plan other than for dental hygiene services;
- (2) Cut hard or soft tissue with the exception of root planing;
- (3) Extract any tooth;
- (4) Fit or adjust any correctional or prosthetic appliance except as provided by OAR 818-035-0030(1)(h);
- (5) Administer or dispense any drugs except as provided by OAR 818-035-0030, 818-035-0040, 818-026-0060(11) and 818-026-0070(11);
- (6) Place, condense, carve or cement permanent restorations except as provided in OAR 818-035-0072, or operatively prepare teeth;
- (7) Irrigate or medicate canals; try in cones, or ream, file or fill canals;
- (8) Use the behavior management techniques of Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.
- (9) Place or remove healing caps or healing abutments, except under direct supervision.
- (10) Place implant impression copings, except under direct supervision.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.020(1)

Hist.: DE 2-1992, f. & cert. ef. 6-24-92; DE 2-1997, f. & cert. ef. 2-20-97; OBD 7-1999, f. 6-25-99, cert. ef. 7-1-99; OBD 2-2000(Temp), f. 5-22-00, cert. ef. 5-22-00 thru 11-18-00; OBD 2-2001, f. & cert. ef. 1-8-01; OBD 15-2001, f. 12-7-01, cert. ef. 1-1-02; OBD 2-2005, f. 1-31-05, cert. ef. 2-1-05; OBD 2-2007, f. 4-26-07, cert. ef. 5-1-07; OBD 1-2008, f. 11-10-08, cert. ef. 12-1-08; OBD 4-2011, f. & cert. ef. 11-15-11; OBD 1-2014, f. 7-2-14, cert. ef. 8-1-14

818-035-0030

Additional Functions of Dental Hygienists

(1) In addition to functions set forth in ORS 679.010, a dental hygienist may perform the following functions under the general supervision of a licensed dentist:

- (a) Make preliminary intra-oral and extra-oral examinations and record findings;
- (b) Place periodontal dressings;
- (c) Remove periodontal dressings or direct a dental assistant to remove periodontal dressings;
- (d) Perform all functions delegable to dental assistants and expanded function dental assistants providing that the dental hygienist is appropriately trained;

(e) Administer and dispense antimicrobial solutions or other antimicrobial agents in the performance of dental hygiene functions.

(f) Administer and dispense fluoride, fluoride varnish, antimicrobial solutions for mouth rinsing or other non-systemic antimicrobial agents.

(g) Use high-speed handpieces to polish restorations and to remove cement and adhesive material.

(h) Apply temporary soft relines to complete dentures for the purpose of tissue conditioning.

(i) Perform all aspects of teeth whitening procedures.

(2) A dental hygienist may perform the following functions at the locations and for the persons described in ORS 680.205(1) and (2) without the supervision of a dentist:

(a) Determine the need for and appropriateness of sealants or fluoride; and

(b) Apply sealants or fluoride.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.025(2)(j)

Hist.: DE 5-1984, f. & ef. 5-17-84; DE 3-1986, f. & ef. 3-31-86; DE 2-1992, f. & cert. ef. 6-24-92; OBD 7-1999, f. 6-25-99, cert. ef. 7-1-99; OBD 1-2001, f. & cert. ef. 1-8-01; OBD 15-2001, f. 12-7-01, cert. ef. 1-1-02; OBD 1-2004, f. 5-27-04, cert. ef. 6-1-04; OBD 2-2005, f. 1-31-05, cert. ef. 2-1-05; OBD 3-2007, f. & cert. ef. 11-30-07; OBD 1-2008, f. 11-10-08, cert. ef. 12-1-08; OBD 2-2009, f. 10-21-09, cert. ef. 11-1-09; OBD 1-2014, f. 7-2-14, cert. ef. 8-1-14

818-042-0040

Prohibited Acts

No licensee may authorize any dental assistant to perform the following acts:

(1) Diagnose or plan treatment.

(2) Cut hard or soft tissue.

(3) Any Expanded Function duty (818-042-0070 and 818-042-0090) or Expanded Orthodontic Function duty (818-042-0100) without holding the appropriate certification.

(4) Correct or attempt to correct the malposition or malocclusion of teeth except as provided by OAR 818-042-0100.

(5) Adjust or attempt to adjust any orthodontic wire, fixed or removable appliance or other structure while it is in the patient's mouth.

(6) Administer or dispense any drug except fluoride, topical anesthetic, desensitizing agents, over the counter medications per package instructions or drugs administered pursuant to OAR 818-026-0030(6), OAR 818-026-0050(5)(a), 818-026-0060(11), 818-026-0065(11), 818-026-0070(11) and as provided in 818-042-0070 and 818-042-0115.

(7) Prescribe any drug.

(8) Place periodontal packs.

- (9) Start nitrous oxide.
- (10) Remove stains or deposits except as provided in OAR 818-042-0070.
- (11) Use ultrasonic equipment intra-orally except as provided in OAR 818-042-0100.
- (12) Use a high-speed handpiece or any device that is operated by a high-speed handpiece intra-orally.
- (13) Use lasers, except laser-curing lights.
- (14) Use air abrasion or air polishing.
- (15) Remove teeth or parts of tooth structure.
- (16) Cement or bond any fixed prosthetic or orthodontic appliance including bands, brackets, retainers, tooth moving devices, or orthopedic appliances except as provided in 818-042-0100.
- (17) Condense and carve permanent restorative material except as provided in OAR 818-042-0095.
- (18) Place any type of cord subgingivally.
- (19) Take jaw registrations or oral impressions for supplying artificial teeth as substitutes for natural teeth, except diagnostic or opposing models or for the fabrication of temporary or provisional restorations or appliances.
- (20) Apply denture relines except as provided in OAR 818-042-0090(2).
- (21) Expose radiographs without holding a current Certificate of Radiologic Proficiency issued by the Board (818-042-0050 and 818-042-0060) except while taking a course of instruction approved by the Oregon Health Authority, Oregon Public Health Division, Office of Environmental Public Health, Radiation Protection Services, or the Oregon Board of Dentistry.
- (22) Use the behavior management techniques known as Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.
- (23) Perform periodontal probing.
- (24) Place or remove healing caps or healing abutments, except under direct supervision.
- (25) Place implant impression copings, except under direct supervision.
- (26) Any act in violation of Board statute or rules.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.020, 679.025 & 679.250

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD 2-2000(Temp), f. 5-22-00, cert. ef. 5-22-00 thru 11-18-00; OBD 1-2001, f. & cert. ef. 1-8-01; OBD 15-2001, f. 12-7-01, cert. ef. 1-1-02; OBD 3-20BD 1-2010, f. 6-22-10, cert. ef. 7-1-10005, f. 10-26-05, cert. ef. 11-1-05; OBD 3-2007, f. & cert. ef. 11-30-07; OBD 1-2010, f. 6-22-10, cert. ef. 7-1-10; OBD 4-2011, f. & cert. ef. 11-15-11; OBD 2-2012, f. 6-14-12, cert. ef. 7-1-12; OBD 1-2014, f. 7-2-14, cert. ef. 8-1-14

OAR 818-042-0040 – Prohibited Acts

Ms. Rowley moved and Dr. Goin seconded that the Committee recommend the Board send OAR 818-042-0040(18) as presented to the Rules Oversight Committee. The motion passed with Dr. Underhill, Ms. Martinez, Dr. Goin and Ms. Rowley voting aye.

818-042-0040

Prohibited Acts

No licensee may authorize any dental assistant to perform the following acts:

- (1) Diagnose or plan treatment.
- (2) Cut hard or soft tissue.
- (3) Any Expanded Function duty (818-042-0070 and 818-042-0090) or Expanded Orthodontic Function duty (818-042-0100) without holding the appropriate certification.
- (4) Correct or attempt to correct the malposition or malocclusion of teeth except as provided by OAR 818-042-0100.
- (5) Adjust or attempt to adjust any orthodontic wire, fixed or removable appliance or other structure while it is in the patient's mouth.
- (6) Administer or dispense any drug except fluoride, topical anesthetic, desensitizing agents, over the counter medications per package instructions or drugs administered pursuant to OAR 818-026-0030(6), OAR 818-026-0050(a) OAR 818-026-0060(11), 818-026-0065(11), 818-026-0070(11) and as provided in 818-042-0070 and 818-042-0115.
- (7) Prescribe any drug.
- (8) Place periodontal packs.
- (9) Start nitrous oxide.
- (10) Remove stains or deposits except as provided in OAR 818-042-0070.
- (11) Use ultrasonic equipment intra-orally except as provided in OAR 818-042-0100.
- (12) Use a high-speed handpiece or any device that is operated by a high-speed handpiece intraorally.
- (13) Use lasers, except laser-curing lights.
- (14) Use air abrasion or air polishing.
- (15) Remove teeth or parts of tooth structure.
- (16) Cement or bond any fixed prosthetic or orthodontic appliance including bands, brackets, retainers, tooth moving devices, or orthopedic appliances except as provided in 818-042-0100.
- (17) Condense and carve permanent restorative material except as provided in OAR 818-042-0095.
- (18) Place any type of cord subgingivally **except as provided by in OAR 818-042-0090.**

- (19) Take jaw registrations or oral impressions for supplying artificial teeth as substitutes for natural teeth, except diagnostic or opposing models or for the fabrication of temporary or provisional restorations or appliances.
- (20) Apply denture relines except as provided in OAR 818-042-0090(2).
- (21) Expose radiographs without holding a current Certificate of Radiologic Proficiency issued by the Board (818-042-0050 and 818-042-0060) except while taking a course of instruction approved by the Oregon Health Authority, Oregon Public Health Division, Office of Environmental Public Health, Radiation Protection Services, or the Oregon Board of Dentistry.
- (22) Use the behavior management techniques known as Hand Over Mouth (HOM) or Hand Over Mouth Airway Restriction (HOMAR) on any patient.
- (23) Perform periodontal probing.
- (24) Place or remove healing caps or healing abutments, except under direct supervision.
- (25) Place implant impression copings, except under direct supervision.
- (26) Any act in violation of Board statute or rules.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.020, 679.025 & 679.250

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD 2-2000(Temp), f. 5-22-00, cert. ef. 5-22-00 thru 11-18-00; OBD 1- 2001, f. & cert. ef. 1-08-01; OBD 15-2001; f. 12-7-01, cert. ef. 1-1-02; OBD 3-2005, f. 10-26-05, cert. ef. 11-1-05; OBD 3- 2007, f. & cert. ef. 11-30-07; OBD 1-2010, f. 6-22-10, cert. ef. 7-1-10; OBD 4-2011, f. & cert. ef. 11-15-11; OBD 2-2012, f. 6-14-12, cert. ef. 7-1-12; OBD 6-2014, f.7-2-2014, cert. ef. 8-1-2014

OAR 818-042-0070 - Expanded Functions Dental Assistants (EFDA)

Ms. Rowley moved and Dr. Goin seconded that the Committee recommend the Board send OAR 818-042-0070(1) as presented to the Rules Oversight Committee. The motion passed with Dr. Underhill, Ms. Martinez, Dr. Goin and Ms. Rowley voting aye.

818-042-0070

Expanded Function Dental Assistants (EFDA)

The following duties are considered Expanded Function Duties and may be performed only after the dental assistant complies with the requirements of 818-042-0080:

- (1) 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;**
- (2) Remove temporary crowns for final cementation and clean teeth for final cementation;

- (3) Preliminarily fit crowns to check contacts or to adjust occlusion outside the mouth;
- (4) Place temporary restorative material (i.e., zinc oxide eugenol based material) in teeth providing that the patient is checked by a dentist before and after the procedure is performed;
- (5) Place and remove matrix retainers for alloy and composite restorations;
- (6) Polish amalgam or composite surfaces with a slow speed handpiece;
- (7) Remove excess supragingival cement from crowns, bridges, bands or brackets with hand instruments providing that the patient is checked by a dentist after the procedure is performed;
- (8) Fabricate temporary crowns, and temporarily cement the temporary crown. The cemented crown must be examined and approved by the dentist prior to the patient being released;
- (9) Under general supervision, when the dentist is not available and the patient is in discomfort, an EFDA may 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; and
- (10) Perform all aspects of teeth whitening procedures.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.020, 679.025 & 679.250

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD 1-2004, f. 5-27-04, cert. ef. 6-1-04; OBD 3-2005, f. 10-26-05, cert. ef. 11-1-05; OBD 2-2009, f. 10-21-09, cert. ef. 11-1-09

OAR 818-042-0090 – Additional Functions of EFDAs

Ms. Rowley moved and Dr. Goin seconded that the Committee recommend the Board send OAR 818-042-0090(3) as presented to the Rules Oversight Committee. The motion passed with Dr. Underhill, Ms. Martinez, Dr. Goin and Ms. Rowley voting aye.

818-042-0090

Additional Functions of EFDAs

Upon successful completion of a course of instruction in a program accredited by the Commission on Dental Accreditation of the American Dental Association, or other course of instruction approved by the Board, a certified Expanded Function Dental Assistant may perform the following functions under the indirect supervision of a dentist or dental hygienist providing that the procedure is checked by the dentist or dental hygienist prior to the patient being dismissed:

- (1) Apply pit and fissure sealants provided the patient is examined before the sealants are placed. The sealants must be placed within 45 days of the procedure being authorized by a dentist or dental hygienist.

(2) Apply temporary soft relines to complete dentures for the purpose of tissue conditioning.

(3) Place cord subgingivally.

Stat. Auth.: ORS 679

Stats. Implemented: ORS 679.025(2)(j) & 679.250(7)

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD

The meeting was adjourned at 7:25 p.m.

DRAFT

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From: Katherine Landsberg [mailto:klandsberg@danb.org]
Sent: Tuesday, October 06, 2015 3:06 PM
To: Stephen Prisby
Cc: Teresa Haynes; *Mary Harrison (Mary2805@aol.com); Cindy Durley; Johnna Gueorguieva
Subject: DANB Information

Dear Mr. Prisby,

Mary Harrison asked me to send you some materials related to the services of DANB and the DALE Foundation, in preparation for the Licensing, Standards and Competency Committee meeting by conference call scheduled for 10/14.

Preventive Functions Examinations

As you may know, DANB currently administers the Certified Preventive Functions Dental Assistant (CPFDA®) certification program, which consists of four component exams – the Coronal Polish (CP), Sealants (SE), Topical Fluoride (TF) and Topical Anesthetic (TA) exams. I am attaching the following items relative to this program:

1. CPFDA: Certified Preventive Functions Dental Assistant Certification Program Overview
2. Exam blueprints for the four component exams that make up the CPFDA certification – Coronal Polish (CP), Sealants (SE), Topical Fluoride (TF) and Topical Anesthetic (TA)

Pediatric Functions

Mary asked me to provide you with a link to information about the DALE Foundation's Behavioral Guidance and Management for the Pediatric Dental Patient online course. I am happy to do so, but first I would like to provide some background on the research leading up to the development of this course.

In 2011, DANB had worked with the American Academy of Pediatric Dentistry (AAPD) to survey AAPD members about the work of dental assistants in their practice. One of the goals of the survey was to determine whether a specialized certification for pediatric dental assistants was needed. Here are a few excerpts from the Executive Summary of the survey report:

In what ways do you believe that the role of a pediatric dental assistant varies from the role of a dental assistant in a general dentistry practice? (Question 10)

The vast majority of respondents (87%) cited knowledge of and ability to appropriately apply behavior management techniques to the pediatric population to be a primary skill required of pediatric dental assistants, that is not as critical for dental assistants working in general dental practices.

More than a quarter (28%) of survey respondents cited knowledge of and abilities in assisting with and monitoring patient sedation and addressing any related emergencies as the second key differentiator between pediatric dental assisting skills and those of their general dental practice counterparts. All other roles and responsibilities listed in the table that follows this question (#10) were cited by 9% or fewer of the survey respondents.

This next section will summarize responses to these two questions:

Do you delegate expanded functions to your pediatric dental assistants? (Question 11)

If so, which of the following functions do you delegate? (Question 12)

Just over half of the pediatric dentist respondents (58%) noted that they delegate expanded functions to their pediatric dental assistants. Because this question was not asked, it is unclear whether the 38% who do not delegate expanded functions to their assistants make this decision because few expanded functions pertinent to pediatric dental practice are allowed to be delegated in their state, or because this is simply the way the respondents choose to practice.

Of the functions (both “core” and “expanded”) delegated to pediatric dental assistants, the majority of respondents (60 to 96%, depending on the function) delegate these functions to their assistants:

- *Patient education*
- *Dental radiography*
- *Infection control*
- *Monitoring nitrous oxide/oxygen conscious sedation*
- *Preventive duties (such as Coronal Polish and the Application of Sealants and/or Topical Fluorides)*
- *Preparation for restorative functions (such as Dental Dam, Preliminary Impressions)*
- *Assisting with reversible restorative functions (such as Final Impressions, Matrices, Temporary Restorations/Crowns, Retraction Cord, Liners and Bases, and Place/Cure/Finish Composites and/or Amalgams)*

Because one of the key findings of the survey was that many pediatric dentists feel that behavioral management of the pediatric dental patient is a key skill for their dental assistants to have and the primary skill differentiating them from dental assistants in general practice, the AAPD decided to work with the DALE Foundation, DANB’s affiliate, on a course covering this topic. The DALE Foundation introduced the Behavioral Guidance and Management for the Pediatric Dental Patient online certificate program in March 2013. The course is estimated to be a six-hour course and concludes with a 50-question post-course assessment; learners who complete the course and assessment earn six CE credits. The price for the course is \$130 for six months of access. The learning objectives for the course are as follows:

- Understand age-specific mental, emotional and social developmental features of the pediatric dental patient
- Recognize the importance of flexibility and adaptability when working with pediatric and special needs patients
- Communicate and respond appropriately when faced with challenging behaviors in pediatric and special needs patients
- Apply commonly used behavior management techniques to virtual interactions with pediatric and special needs patients

More information about the DALE Foundation’s Behavioral Guidance and Management for the Pediatric Dental Patient course can be found online at the following location:

<http://www.dalefoundation.org/Courses-And-Study-Aids/Product-Catalog-Search/Behavioral-Guidance-and-Management-for-the-Pediatric-Dental-Patient>

The DALE Foundation can provide complimentary access to selected members of the Oregon Board of Dentistry and/or the Licensing, Standards and Competency Committee for evaluation purposes, if the Committee or the Board is considering including the course as a requirement for pediatric EFDAs.

Available Exam Options

Based on the results of the AAPD/DANB Survey, we imagine that, in addition to the preventive functions that are tested on the CPFDA certification exam, the pediatric EFDA scope of practice might also include some of the functions identified in the survey and listed above as being commonly delegated by pediatric dentists to their assistants. Since we don’t know specifically which functions the Committee will be considering, I am attaching a brief document containing abbreviated exam blueprints for all of the DANB national component exams making up DANB’s national certifications, which include the Certified Dental Assistant™ (CDA®), Certified Orthodontic Assistant (COA®), Certified Preventive Functions Dental Assistant (CPFDA®), Certified Restorative Functions Dental Assistant (CRFDA®), and National Entry Level Dental Assistant (NELDA™) certifications. (Please see third attachment.) This document will help the Committee members identify whether any DANB component exams correspond to the functions for which the Oregon Board would like to assess knowledge-based competency for pediatric EFDAs.

As you know, DANB currently administers the state-specific expanded functions exams for Oregon EFDAs and Oregon EFODAs. We are very open to discussing the development of an Oregon-specific exam for pediatric EFDAs; if the Licensing, Standards and Competency Committee’s conversation goes in that direction, I will be happy to coordinate a call with our testing department staff to exchange ideas and provide additional information.

Guidelines for Development of Courses in Placing Retraction Cord

DANB does not have any information related to guidelines for development of a course in placement of retraction cord on hand. We took a quick look and found some brief information the California rules and a guideline document on the West Virginia Board of Dentistry website. I have attached that information here (third and fourth attachments; the third attachment is an excerpt from the California section of DANB’s 2015 State Fact Booklet, which contains excerpts of state statutes and rules addressing the practice of dental assisting; I have highlighted the information related to retraction cord instruction).

I have reached out to one dental assisting educator from California who I believe may be able to provide some additional information. I will also attempt to identify a few other sources for the type of

information you are seeking and reach out to them for assistance. I will forward you whatever I am able to assemble by 10/12.

Please let me know if I can be of any further assistance. In the interim, I will work on gathering the additional information noted above.

Best regards,

Katherine

Katherine Landsberg

Assistant Director, Government Relations

klandsberg@danb.org

Dental Assisting National Board, Inc.

444 N. Michigan Ave., Suite 900

Chicago, IL 60611

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Abbreviated Blueprints for DANB National Certification Component Exams

Radiation Health and Safety (RHS®)
(Component of CDA® and NELDA™ certification)
100 multiple-choice items
1¼ hours testing time

Sub-Content Areas	% on exam
I. Expose and evaluate	26
II. Quality assurance and radiology regulations	21
III. Radiation safety for patients and operators	31
IV. Infection control	22

Infection Control* (ICE®)
(Component of CDA, COA® and NELDA certification)
100 multiple-choice items
1¼ hours testing time

Sub-Content Areas	% on exam
I. Patient and dental healthcare worker education	10
II. Standard/universal precautions and the prevention of disease transmission	
A. Prevent cross-contamination and disease transmission	20
B. Maintain aseptic conditions	10
C. Demonstrate an understanding of instrument processing	15
D. Demonstrate an understanding of asepsis procedures	15
III. Occupational safety	30

*References 2003 CDC Guidelines for Infection Control in Dental Health-Care Settings and Occupational Safety and Health Administration (OSHA) Standards

General Chairside Assisting (GC)**
(Component of CDA certification)
120 multiple-choice items
1½ hours testing time

Sub-Content Areas	% on exam
I. Collection and recording of clinical data	10
II. Chairside dental procedures	45
III. Chairside dental materials (preparation, manipulation, application)	9
IV. Lab materials and procedures	4
V. Patient education and oral health management	10
VI. Prevention and management of emergencies	12
VII. Office operations	10

Coronal Polish (CP)
(Component of CPFDA® certification)
100 multiple-choice items
75 minutes testing time

Sub-Content Areas	% on exam
I. Dental and oral anatomy	8
II. Oral prophylaxis	7
III. Objective of coronal polish	7
IV. Dental deposits	15
V. Polishing precautions	15
VI. Patient education and recordkeeping	10
VII. Abrasives and polishing agents	8
VIII. Polishing technique	20
IX. Infection control/OSHA protocol	10

Sealants (SE)
(Component of CPFDA and CRFDA® certification)
50 multiple-choice items
45 minutes testing time

Sub-Content Areas	% on exam
I. Purpose of sealants	10
II. Indications and contraindications for sealant application	40
III. Acid etching	10
IV. Sealants	40

Topical Anesthetic (TA)
(Component of CPFDA certification)
50 multiple-choice items
45 minutes testing time

Sub-Content Areas	% on exam
I. Patient preparation	10
II. Classifications	20
III. Precautions and contraindications	20
IV. Indications for use	30
V. Placement of the topical anesthetic (including infection control/OSHA protocol)	20

** Candidates for this exam must meet eligibility requirements established by DANB.

Topical Fluoride (TF)

(Component of CPFDA certification)

50 multiple-choice items

45 minutes testing time

Sub-Content Areas	% on exam
I. Basic information about fluoride	10
II. Indications and contraindications for topical fluoride	30
III. Benefits of topical fluoride	15
IV. Topical fluoride application	15
V. Fluoride preparations	10
VI. Adverse reactions	10
VII. Patient education	10

Anatomy, Morphology and Physiology (AMP)

(Component of CRFDA and NELDA certification)

105 multiple-choice items

80 minutes testing time

Sub-Content Areas	% on exam
I. Head and neck	15
II. Oral cavity	25
III. Tooth anatomy, morphology and related characteristics	20
IV. Tooth numbering systems	15
V. Occlusion	15
VI. Oral pathology	10

Impressions (IM)

(Component of CRFDA certification)

80 multiple-choice items

60 minutes testing time

Sub-Content Areas	% on exam
I. Purpose of impressions	15
II. Taking impressions	55
III. Patient management techniques	10
IV. Bite/occlusal registrations	10
V. Infection control/OSHA protocol	10

Temporaries (TMP)

(Component of CRFDA certification)

80 multiple-choice items

60 minutes testing time

Sub-Content Areas	% on exam
I. Temporary/provisional restorations	65
II. Temporary cement	20
III. Infection control/OSHA protocol	15

Isolation (IS)

(Component of CRFDA certification)

60 multiple-choice items

45 minutes testing time

Sub-Content Areas	% on exam
I. Purpose of isolation	20
II. Types and attributes/uses of various isolation systems/armamentaria	30
A. Matrices	
B. Wedges	
C. Dental dams and clamps	
D. Retraction material	
E. Additional methods (e.g., cotton/gauze, cheek protectors, suction devices)	
III. Placement and removal procedures	30
IV. Special health considerations	10
V. Infection control/OSHA protocol	10

Restorative Functions (RF)**

(Component of CRFDA certification)

105 multiple-choice items

80 minutes testing time

Sub-Content Areas	% on exam
I. Cavity liners and bases	7
II. Cavity classifications	7
III. Amalgam restorations	20
IV. Composite, glass ionomer and compomer restorations	30
V. Stainless steel crowns	12
VI. Procedural considerations	15
VII. Infection control/OSHA protocol	9

Orthodontic Assisting (OA)**

(Component of COA certification)

210 multiple-choice items

2¾ hours testing time

Sub-Content Area	% on exam
I. Collection and recording of clinical data	15
II. Orthodontic procedures	36
III. Chairside dental materials	5
IV. Laboratory materials and procedures	5
V. Patient education and oral health management	10
VI. Prevention and management of emergencies	5
VII. Office operations	5
VIII. Dental radiation health and safety	19

** Candidates for this exam must meet eligibility requirements established by DANB.



Dental Assisting National Board, Inc.

Measuring Dental Assisting Excellence®

CPFDA®

Certified Preventive Functions Dental Assistant Certification Program Overview

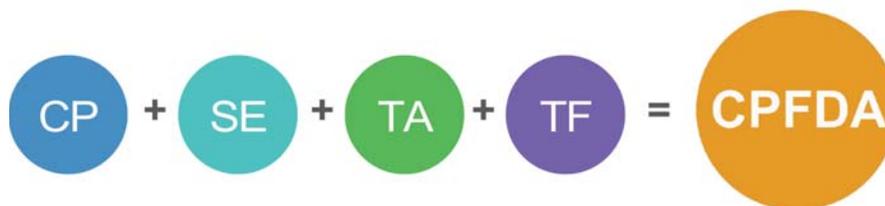
DANB's Certified Preventive Functions Dental Assistant (CPFDA) component exams are an objective measure of knowledge-based competency in the critical preventive functions that qualified dental assistants regularly perform in states that allow such duties to be delegated.

CPFDA Component Exams

CPFDA certification consists of the following component exams:

- ▶ Coronal Polish (CP) exam — 100 multiple-choice questions
- ▶ Sealants (SE) exam — 50 multiple-choice questions
- ▶ Topical Anesthetic (TA) exam — 50 multiple-choice questions
- ▶ Topical Fluoride (TF) exam — 50 multiple-choice questions

Candidates may take all four component exams in one administration (the CPFDA exam) or may take each component exam separately. A candidate must pass all four component exams within a three-year period to earn DANB's CPFDA certification.



Eligibility Requirements

There are no eligibility requirements to take the CPFDA exam or its component exams. However, a candidate must meet eligibility requirements and submit required documentation to earn CPFDA certification after passing all four component exams.

All pathways for certification require candidates to hold current DANB-accepted, hands-on CPR, BLS or ACLS certification. The eligibility pathways are as follows:

- Pathway I** Current Certified Dental Assistant™ (CDA®) certificant
- Pathway II** Commission on Dental Accreditation (CODA)-accredited dental assisting, dental hygiene or dental program graduate
- Pathway III** Former DANB CDA certificant (lapsed no more than 2 years); Minimum of 3,500 hours work experience as a dental assistant accrued during the previous four years
- Pathway IV** Current Registered Dental Hygienist (RDH) license; Minimum of 3,500 hours work experience as a dental hygienist accrued during the previous four years

Exam Administration

DANB's CPFDA component exams are administered six days a week at more than 250 secure, proctored computerized testing centers nationwide.

Renewal

DANB CPFDA certification is valid for one year and must be renewed annually. To renew certification, certificants must:

- ▶ Annually complete 12 credits of continuing dental education meeting DANB requirements
- ▶ Maintain DANB-accepted, hands-on CPR, BLS or ACLS certification
- ▶ Submit the annual renewal fee (currently \$60)

Former CPFDA certificants who do not renew their certification are no longer authorized to represent that they hold DANB's CPFDA certification and may not use the certification mark "CPFDA" following their names.

Background, Program Development and Launch

Recognizing that many states are expanding the duties that may be delegated to qualified dental assistants in the areas of preventive and restorative functions, in 2009, DANB's Board of Directors began the development of the Certified Preventive Functions Dental Assistant (CPFDA) certification. DANB staff compiled and analyzed information about state requirements for delegating preventive functions to dental assistants and then used this information to propose functions to be tested on the CPFDA exam, the grouping of functions within individual component exams, and CPFDA certification program eligibility requirements. More than 400 candidates participated in the CPFDA pretest, held July through December 2010. Pretest candidates represented the 32 states that then allowed dental assistants to perform all four CPFDA functions. Nearly 200 pretest candidates earned CPFDA certification.

DANB held webinars and forums with representatives of its communities of interest in fall 2011. Proposals were developed and provided to DANB's Expanded Functions Dental Assistant (EFDA) Exam Committee, which made recommendations to DANB's Examination Programs Committee. DANB's Examination Programs Committee then made CRFDA program recommendations to DANB's Board of Directors, which approved the CRFDA program at the Board's February 2012 meeting.

The CRFDA component exams were pretested from August 1, 2012, through November 30, 2012. DANB's Board reviewed the DANB Examination Programs Committee's CRFDA pretest data and approved the committee's recommended passing standards. CRFDA component exam results, certificates and certifications, if earned, were mailed to pretest candidates at the end of January 2013. DANB officially launched the CRFDA certification program in April 2013, with the publication of the CRFDA exam application packet on its website. Administration of the CRFDA component exams began May 1, 2013.

About DANB

DANB is recognized by the American Dental Association as the national certification board for dental assistants. DANB's mission is to promote the public good by providing credentialing services to the dental community. For those dental assistants who meet the eligibility and exam requirements, DANB certification may be earned in the areas of Certified Dental Assistant (CDA), Certified Orthodontic Assistant (COA®), Certified Preventive Functions Dental Assistant (CPFDA) and Certified Restorative Functions Dental Assistant (CRFDA®). DANB will introduce a new entry level certification, National Entry Level Dental Assistant (NELDA™), in early 2015. In addition to these national certifications, DANB offers certificates of knowledge-based competency in Radiation Health and Safety (RHS®); Infection Control (ICE®); Coronal Polish (CP); Sealants (SE); Topical Anesthetic (TA); Topical Fluoride (TF); Anatomy, Morphology and Physiology (AMP); Impressions (IM); Temporaries (TMP); and Isolation (IS).

DANB's CDA and COA certification programs are accredited by the National Commission for Certifying Agencies. Currently, there are more than 36,000 DANB certificants nationwide, and DANB certifications and certificates of knowledge-based competency are recognized or required in 38 states, the District of Columbia, the U.S. Air Force and the Department of Veterans Affairs. Passing DANB's exams demonstrates a dental assistant's competency in areas that are important to the health and safety of oral healthcare workers and patients alike.



Dental Assisting National Board, Inc.

Measuring Dental Assisting Excellence®

Certified Preventive Functions Dental Assistant (CPFDA®)

Exam Blueprint and Suggested References for Exam Preparation

CPFDA component exams

Coronal Polish (CP) Page 2

Sealants (SE) Page 5

Topical Anesthetic (TA) Page 7

Topical Fluoride (TF) Page 9

DANB's SE exam is also a component of the DANB Certified Restorative Functions Dental Assistant (CRFDA®) certification.

Note that each state's dental board implements regulations and establishes rules for delegating legally allowable duties to dental assistants. Passing one or more of the DANB component exams or earning DANB certification only conveys authority to perform these duties in those states that recognize these exams or this certification as meeting state dental assisting requirements. This information is at www.danb.org/Meet-State-Requirements.aspx.

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Coronal Polish (CP) Exam Blueprint

- (8%) I. DENTAL AND ORAL ANATOMY**
- A. Dental arches
 - B. Dentitions
 - C. Tooth divisions
 - D. Surfaces
 - E. Anatomic structures
 - F. Tooth anatomy
 - G. Universal numbering system
- (7%) II. ORAL PROPHYLAXIS**
- (7%) III. OBJECTIVE OF CORONAL POLISH**
- (15%) IV. DENTAL DEPOSITS**
- A. Dental plaque, dental calculus, materia alba
 - 1. Composition
 - 2. Characteristics
 - 3. Significance
 - 4. Relationship to disease
 - 5. Stages of formation
 - 6. Common locations
 - B. Stains
 - 1. Formation
 - 2. Classes
 - a. Extrinsic
 - b. Intrinsic
 - c. Exogenous
 - d. Endogenous
- (15%) V. POLISHING PRECAUTIONS**
- A. Fulcrum
 - 1. Rules for location
 - 2. Reason for using
 - B. Handpiece
 - 1. Speed
 - 2. Pressure
 - 3. Control
 - C. Others
 - 1. Adaptation of polishing cup
 - 2. Heat production
 - 3. Removal of tooth structure
 - 4. Aerosol production
 - 5. Demineralization
 - 6. Restorations
 - 7. Tooth sensitivity
 - 8. Implants

- (10%) VI. PATIENT EDUCATION AND RECORDKEEPING**
- A. Patient education and prevention
 - B. Recordkeeping
 - 1. Health history
 - 2. Legal requirements
- (8%) VII. ABRASIVES AND POLISHING AGENTS**
- A. Characteristics
 - B. Selection
 - 1. Indications
 - 2. Contraindications
 - C. Application
- (20%) VIII. POLISHING TECHNIQUE**
- A. Armamentarium
 - B. Positioning (ergonomics)
 - 1. Patient
 - 2. Operator
 - 3. Equipment
 - C. Disclosing
 - 1. Purpose
 - 2. Types
 - 3. Application
 - D. Establish a pattern/sequence
 - E. Stroke (polishing motion)
 - F. Flossing
 - G. Rinsing
 - H. Evaluation
- (10%) IX. INFECTION CONTROL/OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTOCOL**
- A. Safety/standard precautions
 - 1. Operator
 - 2. Patient
 - B. Cross-contamination
 - C. Disinfection of treatment room and equipment



Coronal Polish (CP)

Suggested References for Exam Preparation

DANB's CP exam is a component of the DANB Certified Preventive Functions Dental Assistant (CPFDA®) certification.

DANB exam committees use the following textbooks and reference materials to develop this exam. This list does not include all of the available textbooks and materials for studying for this exam; these are simply the resources that exam committee subject matter experts determined as providing the most up-to-date information needed to meet or surpass a determined level of competency for this exam.

This list is intended to help prepare for this exam. It is not intended to be an endorsement of any of the publications listed. You should prepare for DANB certification and component exams using as many different study materials as possible.

1. Bird, Doni L., and Debbie S. Robinson. *Modern Dental Assisting*. 10th and 11th ed. St. Louis, MO: Elsevier/Saunders, 2012 and 2015.
2. Phinney, Donna J., and Judy H. Halstead. *Dental Assisting: A Comprehensive Approach*. 3rd and 4th ed. Clifton Park, NY: Delmar, 2008 and 2013.
3. Wilkins, Esther M. *Clinical Practice of the Dental Hygienist*. 10th and 11th ed. Philadelphia, PA: Lippincott, 2008 and 2013.
4. Miller, Chris H. *Infection Control and Management of Hazardous Materials for the Dental Team*. 4th and 5th ed. St. Louis, MO: Elsevier/Mosby, 2009 and 2014.
5. Bird, Doni L., and Debbie S. Robinson. *Essentials of Dental Assisting*. 4th and 5th ed. St. Louis, MO: Elsevier/Saunders, 2009 and 2013.
6. Hatrick, Carol D., and W. S. Eakle. *Dental Materials: Clinical Applications for Dental Assistants and Dental Hygienists*. 3rd ed. St. Louis, MO: Elsevier/Saunders, 2016.

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Sealants (SE) Exam Blueprint

- (10%) I. PURPOSE OF SEALANTS**
 - A. Bacteria collection in pit and fissures
 - B. Dental caries
 - C. Patient education

- (40%) II. INDICATIONS AND CONTRAINDICATIONS FOR SEALANT APPLICATION**

- (10%) III. ACID ETCHING**

- (40%) IV. SEALANTS**
 - A. Classification
 - 1. Methods of curing
 - 2. Filled or unfilled
 - 3. Color
 - B. Application
 - 1. Preparation of tooth
 - 2. Armamentarium
 - 3. Post-operative care
 - C. Infection control/Occupational Safety and Health Administration (OSHA) protocol



Sealants (SE)

Suggested References for Exam Preparation

DANB's SE exam is a component of the DANB Certified Preventive Functions Dental Assistant (CPFDA®) and Certified Restorative Functions Dental Assistant (CRFDA®) certifications.

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3. Wilkins, Esther M. *Clinical Practice of the Dental Hygienist*. 10th and 11th ed. Philadelphia, PA: Lippincott, 2008 and 2013.
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Topical Anesthetic (TA) Exam Blueprint

- (10%) I. PATIENT PREPARATION**
 - A. Patient medical history
 - B. Patient education
 - C. Armamentarium

- (20%) II. CLASSIFICATIONS**
 - A. Types
 - B. Agents

- (20%) III. PRECAUTIONS AND CONTRAINDICATIONS**

- (30%) IV. INDICATIONS FOR USE**

- (20%) V. PLACEMENT OF THE TOPICAL ANESTHETIC (INCLUDING INFECTION CONTROL/OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION [OSHA] PROTOCOL)**



Topical Anesthetic (TA)

Suggested References for Exam Preparation

DANB's TA exam is a component of the DANB Certified Preventive Functions Dental Assistant (CPFDA®) certification.

DANB exam committees use the following textbooks and reference materials to develop this exam. This list does not include all of the available textbooks and materials for studying for this exam; these are simply the resources that exam committee subject matter experts determined as providing the most up-to-date information needed to meet or surpass a determined level of competency for this exam.

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2. Bird, Doni L., and Debbie S. Robinson. *Modern Dental Assisting*. 10th and 11th ed. St. Louis, MO: Elsevier/Saunders, 2012 and 2015.
3. Phinney, Donna J., and Judy H. Halstead. *Dental Assisting: A Comprehensive Approach*. 3rd and 4th ed. Clifton Park, NY: Delmar, 2008 and 2013.
4. Malamed, Stanley F. *Handbook of Local Anesthesia*. 6th ed. St. Louis, MO: Elsevier/Mosby, 2013.
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Topical Fluoride (TF) Exam Blueprint

- (10%) I. BASIC INFORMATION ABOUT FLUORIDE**
 - A. Metabolism
 - B. Fluoride in food and liquids
 - C. Fluoride in medications and supplements
 - D. Differences between topical and systemic fluoride

- (30%) II. INDICATIONS AND CONTRAINDICATIONS FOR TOPICAL FLUORIDE**

- (15%) III. BENEFITS OF TOPICAL FLUORIDE**

- (15%) IV. TOPICAL FLUORIDE APPLICATION**
 - A. Professional use
 - B. Home use
 - C. Determining appropriate method
 - D. Preparation of teeth
 - E. Infection control/Occupational Health and Safety Administration (OSHA) protocol
 - F. Armamentarium

- (10%) V. FLUORIDE PREPARATIONS**
 - A. Sodium fluoride
 - B. Acidulated phosphate fluoride
 - C. Stannous fluoride solution
 - D. Varnish

- (10%) VI. ADVERSE REACTIONS**

- (10%) VII. PATIENT EDUCATION**
 - A. Care of fluoridated products
 - B. Post-treatment instructions
 - C. Frequency of fluoride treatment



Topical Fluoride (TF)

Suggested References for Exam Preparation

DANB's TF exam is a component of the DANB Certified Preventive Functions Dental Assistant (CPFDA®) certification.

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2. Wilkins, Esther M. *Clinical Practice of the Dental Hygienist*. 10th and 11th ed. Philadelphia, PA: Lippincott, 2008 and 2013.
3. Harris, Norman O., Franklin Garcia-Godoy and Christine Nielson Nathe. *Primary Preventive Dentistry*. 7th and 8th ed. Upper Saddle River, NJ: Pearson Education, 2008 and 2014.
4. Bird, Doni L., and Debbie S. Robinson. *Modern Dental Assisting*. 10th and 11th ed. St. Louis, MO: Elsevier/Saunders, 2012 and 2015.
5. Bird, Doni L., and Debbie S. Robinson. *Essentials of Dental Assisting*. 4th and 5th ed. St. Louis, MO: Elsevier/Saunders, 2007 and 2013.
6. Hatrick, Carol D., and W. S. Eakle. *Dental Materials: Clinical Applications for Dental Assistants and Dental Hygienists*. 3rd ed. St. Louis, MO: Elsevier/Saunders, 2016.
7. Darby, Michele Leonardi. *Mosby's Comprehensive Review of Dental Hygiene*. 7th ed. St. Louis, MO: Elsevier/Mosby, 2012.

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- (3) Clinical instruction: Utilizing patients, the student shall demonstrate proficiency in each of the following tasks, under supervision by faculty or instructional staff as described in Section 1070.8(a)(3), and shall then be eligible to complete an examination on this Section.
 - (A) Assessment of respiration rates.
 - (B) Monitoring and assessment of lung sounds and ventilation with a pretracheal/precordial stethoscope.
 - (C) Monitoring oxygen saturation with a pulse oximeter.
 - (D) Use of an oxygen delivery system.
- (l) With respect to drug identification and draw:
 - (1) Didactic instruction shall contain:
 - (A) Characteristics of syringes and needles: use, types, gauges, lengths, and components.
 - (B) Characteristics of drug, medication, and fluid storage units: use, type, components, identification of label including generic and brand names, strength, potential adverse reactions, expiration date, and contraindications.
 - (C) Characteristics of drug draw: armamentaria, label verification, ampule and vial preparation, and drug withdrawal techniques.
 - (2) Laboratory instruction: The student shall demonstrate proficiency in the withdrawal of fluids from a vial or ampule in the amount specified by faculty or instructional staff and shall then be eligible to complete a practical examination.
 - (3) Clinical instruction: The student shall demonstrate proficiency in the evaluation of vial or container labels for identification of content, dosage, and strength and in the withdrawal of fluids from a vial or ampule in the amount specified by faculty or instructional staff as described in Section 1070.8(a)(3), and shall then be eligible to complete an examination on this Section.
- (m) With respect to adding drugs, medications, and fluids to IV lines:
 - (1) Didactic instruction shall contain:
 - (A) Characteristics of adding drugs, medications, and fluids to IV lines in the presence of a licensed dentist.
 - (B) Armamentaria.
 - (C) Procedures for adding drugs, medications, and fluids, including dosage and frequency.
 - (D) Procedures for adding drugs, medications, and fluids by IV bolus.
 - (E) Characteristics of patient observation for signs and symptoms of drug response.
 - (2) Laboratory instruction: The student shall demonstrate proficiency in adding fluids to an existing IV line on a venipuncture training arm or in a simulated environment, and shall then be eligible to complete a practical examination on this Section.
 - (3) Clinical instruction: The student shall demonstrate proficiency in adding fluids to existing IV lines in the presence of course faculty or instructional staff as described in Section 1070.8(a)(3), and shall then be eligible to complete an examination on this Section.
- (n) With respect to the removal of IV lines:
 - (1) Didactic instruction shall include overview and procedures for the removal of an IV line.
 - (2) Laboratory instruction: The student shall demonstrate proficiency on a venipuncture training arm or in a simulated environment for IV removal, and shall then be eligible for a practical examination.
 - (3) Clinical instruction: The student shall demonstrate proficiency in removing IV lines in the presence of course faculty or instructional staff as described in Section 1070.8(a)(3), and shall then be eligible to complete an examination on this Section.
- (o) Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.
- (p) To maintain approval, programs approved prior to the effective date of these regulations shall submit to the Board a completed "Notice of Compliance with New Requirements for Dental Sedation Assistant Permit Courses (New 10/10)", hereby incorporated by reference, within ninety (90) days of the effective date of these regulations.

1071. Approval of RDAEF Educational Programs.

- (a) All new Registered Dental Assistant in Extended Functions (RDAEF) educational programs shall apply for and receive approval prior to operation. The Board may approve, provisionally approve, or deny approval of any such program. The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own.
- (b) In addition to the requirements of Cal. Code Regs., Title 16, Sections 1070 and 1070.1, the following criteria shall be met by an RDAEF educational program to secure and maintain approval by the Board.
 - (1) A program applying for approval to teach all of the duties specified in Business and Professions Code Section 1753.5 shall comply with all of the requirements of this Section.
 - (2) A program applying for approval to teach RDAEFs licensed on or before January 1, 2010 the additional duties specified in Business and Professions Code Section 1753.6 shall comply with all of the requirements of this Section, except as follows:

California State Dental Practice Act and Administrative Rules for Dental Assistants

- (A) The program shall be no less than 318 hours, including at least 76 hours of didactic instruction, at least 186 hours of laboratory instruction, and at least 56 hours of clinical instruction.
- (B) Students shall not be required to complete instruction related to the placement of gingival retraction cord, the taking of final impressions for permanent indirect restorations, or the fitting of endodontic master points and accessory points.
- (c) In order to be admitted to the program, each student shall possess a valid, active, and current license as a registered dental assistant issued by the Board and shall submit documentary evidence of successful completion of a Board-approved pit and fissure sealant course.
- (d) In addition to the requirements of Sections 1070 and 1070.1, all faculty members responsible for clinical evaluation shall have completed a course or certification program in educational methodology of at least six (6) hours by January 1, 2012, unless he or she holds any one of the following: a postgraduate degree in education, a Ryan Designated Subjects Vocational Education Teaching Credential, a Standard Designated Subjects Teaching Credential, or a Community College Teaching Credential. Each faculty member employed after January 1, 2012, shall complete a course or certification program in educational methodology within six months of employment. The program director or designated administrator shall be responsible to obtain and maintain records of each faculty member showing evidence of having met this requirement.
- (e) The program shall be of sufficient duration for the student to develop minimum competence in all of the duties that RDAEFs are authorized to perform, but in no event less than 410 hours, including at least 100 hours of didactic instruction, at least 206 hours of laboratory instruction, and at least 104 hours of clinical instruction. All laboratory and simulated clinical instruction shall be provided under the direct supervision of program staff. Clinical instruction shall be provided under the direct supervision of a licensed dentist and may be completed in an extramural dental facility as defined in Section 1070.1(c).
- (f) The following requirements are in addition to the requirements of Sections 1070 and 1070.1:
 - (1) Minimum requirements for equipment and armamentaria:
 - (A) Laboratory facilities with individual seating stations for each student and equipped with air, gas and air, or electric driven rotary instrumentation capability. Each station or operator shall allow an articulated typodont to be mounted in a simulated head position.
 - (B) Clinical simulation facilities that provide simulated patient heads mounted in appropriate position and accommodating an articulated typodont in an enclosed intraoral environment, or mounted on a dental chair in a dental operator. Clinical simulation spaces shall be sufficient to permit one simulation space for each two students at any one time.
 - (C) Articulated typodonts of both deciduous and permanent dentitions with flexible gingival tissues and with prepared teeth for each procedure to be performed in the laboratory and clinical simulation settings. One of each type of typodont is required for each student.
 - (D) A selection of restorative instruments and adjunct materials for all procedures that RDAEFs are authorized to perform.
 - (2) Notwithstanding Section 1070, there shall be at least one operator for every two students who are simultaneously engaged in clinical instruction.
- (g) Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (h) to (o), inclusive, and the following didactic instruction:
 - (1) The following instruction as it relates to each of the procedures that RDAEFs are authorized to perform: restorative and prosthetic treatment review; charting; patient education; legal requirements; indications and contraindications; problem solving techniques; laboratory, preclinical, and clinical criteria and evaluation; and infection control protocol implementation.
 - (2) Dental science, including dental and oral anatomy, histology, oral pathology, normal or abnormal anatomical and physiological tooth descriptions, tooth morphology, basic microbiology relating to infection control, and occlusion. "Occlusion" is the review of articulation of maxillary and mandibular arches in maximum intercuspation.
 - (3) Characteristics and manipulation of dental materials related to each procedure.
 - (4) Armamentaria for all procedures.
 - (5) Principles, techniques, criteria, and evaluation for performing each procedure, including implementation of infection control protocols.
 - (6) Tooth isolation and matrix methodology review.
- (h) General laboratory instruction shall include:
 - (1) Rubber dam application for tooth isolation in both maxillary and mandibular arches and for deciduous and permanent dentitions. A minimum of four experiences per arch is required, with two anterior and two posterior applications, with one of the applications used for a practical examination.
 - (2) Matrix placement for amalgam, and nonmetallic restorative material restorations in both primary and permanent dentitions, with three experiences for each cavity classification and for each material.
 - (3) Base, liner, and etchant placement on three posterior teeth for each base, liner, or etchant, with one of the three teeth used for a practical examination.

California State Dental Practice Act and Administrative Rules for Dental Assistants

- (i) With respect to preliminary evaluation of the patient's oral health, including charting of existing conditions excluding periodontal assessment, intraoral and extraoral evaluation of soft tissue, classifying occlusion, and myofunctional evaluation:
 - (1) Didactic instruction shall contain the following:
 - (A) Normal anatomical structures: oral cavity proper, vestibule, and lips.
 - (B) Deviations from normal to hard tissue abnormalities to soft tissue abnormalities.
 - (C) Overview of classifications of occlusion and myofunction.
 - (D) Sequence of oral inspection: armamentaria, general patient assessment, review of medical history form, review of dental history form, oral cavity mouth-mirror inspection, and charting existing conditions.
 - (2) Preclinical instruction shall include performing an oral inspection on at least two other students.
 - (3) Clinical instruction shall include performing an oral inspection on at least two patients, with one of the two patients used for a clinical examination.
- (j) With respect to sizing, fitting, and cementing endodontic master points and accessory points:
 - (1) Didactic instruction shall include the following:
 - (A) Review of objectives, canal preparation, filling of root canal space, including the role of the RDAEF as preparatory to condensation which is to be performed by the licensed dentist.
 - (B) Description and goals of filling technique using lateral condensation techniques.
 - (C) Principles and techniques of fitting and cementing master points and accessory points using lateral condensation, including characteristics, manipulation, use of gutta percha and related materials, and criteria for an acceptable master and accessory points technique using lateral condensation.
 - (2) Laboratory instruction shall include fitting and cementing master points and accessory points on extracted teeth or simulated teeth with canals in preparation for lateral condensation by the dentist, with a minimum of two experiences each on a posterior and anterior tooth. This instruction shall not include obturator-based techniques or other techniques that employ condensation.
 - (3) Simulated clinical instruction shall include fitting and cementing master points and accessory points in preparation for condensation by the dentist with extracted or simulated teeth prepared for lateral condensation mounted in simulated patient heads mounted in appropriate position and accommodating and articulated typodont in an enclosed intraoral environment, or mounted on a dental chair in a dental operatory. This instruction shall not include obturator-based techniques that employ condensation. Simulated clinical instruction shall include fitting and cementing master points and accessory points for lateral condensation by the dentist in at least four teeth, one of which shall be used for a practical exam.
- (k) With respect to gingival retraction, general instruction shall include:
 - (1) Review of characteristics of tissue management as it relates to gingival retraction with cord and electrosurgery.
 - (2) Description and goals of cord retraction.
 - (3) Principles of cord retraction, including characteristics and manipulation of epinephrine, chemical salts classification of cord, characteristics of single versus double cord technique, and techniques and criteria for an acceptable cord retraction technique.
- (l) With respect to final impressions for permanent indirect and toothborne restorations:
 - (1) Didactic instruction shall contain the following:
 - (A) Review of characteristics of impression material and custom.
 - (B) Description and goals of impression taking for permanent indirect restorations and toothborne prosthesis.
 - (C) Principles, techniques, criteria, and evaluation of impression taking for permanent indirect restorations and toothborne prosthesis.
 - (2) Laboratory instruction shall include the following:
 - (A) Cord retraction and final impressions for permanent indirect restorations, including impression taking of prepared teeth in maxillary and mandibular arches, one time per arch with elastomeric impression materials.
 - (B) Impressions for toothborne removable prostheses, including, at a minimum, taking a total of four impressions on maxillary and mandibular arches with simulated edentulous sites and rest preparations on at least two supporting teeth in each arch.
 - (3) Clinical instruction shall include taking final impressions on five cord retraction patients, with one used for a clinical examination.
- (m) With respect to placing, contouring, finishing, and adjusting direct restorations:
 - (1) Didactic instruction shall contain the following:
 - (A) Review of cavity preparation factors and restorative material.
 - (B) Review of cavity liner, sedative, and insulating bases.
 - (C) Characteristics and manipulation of direct filling materials.
 - (D) Amalgam restoration placement, carving, adjusting and finishing, which includes principles, techniques, criteria and evaluation, and description and goals of amalgam placement, adjusting and finishing in children and adults.

- (E) Glass-ionomer restoration placement, carving, adjusting, contouring and finishing, which includes, principles, techniques, criteria and evaluation, and description and goals of glass-ionomer placement and contouring in children and adults.
- (F) Composite restoration placement, carving, adjusting, contouring and finishing in all cavity classifications, which includes, principles, techniques, criteria, and evaluation.
- (2) Laboratory instruction shall include typodont experience on the following:
 - (A) Placement of Class I, II, and V amalgam restorations in eight prepared permanent teeth for each classification, and in four deciduous teeth for each classification.
 - (B) Placement of Class I, II, III, and V composite resin restorations in eight prepared permanent teeth for each classification, and in four deciduous teeth for each classification.
 - (C) Placement of Class I, II, III, and V glass-ionomer restorations in four prepared permanent teeth for each classification, and in four deciduous teeth for each classification.
- (3) Simulated clinical instruction shall include experience with typodonts mounted in simulated heads on a dental chair or in a simulation laboratory as follows:
 - (A) Placement of Class I, II, and V amalgam restorations in four prepared permanent teeth for each classification, with one of each classification used for a clinical examination.
 - (B) Placement of Class I, II, III, and V composite resin restorations in four prepared permanent teeth for each classification, with one of each classification used for a clinical examination.
 - (C) Placement of Class I, II, III, and V glass-ionomer restorations in four prepared permanent teeth for each classification, with one of each classification used for a clinical examination.
- (4) Clinical instruction shall require proficient completion of placing, contouring and finishing at least twenty (20) direct restorations in prepared permanent teeth with the following requirements:
 - (A) At least fifty (50) percent of the experiences shall be Class II restorations using esthetic materials.
 - (B) At least twenty (20) percent of the experiences shall be Class V restorations using esthetic materials.
 - (C) At least ten (10) percent of the experiences shall use amalgam.
 - (D) Students who complete the 20 restorations and meet all the instructional requirements of this Section may complete additional Class I, II, III or V restorations as deemed appropriate for program success.
- (n) With respect to polishing and contouring existing amalgam restorations:
 - (1) Didactic instruction shall include principles, techniques, criteria and evaluation, and description and goals of amalgam polishing and contouring in children and adults.
 - (2) Laboratory instruction shall include typodont experience on polishing and contouring of Class I, II, and V amalgam restorations in three prepared permanent teeth for each classification, and in two deciduous teeth for each classification.
 - (3) Simulated clinical instruction shall include experience with typodonts mounted in simulated heads on a dental chair or in a simulation laboratory in the polishing and contouring of Class I, II, and V amalgam restorations in two prepared permanent teeth for each classification, with one of each classification used for a clinical examination.
- (o) With respect to adjusting and cementing permanent indirect restorations:
 - (1) Didactic instruction shall contain the following:
 - (A) Review of fixed prosthodontics related to classification and materials for permanent indirect restorations, general crown preparation for permanent indirect restorations, and laboratory fabrication of permanent indirect restorations.
 - (B) Interocclusal registrations for fixed prosthesis, including principles, techniques, criteria, and evaluation.
 - (C) Permanent indirect restoration placement, adjustment, and cementation, including principles, techniques, criteria, and evaluation.
 - (2) Laboratory instruction shall include:
 - (A) Interocclusal registrations using elastomeric and resin materials. Two experiences with each material are required.
 - (B) Fitting, adjustment, and cementation of permanent indirect restorations on one anterior and one posterior tooth for each of the following materials, with one of each type used for a practical examination: ceramic, ceramometal, and cast metallic.
 - (3) Clinical experience for interocclusal registrations shall be performed on four patients who are concurrently having final impressions recorded for permanent indirect restorations, with one experience used for a clinical examination.
 - (4) Clinical instruction shall include fitting, adjustment, and cementation of permanent indirect restorations on at least two teeth.
- (p) Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.
- (q) To maintain approval, programs approved prior to the effective date of these regulations shall submit to the Board a completed "Notice of Compliance with New Requirements for Registered Dental Assistant in Extended Functions Educational Programs (New 10/10)", hereby incorporated by reference, within ninety (90) days of the effective date of these regulations.

**BOARD APPROVED COURSES REQUIRED FOR
DENTAL ASSISTANTS TO PERFORM DUTIES
UNDER TITLE 5, SERIES 1, SECTION 8.2**

Upon submission of proof of successful completion of a program of education approved by the WV Board of Dental Examiners, a dental assistant may perform the following functions under the direct supervision of a dentist:

- (o) Applying topical anticariogenic agents after successful completion of a board-approved course and examination and with prior approval by the supervising dentist;
- (p) Applying pit and fissure sealants after successful completion of a board-approved course and examination and with a final evaluation by the supervising dentist;
- (v) Chemical conditioning of the tooth to accept a restoration and/or bracket by topical application after successful completion of a board-approved course and examination;
- (w) Using a power-driven hand piece with rubber cup and/or brush only for preparing a tooth for accepting a restoration and/or appliance, which shall in no way be represented to the patient as a prophylaxis, after successful completion of a board-approved course and examination;
- (x) Placing retraction cords for crown impressions after successful completion of a board-approved course and examination and with prior approval by the supervising dentist;

The program of education shall include a minimum of six (6) hours of didactic instruction, successful completion of a written examination by a score of at least 75% (both of which have to be reviewed and approved by the Board prior to implementation), and documented clinical experiences by the supervising dentist.

The supervising dentist shall personally observe the following successful tasks by a dental assistant after successful completion of an approved program and exam:

- (a) the application of topical anticariogenic agents on four (4) patients (subparagraph o.)
- (b) the application of six (6) pit and fissure sealants (subparagraph p.)
- (c) the topical chemical conditioning of six (6) teeth to accept a restoration and/or bracket (subparagraph v.)
- (d) using a power-driven hand piece with rubber cup and/or brush for preparing six (6) teeth for accepting a restoration and/or appliance (subparagraph w.)
- (e) placing retraction cord for crown impressions on six (6) teeth (subparagraph x.)

Upon submission of proof of successful completion of a program of education approved by the WV Board of Dental Examiners, a dental assistant may perform the following functions under the direct supervision of a dentist:

- (a) placing or removing temporary space maintainers, orthodontic separating devices, ligatures, brackets and bands with a final evaluation by the supervising dentist at the time of placement or removal (subparagraph dd)
- (b) the topical chemical conditioning of six (6) teeth to accept a restoration and/or bracket (subparagraph v.)
- (c) using a power-driven hand piece with rubber cup and/or brush for preparing six (6) teeth for accepting a restoration and/or appliance (subparagraph w.)

The program of education shall include a minimum of four (4) hours of didactic instruction, successful completion of a written examination by a score of at least 75% (both of which have to be reviewed and approved by the Board prior to implementation), and documented clinical experiences by the supervising dentist. The supervising dentist will

personally observe and attest that the dental assistant is competent in performing the delegated intraoral tasks after successful completion of an approved program and exam.

Please note that after July 28, 2005, a dental assistant will have to successfully complete a program approved by the WV Board of Dental Examiners in order to visually monitor a nitrous oxide analgesia unit (subparagraph ff.). The Board is currently developing these guidelines.

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818-042-0070

Expanded Function Dental Assistants (EFDA)

The following duties are considered Expanded Function Duties and may be performed only after the dental assistant complies with the requirements of 818-042-0080:

- (1) Polish the coronal surfaces of teeth with a brush or rubber cup as part of oral prophylaxis to remove stains.
- (2) Remove temporary crowns for final cementation and clean teeth for final cementation;
- (3) Preliminarily fit crowns to check contacts or to adjust occlusion outside the mouth;
- (4) Place temporary restorative material (i.e., zinc oxide eugenol based material) in teeth providing that the patient is checked by a dentist before and after the procedure is performed;
- (5) Place and remove matrix retainers for alloy and composite restorations;
- (6) Polish amalgam or composite surfaces with a slow speed handpiece;
- (7) Remove excess supragingival cement from crowns, bridges, bands or brackets with hand instruments providing that the patient is checked by a dentist after the procedure is performed;
- (8) Fabricate temporary crowns, and temporarily cement the temporary crown. The cemented crown must be examined and approved by the dentist prior to the patient being released;
- (9) Under general supervision, when the dentist is not available and the patient is in discomfort, an EFDA may 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; and
- (10) Perform all aspects of teeth whitening procedures.

Stat. Auth.: ORS 679 & 680

Stats. Implemented: ORS 679.020, 679.025 & 679.250

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD 1-2004, f. 5-27-04, cert. ef. 6-1-04; OBD 3-2005, f. 10-26-05, cert. ef. 11-1-05; OBD 2-2009, f. 10-21-09, cert. ef. 11-1-09; f. 7-9-15, ef. 10-01-15

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818-042-0090

Additional Functions of EFDAs

Upon successful completion of a course of instruction in a program accredited by the Commission on Dental Accreditation of the American Dental Association, or other course of instruction approved by the Board, a certified Expanded Function Dental Assistant may perform the following functions under the indirect supervision of a dentist or dental hygienist providing that the procedure is checked by the dentist or dental hygienist prior to the patient being dismissed:

- (1) Apply pit and fissure sealants provided the patient is examined before the sealants are placed. The sealants must be placed within 45 days of the procedure being authorized by a dentist or dental hygienist.
- (2) Apply temporary soft relines to complete dentures for the purpose of tissue conditioning.
- (3) Place cord subgingivally.

Stat. Auth.: ORS 679

Stats. Implemented: ORS 679.025(2)(j) & 679.250(7)

Hist.: OBD 9-1999, f. 8-10-99, cert. ef. 1-1-00; OBD 15-2001, f. 12-7-01, cert. ef. 1-1-02; OBD 1-2013, f. 5-15-13, cert. ef. 7-1-13; OBD 6-2014, f. 7-2-2014, cert. ef. 8-1-2014; f. 7-9-15, ef. 10-01-15