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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.

Education/Training/ Credential Required	Job Title According to State of IA	Proposed Standardized National Job Titles (see below)	Radiology Requirements	Functions NOT Permitted by Dental Assistants in IA
<p>In order to work as a dental assistant in the state of Iowa, an individual <b>must be 17 years of age, be a high school graduate or equivalent, and be registered</b> with the Iowa Dental Board and have received a Certificate of Registration.</p> <p>Dentists may delegate an <b>expanded function</b> duty (see listing on opposite page) to a <b>Registered Dental Assistant</b> (see below) if the assistant has completed Iowa board-approved training in that specific function. Documentation of training must be available, if requested.</p> <p>To qualify for expanded function training, a dental assistant must be DANB Certified or hold a minimum of two years of clinical dental assisting experience as an RDA.</p> <p>To qualify as a <b>Registered Dental Assistant (RDA)</b> in Iowa, one must:</p> <ul style="list-style-type: none"> <li>Work in a dental office for six months as a Dental Assistant Trainee (see requirements listed below). <b>OR</b> Have had at least six months of prior dental assisting experience under a licensed dentist within the past two years <b>OR</b> Graduate from a post-secondary dental assisting program</li> <li><b>AND</b> Successfully complete an Iowa board-approved course of study and exam in the areas of infection control (the DANB ICE Exam)/ hazardous materials and jurisprudence</li> <li><b>AND</b> Apply to the Iowa Dental Board for registration as an RDA and receive a Certificate of Registration</li> </ul>	<p>Registered Dental Assistant (RDA) with <i>expanded duties training</i></p> <p>Registered Dental Assistant (RDA)</p>	<p>Expanded Functions Dental Assistant (EFDA)</p> <p>DANB Certified Dental Assistant (CDA) or Registered Dental Assistant (RDA)</p>	<p>To expose radiographs in Iowa, a dental assistant must hold a current registration certificate and active radiography qualification issued by the Iowa Dental Board (IDB) <b>and</b> a dentist provides general supervision. To qualify, one must:</p> <ul style="list-style-type: none"> <li>Be a Dental Assistant Trainee or Registered Dental Assistant with an active registration status <b>OR</b> Be a graduate of an accredited dental assisting program <b>OR</b> Be a nurse who holds an active nursing license</li> <li><b>AND</b> Provide proof of successful completion of an Iowa Board-approved course of study in dental radiography within the two years prior to application</li> <li><b>AND</b> Provide proof that he/she successfully completed an Iowa Board-approved exam in the area of dental radiography (the national DANB Radiation Health &amp; Safety [RHS] exam meets this requirement)</li> <li><b>AND</b> Apply to the IDB for a Certificate of Qualification in Dental Radiology</li> </ul> <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>The following functions are <b>not</b> permitted by any level of dental assistant:</p> <ol style="list-style-type: none"> <li>Removal of any plaque, stain, or hard natural or synthetic material except by toothbrush, floss, or rubber cup coronal polish, or removal of any calculus</li> <li>Placement of sealants             <ul style="list-style-type: none"> <li>Diagnosis, examination, treatment planning, or prescription, including prescription for drugs and medicaments or authorization for restorative, prosthodontic or orthodontic appliances</li> <li>Surgical procedures on hard and soft tissues within the oral cavity and any other intraoral procedure that contributes to or results in an irreversible alteration to the oral anatomy</li> <li>Administration of local anesthesia</li> <li>Procedures that require the professional judgement and skill of a dentist</li> </ul> </li> </ol>
<p>To qualify as a <b>Dental Assistant Trainee</b> in Iowa, one must:</p> <ul style="list-style-type: none"> <li>Within 12 months of employment, successfully complete an Iowa board-approved course of study and exam in the areas of infection control (the DANB ICE Exam)/ hazardous materials and jurisprudence</li> <li><b>AND</b> Apply to the Iowa Dental Board for registration as a Dental Assistant Trainee and receive a Certificate of Registration</li> </ul> <p><b>Note:</b> A Dental Assistant Trainee's employer must notify the Iowa Dental Board in writing of such employment within seven days of the initial employment as a dental assistant.</p>	<p>Dental Assistant Trainee</p>	<p>Dental Assistant</p> <p>Entry Level Dental Assistant</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  
State of IA

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)

Registered  
Dental  
Assistant  
(RDA)  
with  
expanded  
duties  
training

**Expanded Function Duties Under Supervision (level unspecified in state practice act)**

*Dental assistants must complete board-approved training in each of the following expanded functions in order to perform that specific function.*

- |   |   |  |
|---|---|--|
| 6. Placement and removal of gingival retraction                                 | 46. Taking final impressions                                | 63. Placement and removal of dry socket medication |
| 34. Applying cavity liners and bases, desensitizing agents, and bonding systems | 47, 50. Fabrication and removal of provisional restorations | • Taking occlusal registrations                    |
| 35. Placement of periodontal dressings  | 49. Testing pulp vitality                                   |  |
|   | 59. Monitoring of nitrous oxide oxygen analgesia            |  |

*Note: All expanded function duties must be performed under the direct supervision\* of a licensed dentist.*

**Under Direct Supervision\***

30. During intraoral procedures, assist the dentist in performing duties assigned by the dentist

**Under General Supervision\***

- 22, 52. Dental radiography (see "Radiology Requirements" on previous page)
- Intraoral suctioning and all extraoral duties that are assigned by the dentist
  - Those procedures for which the dental assistant has received training

**Under Personal Supervision\***

All Dental Assistant Trainees who are engaging in on-the-job training to meet the requirements for registration and are learning the necessary skills are considered to be under the personal supervision of a licensed dentist.

No allowable functions are specified in the state practice act, with the exception of dental radiography (see "Radiology Requirements" on previous page).

**DANB's Note on Allowable Dental Assisting Functions**

In the state of Iowa, 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.

Registered  
Dental  
Assistant  
(RDA)

Dental  
Assistant  
Trainee

\*Direct Supervision: 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: The dentist has delegated 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: The dentist is physically present in the treatment room to oversee and direct all intraoral or chairside services of the dental assistant and a licensee or registrant is physically present to oversee and direct all extraoral services of the dental assistant.

# 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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