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.
To perform **expanded functions** under the direct supervision of a licensed dentist in the state of New Jersey, dental assistants must be licensed by the New Jersey State Board of Dentistry as a Registered Dental Assistant (RDA).

To register as an RDA, one must:
- Successfully complete high school or its equivalent
- **AND** Pass DANB’s national Certified Dental Assistant (CDA) or Certified Orthodontic Assistant (COA) exam (within 10 years prior to application)
- **AND** Graduate from a New Jersey Board-approved CODA-accredited dental assisting program (within 10 years prior to application)
- **OR** Obtain at least two years’ work experience as a dental assistant (within five years prior to application), successfully complete a Board-approved program in expanded functions, and pass the New Jersey Expanded Duties - General Exam (NJXDG) administered by DANB
  - **OR** Obtain at least two years’ work experience as a dental assistant (within five years prior to application) and pass the New Jersey Expanded Duties - General Exam (NJXDG) administered by DANB
- **AND** Apply for licensure as a Registered Dental Assistant to the New Jersey State Board of Dentistry

**An unregistered dental assistant** in the state of New Jersey may perform basic supportive dental procedures specified by the state dental practice act (see opposite page) under the direct supervision of a licensed dentist.

There are no education or training requirements for this level of dental assisting.

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### New Jersey

#### Education/Training/Credential Required

<table>
<thead>
<tr>
<th>Job Title According to State of NJ</th>
<th>Proposed Standardized National Job Titles (see below)</th>
<th>Radiography Requirements</th>
<th>Functions NOT Permitted by Dental Assistants in NJ</th>
</tr>
</thead>
<tbody>
<tr>
<td>To legally operate dental x-ray equipment and perform dental radiographic procedures in New Jersey, a dental assistant must be licensed as a Dental Radiologic Technologist (DRT) by the New Jersey Radiologic Technology Board of Examiners. To obtain this license, one must:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Successfully complete high school or its equivalent <strong>AND</strong> Be at least 18 years of age <strong>AND</strong> Be of good moral character <strong>AND</strong> Successfully complete a NJ state-approved dental radiography course or its equivalent within the 5 years prior to application <strong>OR</strong> Successfully complete a NJ state-approved dental radiography course or its equivalent more than 5 years prior to application <strong>OR</strong> Successfully complete the national DANB RHS exam within the 5 years prior to application <strong>AND</strong> Pass the national DANB RHS exam within the 5 years prior to application <strong>AND</strong> Document competent work experience in performing dental radiography procedures within 5 years prior to application (Note: It is illegal to obtain this work experience in New Jersey without the permission of the NJ Bureau of X-Ray Compliance.) <strong>OR</strong> Successfully complete a NJ state-approved dental radiography course or its equivalent <strong>AND</strong> Hold current DANB CDA certification <strong>AND</strong> Apply for licensure to the State of New Jersey Bureau of X-Ray Compliance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note: A licensed DRT is not permitted to perform conebeam CT procedures unless he or she has met the requirements in the 12/31/13 exemption. Please contact the Bureau of X-Ray Compliance at 609-984-5890 for details.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**The ADAA/DANB Alliance developed a listing of standardized job titles (left) based on its national Core Competencies Study conducted from 2002-2005.**

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.

Functions in this state that relate to the national DANB/ADAA Core Competencies 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.)

Functions listed with bullets are part of this state’s practice act but are not specific matches to DANB/ADAA research.
# New Jersey

## Allowable Functions

<table>
<thead>
<tr>
<th>Job Title According to State of NJ</th>
<th>Allowable Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Dental Assistant (RDA)</td>
<td>(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)</td>
</tr>
</tbody>
</table>

### Under Direct Supervision*[^1]

1. Provide a written work authorization for emergency repair of a dental prosthesis, provided that the prosthesis shall not require any intraoral procedure and shall be thereafter inserted by a licensed dentist
2. Formulate a written work authorization for the construction or any dental prosthesis, provided the dental prosthesis is not a dental prosthesis to be inserted by a licensed dentist
3. Make radiographic exposures as permitted by the Department of Environmental Protection, Bureau of X-Ray Compliance (see "Radiography Requirements" on previous page)
4. Provide oral health education including dietary analysis and clinical instruction in order to promote dental health
5. Trial size (pre-select) orthodontic bands, wire, stainless steel crowns and temporary crowns on a diagnostic model only
6. Place and remove retraction cords and medicated pellets; this shall not include electrosurgery or the use of lasers for tissue retraction
7. Place amalgam, composite and gold foil in a tooth for condensation by the dentist
8. Remove sutures
9. Provide prophylactic and preventive measures, such as the application of fluorides and pit and fissure sealants and other recognized topical agents for the prevention of oral disease or discomfort; this shall not include prophylaxis
10. Isolate the operative field, including the placement and removal of rubber dams
11. Place and remove periodontal dressings and other surgical dressings
12. Place orthodontic separators; supervising licensed dentist shall ensure proper placement
13. Take alginate impressions
14. Take impressions for orthodontic appliances; supervising licensed dentist shall review and evaluate the impression prior to its use for fabrication
15. Place and remove matrices and wedges
16. Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intraoral occlusal adjustment
17. Place temporary restorations
18. Perform hand removal of crowns and bridges that have been temporarily cemented
19. Remove excess cement from crowns or other restorations and orthodontic appliances; such removal shall not include any subgingival cement or debris
20. Perform hand removal of soft temporary restorations
21. Monitor a patient to whom the supervising dentist has administered nitrous oxide/oxygen inhalation analgesia, provided the RDA does not perform any other function while monitoring the patient (upon completion of a Board-approved course and with current Cardiac Life Support certification) and provided the patient is not taking any medication, whether prescribed by the dentist or by another licensed practitioner
22. Take impressions for and perform laboratory fabrication of mouth guards. This shall not include insertion of the appliance.
   - Place and remove arch wires and ligature wires
   - Perform bite registration procedures to determine occlusal relationships of diagnostic models only
   - Place temporary occlusive restorations
   - Place orthodontic separators; supervising licensed dentist shall ensure proper placement
   - Take alginate impressions
   - Take impressions for orthodontic appliances; supervising licensed dentist shall review and evaluate the impression prior to its use for fabrication
   - Place and remove matrices and wedges
   - Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intraoral occlusal adjustment

### Under Direct Supervision†[^1]

1. Place retraction cords and medicated pellets; this shall not include electrosurgery or the use of lasers for tissue retraction
2. Place amalgam, composite and gold foil in a tooth for condensation by the dentist
3. Remove sutures
4. Provide prophylactic and preventive measures, such as the application of fluorides and pit and fissure sealants and other recognized topical agents for the prevention of oral disease or discomfort; this shall not include prophylaxis
5. Isolate the operative field, including the placement and removal of rubber dams
6. Place and remove periodontal dressings and other surgical dressings
7. Place orthodontic separators; supervising licensed dentist shall ensure proper placement
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13. Perform hand removal of crowns and bridges that have been temporarily cemented
14. Remove excess cement from crowns or other restorations and orthodontic appliances; such removal shall not include any subgingival cement or debris
15. Perform hand removal of soft temporary restorations
16. Monitor a patient to whom the supervising dentist has administered nitrous oxide/oxygen inhalation analgesia, provided the RDA does not perform any other function while monitoring the patient (upon completion of a Board-approved course and with current Cardiac Life Support certification) and provided the patient is not taking any medication, whether prescribed by the dentist or by another licensed practitioner
17. Take impressions for and perform laboratory fabrication of mouth guards. This shall not include insertion of the appliance.
   - Place and remove arch wires and ligature wires
   - Perform bite registration procedures to determine occlusal relationships of diagnostic models only
   - Place temporary occlusive restorations
   - Place orthodontic separators; supervising licensed dentist shall ensure proper placement
   - Take alginate impressions
   - Take impressions for orthodontic appliances; supervising licensed dentist shall review and evaluate the impression prior to its use for fabrication
   - Place and remove matrices and wedges
   - Fabricate and cement temporary crowns and bridges after preparation of tooth (teeth) by a dentist. This does not include intraoral occlusal adjustment

### Note

This state allows dental assistants qualified in orthodontics to perform a separate set of orthodontic functions. Please see the separate chart for New Jersey orthodontic functions on the pages that follow.
## New Jersey (Orthodontic)

<table>
<thead>
<tr>
<th>Education/Training/Credential Required?</th>
<th>Job Title According to State of NJ</th>
<th>Proposed Standardized National Job Titles (see below)</th>
<th>Radiography Requirements</th>
<th>Functions NOT permitted by orthodontic assistants in NJ</th>
</tr>
</thead>
<tbody>
<tr>
<td>To perform specified orthodontic functions under the direct supervision of a licensed dentist in New Jersey, a dental assistant must be licensed by the New Jersey State Board of Dentistry as a Limited Registered Dental Assistant in Orthodontics (LRDA-O). To register as an LRDA-O, one must:</td>
<td></td>
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<td></td>
<td>The following functions are not permitted by any level of dental assistant:</td>
</tr>
<tr>
<td>(Option 1)</td>
<td></td>
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<td>• Make any diagnosis or develop any treatment plan with respect to the dental condition or treatment of any living person</td>
</tr>
<tr>
<td>• Satisfactorily complete, within the past 10 years, a training program for dental assistants approved by the Board and accredited by the Commission on Dental Accreditation (CODA) AND</td>
<td></td>
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<td></td>
<td>• Perform any surgical or irreversible procedure, including, but not limited to, the cutting of hard or soft tissue or the extraction of any tooth</td>
</tr>
<tr>
<td>• Have passed, within the past 10 years, DANB’s Certified Orthodontic Assistant (COA) Exam, Topical Fluoride (TF) Exam, and the Coronol Polish (CP) Exam AND</td>
<td></td>
<td></td>
<td></td>
<td>• Either bill or submit a claim for any service rendered involving the practice of dentistry or dental hygiene</td>
</tr>
<tr>
<td>• Apply to the New Jersey State Board of Dentistry for registration as an LRDA-O.</td>
<td></td>
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<td></td>
<td>• Receive payment for the performance of dental or dental hygiene services from any source other than an employer authorized by law to practice dentistry in this State or any dental clinic, institution, or employment agency, that employs licensed dental hygienists to provide temporary dental hygiene services</td>
</tr>
<tr>
<td>(Option 2)</td>
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<tr>
<td>• Be a high school graduate (or its equivalent) AND</td>
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<td></td>
<td>• The ADAA/DANB Alliance developed a listing of standardized job titles based on its national Core Competencies Study conducted from 2002-2005, for general chairside assistants only. Currently, only four states (CA, MD, NJ, and OR) recognize one or more separate levels of orthodontic assisting.</td>
</tr>
<tr>
<td>• Have at least two years’ work experience as a dental assistant under the supervision of a licensed dentist holding a specialty permit in orthodontics during the five-year period prior to application AND</td>
<td></td>
<td></td>
<td></td>
<td>If the ADAA/DANB Alliance were to attempt to replicate the general chairside assistant Core Competencies Study procedures for orthodontic assistants, the templates would contain the proposed standardized job titles that appear at left.</td>
</tr>
<tr>
<td>• Have passed, within the past 10 years, DANB’s Certified Orthodontic Assistant (COA) Exam, Topical Fluoride (TF) Exam, and the Coronol Polish (CP) Exam AND</td>
<td></td>
<td></td>
<td></td>
<td>Functions in this state that relate to the national DANB/ADAA Core Competencies 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.) Functions listed with bullets are part of this state’s practice act but are not specific matches to DANB/ADAA research.</td>
</tr>
<tr>
<td>• Apply to the New Jersey State Board of Dentistry for registration as an LRDA-O.</td>
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</tr>
</tbody>
</table>

Note: To satisfy the work experience requirement for the second pathway, a dental assistant must complete the work experience requirements needed to sit for the COA examination.

<table>
<thead>
<tr>
<th>Proposed Standardized National Job Titles (see below)</th>
<th>Radiography Requirements</th>
<th>Functions NOT permitted by orthodontic assistants in NJ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expanded Functions Orthodontic Assistant (EFOA)</td>
<td>To legally operate dental x-ray equipment and perform dental radiographic procedures in New Jersey, a dental assistant must be licensed as a Dental Radiologic Technologist (DRT) by the New Jersey Radiologic Technology Board of Examiners. To obtain this license, one must:</td>
<td></td>
</tr>
<tr>
<td>DANB Certified Orthodontic Assistant (COA) or Registered Orthodontic Assistant (ROA)</td>
<td></td>
<td>• Successfully complete high school or its equivalent</td>
</tr>
<tr>
<td>Orthodontic Assistant</td>
<td></td>
<td>• Be at least 18 years of age</td>
</tr>
<tr>
<td>Entry Level Orthodontic Assistant</td>
<td></td>
<td>• Be of good moral character</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Successfully complete a NJ state-approved dental radiography course or its equivalent within the 5 years prior to application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pass the national DANB RHS exam within the 5 years prior to application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Successfully complete a NJ state-approved dental radiography course or its equivalent more than 5 years prior to application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pass the national DANB RHS exam within the 5 years prior to application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Document competent work experience in performing dental radiography procedures within 5 years prior to application (Note: It is illegal to obtain this work experience in New Jersey without the permission of the NJ Bureau of X-Ray Compliance.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Successfully complete a NJ state-approved dental radiography course or its equivalent</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Hold current DANB CDA certification</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Apply for licensure to the State of New Jersey Bureau of X-Ray Compliance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Note: A licensed DRT is not permitted to perform conebeam CT procedures unless he or she has met the requirements in the 12/31/13 exemption. Please contact the Bureau of X-Ray Compliance at 609-984-5890 for details.</td>
</tr>
</tbody>
</table>
**Allowed functions**

(Functions with numbers relate specifically to Core Competency designation, functions with bullets are not a specific match to the list.)

### Under Direct Supervision*

5. Provide a written work authorization for emergency repair of a dental prosthesis provided that the prosthesis shall not require any intra-oral procedure and shall be thereafter inserted by a licensed dentist

15. Place and ligate arch wires; before an LRDA-O places the arch wire, the supervising licensed dentist shall verify the fit; only the supervising licensed dentist shall customize the arch wire for the patient

18. Apply topical fluoride

22. Make radiographic exposures as permitted by the Department of Environmental Protection, Bureau of X-Ray Compliance (see "Radiography Requirements" on previous page)

24. Provide oral health education including dietary analysis and clinical instruction in order to promote dental health

29, 43. Trial size (pre-select) orthodontic bands, wires, stainless steel crowns and temporary crowns intra-orally or on diagnostic models

42. Place orthodontic separators. The supervising licensed dentist shall ensure proper placement

44. Take alginate impressions

45. Remove bands and brackets without the use of rotary instruments

48. Isolate the operative field, not to include rubber dams

54, 61. Remove excess cement from crowns or other restorations and orthodontic appliances; such removal shall not include any subgingival cement or debris

56. Apply topical anesthetic agents

64. Fabricate mouth guard appliances; this shall not include insertion of the appliance

- Take dental photographs including the use of intraoral cameras
- Perform bite registration procedures
- Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes, and water
- Remove arch wires and ligature wires
- Perform bite registration procedures
- Etch teeth in preparation for bonding, sealants, or desensitizing agents
- Take impressions for orthodontic appliances; supervising licensed dentist shall review and evaluate the impression prior to its use for fabrication

- Assist a licensed dentist in the administration of nitrous oxide, provided the licensed dentist is physically present in the operatory at all times during the procedure
- Use a curing light for any dental procedure, such curing light shall not include a laser capable of altering, cutting, burning, or damaging hard or soft tissue or for electrosurgery for tissue retraction
- Perform emergency treatment to provide immediate relief from an offending appliance, such as clip a protruding arch wire or remove a loose bracket
- Apply hot and cold packets pursuant to the direction of a licensed dentist
- Administer physical modalities, including hot and cold packs, ultrasound, electrogalvanic stimulation, transcutaneous electrical nerve stimulation ("T.E.N.S.") and phonophoresis, consistent with scope of practice, in accordance with conditions outlined in regulation‡

- **For complete information about regulations governing delegation of these physical modalities to registered dental assistants, see the New Jersey section of DANB's State Fact Booklet for regulation 13:30-8.17.**

*Direct Supervision: A licensed dentist is physically present in the office at all times during the performance of any act, and such acts are performed pursuant to the licensed dentist’s order, control, and full professional responsibility.

‡ For complete information about regulations governing delegation of these physical modalities to registered dental assistants, see the New Jersey section of DANB's State Fact Booklet for regulation 13:30-8.17.
Appendix A: Numbering System for Dental Assisting Functions

The following list of 70 dental assisting tasks was developed by the ADAA/DANB Alliance as part of a study of dental assisting core competencies conducted between 2002 and 2005. These selected tasks were determined to be representative of a broad range of dental assisting core competencies.

The numbered functions listed in the preceding state charts correspond to functions that were included in the DANB/ADAA core competencies study and use language directly from the state’s dental practice act. The numbers are provided to facilitate comparison between and among states. Functions listed with bullets in the preceding charts are part of the state’s practice act but are not specific matches to the functions that were included in the 2002-2005 study.

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

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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 five levels of supervision for dental auxiliaries, including dental assistants, which it defines in its “Comprehensive Policy Statement on Allied Dental Personnel,” (2010: 505) which is part of its Current Policies, last updated in 2018. Note that “allied dental personnel” refers to dental assistants, dental hygienists, community dental health coordinators and dental laboratory technicians.

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

**Personal supervision:** A type of supervision in which the 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 type of supervision in which a dentist is in the dental office or treatment facility, personally diagnoses and treatment plans 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 evaluates their performance before dismissal of the patient.

**Indirect supervision:** A type of supervision in which a dentist is in the dental office or treatment facility, personally diagnosed and treatment planned 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 type of supervision in which a dentist is not required to be in the dental office or treatment facility when procedures are provided, but has personally diagnosed and treatment planned the condition to be treated, has personally authorized the procedures, and will evaluate the performance of the allied dental personnel.

**Public Health Supervision:** A type of supervision in which a licensed dental hygienist may provide dental hygiene services, as specified by state law or regulations, when such services are provided as part of an organized community program in various public health settings, as designated by state law, and with general oversight of such programs by a licensed dentist designated by the state.

Furthermore, the ADA’s “Comprehensive Policy Statement on Allied Dental Personnel” stipulates that intraoral expanded functions should be performed by allied dental personnel “under the 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 the attached charts, if a state’s dental practice act specifically defines levels of supervision, the state-specific definition is noted in the footer of the second page of the state chart.*