

These data are presented for informational purposes only and are not intended as a legal opinion regarding dental practice in any state. DANB confers with each state's dental board at least annually regarding the accuracy and currency of this information. To verify, or if you have any questions, please contact your state's dental board.



Measuring Dental Assisting Excellence™

How To Use The Following Charts

Chart 1

View which job designations are used in your state.



Be sure to follow the legal requirements to perform dental radiographic procedures.



See which tasks are not permitted by state law.



View the education/training/credential required for each level of dental assisting.




Compare your state's job designations to those used as standardized job titles in the DANB/ADAA Core Competency Study.

Chart 2

Review all the allowable tasks for each level of dental assisting as published in the state practice act.




The numbers next to each task correspond to the 70 numbered tasks that were identified and used in the DANB/ADAA Core Competency Study. Tasks that are not numbered do not directly match one of the 70 tasks, yet are identified by the state in the practice act. A full list of those tasks form your state's chart.



If your state's dental practice act specifically defines levels of supervision, the state-specific definition is noted in the template.

District of Columbia

District-approved 10/30/08†
Updated by DANB 3/31/09

Education/Training/ Credential Required	Job Title According to DC	Proposed Standardized National Job Titles (see below)	Radiology Requirements	Functions NOT Permitted by Dental Assistants in DC
<p>To perform designated expanded functions under the direct supervision of a licensed dentist in the District of Columbia, an auxiliary <i>must</i>:</p> <ul style="list-style-type: none"> ■ Satisfactorily complete training in a CERP-approved program OR Satisfactorily complete a training program or course recognized by the Commission on Dental Accreditation (CODA) OR Satisfactorily complete a training program or course recognized by DANB. <p>Note: A dentist may delegate designated expanded functions to an auxiliary who does not meet these requirements if the auxiliary had been performing the tasks for at least three (3) months prior to the effective date of these regulations, 1/9/09*, and has demonstrated competency to perform the tasks to the supervising dentist's satisfaction.</p> <p>*Apparent effective date, not confirmed by the District of Columbia Health and Professional Licensing Administration as of publication date of this book.</p>	<p>Dental Auxiliary qualified in designated expanded functions</p>	<p>Expanded Functions Dental Assistant (EFDA)</p> <hr/> <p>DANB Certified Dental Assistant (CDA) or Registered Dental Assistant (RDA)</p>	<p>In order to legally operate dental x-ray equipment and perform dental radiologic procedures in the District of Columbia, a dental auxiliary <i>must</i>:</p> <ul style="list-style-type: none"> ■ Satisfactorily complete a radiation course or examination recognized by the American Dental Association Continuing Education Recognition Program (CERP); OR Be certified by the American Registry of Radiologic Technologists; OR Satisfactorily complete a radiation course and pass the national DANB Radiation Health and Safety (RHS) exam. <p>Note: Until December 31, 2011, a dentist may permit an auxiliary who does not meet these requirements to place or expose dental x-ray film if the auxiliary has completed in-office training and demonstrated competency to perform the task to the supervising dentist's satisfaction.</p>	<p>The following functions shall not be delegated to dental auxiliaries:</p> <ol style="list-style-type: none"> 2. The charting of cavities during preliminary examination, prophylaxis, or polishing 9. The intraoral polishing of a tooth or a restoration 12, 51. Placing, carving, or finishing of amalgam restorations 15. Temporary wire ligation 24. The instruction of individuals or groups of individuals in oral health care, unless it is in the dental office and done as instructed by the dentist 29. Final positioning of orthodontic bonds and bands 33. Condensing, contouring or adjusting any final, fixed or removable prosthodontic appliance or restoration in the mouth 33. Placing and finishing of composite resin/silicate restorations 34. Application of cavity liners and bases 40. The application of pit and fissure sealants 47, 50. Placement of temporary restorations 59. Administering or monitoring nitrous oxide <ul style="list-style-type: none"> • Performing final diagnosis and treatment planning • Performing surgical or cutting procedures on hard or soft tissue • Prescribing or parenterally administering drugs or medications • Administering inhalants or inhalation conscious sedation agents • Authorizing work orders for any appliance or prosthetic device or restoration to be inserted into a patient's mouth • Operating high speed rotary instruments in the mouth • Performing pulp capping procedures • Orthodontic arch wire activation with the exception of minor adjustments to eliminate pain or discomfort • Taking impressions for master casts to be used for prosthetic restoration of teeth or oral structures • Final cementation of crowns, bridges, inlays, onlays, posts and cores, and insertion of final prosthesis • Placing sutures • Flushing root canals • The performing of a diagnostic screening to identify indications of oral abnormalities • A preliminary dental examination • A complete prophylaxis, including the removal of any deposits, diseased crevicular tissue, accretion, or stain from the surface of a tooth or a restoration • Administering or monitoring general anesthetics and conscious sedation • Administering or monitoring local anesthesia
<p>A dental auxiliary in the District of Columbia may perform basic supportive dental procedures specified by the state dental practice act (see opposite page) under the supervision of a licensed dentist.</p> <p>There are no education or training requirements for this level of dental assisting.</p> <p>Note: In all instances, the licensed dentist assumes ultimate responsibility for determining, on the basis of his or her diagnosis, the specific treatment the patient will receive and which aspects of treatment will be delegated to qualified personnel.</p> <p>†DANB has not received confirmation that the most recent version of the Career Ladder Template has been reviewed and approved by the District of Columbia Board of Dentistry. All of the templates in this volume reflect DANB's interpretation of state or district dental practice acts. For authoritative information regarding requirements for dental assistants in each state or district, please contact the relevant dental board.</p>	<p>Dental Auxiliary</p>	<p>Dental Assistant</p> <hr/> <p>Entry Level Dental Assistant</p>	<p>← The ADAA/DANB Alliance developed a listing of standardized job titles (left) based on its national Core Competency Study conducted from 2002-05.</p> <p>The same study utilized a list of 70 job functions which were determined to be representative of a broad range of dental assisting core competencies.</p> <p>Functions in this state that relate to the national DANB/ADAA Core Competency Study are numbered to the right, using language directly from this state's dental practice act. (The numbers correspond to the study's task numbering system.) →</p> <p>Functions listed with bullets are part of this state's practice act but are not specific matches to DANB/ADAA research.</p> <p>These state templates reflect the work being done by the ADAA/DANB Alliance to support a uniform national model for one set of dental assisting tasks, levels, and requirements, which will serve as a viable career ladder for dental assistants.</p>	

Job Title
According to
DC

Allowable Functions
(Functions with numbers relate specifically to Core Competency designations;
functions with bullets are in this state's practice act but are not specific matches to DANB research)

Dental
Auxiliary
qualified in
designated
expanded
functions

Under Direct Supervision*

- 6. Placement of retraction cord
- 13. Removal of sutures
- 35. Placement of periodontal dressings
- 45. Placement or removal of matrices
- 55. Removal of temporary restorations without the use of a rotary instrument
 - The application of a medicinal agent to a tooth for a prophylactic purpose
 - Bleaching

Under Direct or General Supervision*

- 22, 23, 52. expose, process, and evaluate dental radiographs (see "Radiology Requirements" on previous page)
- procedures which are appropriate to the training and experience of the auxiliary, and the practice of the supervising dentist;
 - procedures which are reversible
 - record the charting of cavities as dictated by the dentist or dental hygienist during the course of an examination or dental procedure

DANB's Note on Allowable Dental Assisting Functions

In the District of Columbia, all dental assistants may:

- perform infection control and occupational safety procedures;
- and perform other duties not specified by this state's dental practice act.

At this time, DANB cannot list all allowable dental assisting functions for each state because some states' dental practice acts outline very specific allowable functions, while others outline only prohibited functions and some contain minimal or no regulation of dental assisting duties.

Dental
Auxiliary

*Definition not provided.

Dental Assisting Functions List

The following is a list of 70 dental assisting tasks developed by the ADA/DANB Alliance in the course of its research. These selected tasks were determined to be representative of a broad range of dental assisting core competencies.

Functions in each state that correspond to the national Core Competency Study functions are **numbered** in the Career Ladder Template, using language directly from the state's dental practice act. Functions listed with **bullets** in the Career Ladder Template are part of the state's practice act but are not specific matches to DANB research.

1. Perform mouth mirror inspection of the oral cavity
2. Chart existing restorations or conditions
3. Phone in prescriptions at the direction of the dentist
4. Receive and prepare patients for treatment, including seating, positioning chair, and placing napkin
5. Complete laboratory authorization forms
6. Place and remove retraction cord
7. Perform routine maintenance of dental equipment
8. Monitor and respond to post-surgical bleeding
9. Perform coronal polishing procedures
10. Apply effective communication techniques with a variety of patients
11. Transfer dental instruments
12. Place amalgam for condensation by the dentist
13. Remove sutures
14. Dry canals
15. Tie in archwires
16. Demonstrate knowledge of ethics/jurisprudence/patient confidentiality
17. Identify features of rotary instruments
18. Apply topical fluoride
19. Select and manipulate gypsums and waxes
20. Perform supragingival scaling
21. Mix dental materials
22. Expose radiographs
23. Evaluate radiographs for diagnostic quality
24. Provide patient preventive education and oral hygiene instruction
25. Perform sterilization and disinfection procedures
26. Provide pre- and post-operative instructions
27. Place and remove dental dam
28. Pour, trim, and evaluate the quality of diagnostic casts
29. Size and place orthodontic bands and brackets
30. Using the concepts of four-handed dentistry, assist with basic restorative procedures, including prosthodontics and restorative dentistry
31. Identify intraoral anatomy
32. Demonstrate understanding of the OSHA Hazard Communication Standard
33. Place, cure and finish composite resin restorations
34. Place liners and bases
35. Place periodontal dressings
36. Demonstrate understanding of the OSHA Bloodborne Pathogens Standard
37. Take and record vital signs
38. Monitor vital signs
39. Clean and polish removable appliances and prostheses
40. Apply pit and fissure sealants
41. Prepare procedural trays/armamentaria set-ups
42. Place orthodontic separators
43. Size and fit stainless steel crowns
44. Take preliminary impressions
45. Place and remove matrix bands
46. Take final impressions
47. Fabricate and place temporary crowns
48. Maintain field of operation during dental procedures through the use of retraction, suction, irrigation, drying, placing and removing cotton rolls, etc.
49. Perform vitality tests
50. Place temporary fillings
51. Carve amalgams
52. Process dental radiographs
53. Mount and label dental radiographs
54. Remove temporary crowns and cements
55. Remove temporary fillings
56. Apply topical anesthetic to the injection site
57. Demonstrate understanding of the Centers for Disease Control and Prevention Guidelines
58. Using the concepts of four-handed dentistry, assist with basic intraoral surgical procedures, including extractions, periodontics, endodontics, and implants
59. Monitor nitrous oxide/oxygen analgesia
60. Maintain emergency kit
61. Remove permanent cement from supragingival surfaces
62. Remove periodontal dressings
63. Place post-extraction dressings
64. Fabricate custom trays, to include impression and bleaching trays, and athletic mouthguards
65. Recognize basic medical emergencies
66. Recognize basic dental emergencies
67. Respond to basic medical emergencies
68. Respond to basic dental emergencies
69. Remove post-extraction dressings
70. Place stainless steel crown



Levels of Supervision

An important consideration in the discussion of the delegation of tasks to dental assistants is that of supervision of dental assistants by their dentist-employers. The American Dental Association (ADA) has identified four levels of supervision for dental auxiliaries, including dental assistants, which it defines in its “Comprehensive Policy Statement on Allied Dental Personnel,” (2006: 307) which is part of its *Current Policies*, last updated in 2007. Note that “allied dental personnel” refers to dental assistants, dental hygienists, and dental laboratory technicians.

The four levels of supervision defined by the ADA are as follows:

Personal supervision. A dentist is personally operating on a patient and authorizes the allied dental personnel to aid treatment by concurrently performing a supportive procedure.

Direct supervision. A dentist is in the dental office or treatment facility, personally diagnoses the condition to be treated, personally authorizes the procedures and remains in the dental office or treatment facility while the procedures are being performed by the allied dental personnel and, before dismissal of the patient, evaluates the performance of the allied dental personnel.

Indirect supervision. 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 allied dental personnel, and will evaluate the performance of the allied dental personnel.

General supervision. A dentist is not required to be in the dental office or treatment facility when procedures are being performed by the allied dental personnel, but has personally diagnosed the condition to be treated, has personally authorized the procedures, and will evaluate the performance of the allied dental personnel.

Furthermore, the ADA’s Comprehensive Policy Statement on Allied Dental Personnel stipulates that intraoral expanded functions should be performed by allied dental personnel “only under the direct supervision of a dentist.”

Because the study of dental assisting core competencies undertaken by the ADAA/DANB Alliance did not address the question of supervision, the ADAA/DANB Alliance does not make any recommendations as to the levels of supervision that should be necessary for the delegation of the tasks included in the study to dental assistants. However, the ADAA/DANB Alliance believes it is important to call attention to the fact that, while the ADA has defined supervision levels in the aforementioned policy statement, which governs the ADA’s own activities and the activities of its members, these definitions have not been uniformly adopted by the dental boards of every U.S. state or district.

For the purposes of this volume, if a state’s dental practice act specifically defines levels of supervision, the state-specific definition is noted in the template.



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