

New Hampshire Allowable and Prohibited Duties for Dental Assistants

At-a-glance information includes a dental assisting career ladder and job titles, radiography requirements, education and exam requirements, delegable functions and supervision levels, and prohibited functions.

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 annually or when changes occur regarding the accuracy and currency of this information. To verify, or if you have any questions, please contact your state's dental board.



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NEW HAMPSHIRE

State Career Ladder

There are four recognized levels of dental assistants in New Hampshire. See the following pages for details about requirements and allowed functions for each level. Numbers for each level are provided for internal reference and do not correspond to specific state designations.



State Radiography Requirements

To legally operate dental x-ray equipment and perform dental radiographic procedures under the direct supervision of a licensed dentist in New Hampshire, one must:

I. Be 18 years of age or older

AND

II. a. Be a Graduate Dental Assistant or hold DANB Certified Dental Assistant (CDA) certification OR

b. Complete 200 hours of experience in clinical dental assisting prior to course enrollment **AND** pass an introduction to dental assisting course and qualify in infection control, as described on page 108

AND

III. Successfully complete an expanded duty course in dental radiology meeting the requirements established by rule of the New Hampshire Board of Dental Examiners (NHBDE)

AND

IV. Pass the national DANB Radiation Health and Safety (RHS) exam

Functions NOT Permitted by Dental Assistants in New Hampshire

Functions with numbers correspond to functions included in a 2002-2005 study of dental assisting core competencies. See page 11 for more information.

The following functions are not permitted by any level of dental assistant:

- Diagnosis, treatment planning and prescriptions (including prescriptions for drugs and medicaments or authorization for restorative, prosthodontic, or orthodontic appliances)
- Surgical procedures on hard or soft tissues within the oral cavity; or any other intraoral procedure that contributes to, or results in, an irremediable alteration of the oral anatomy

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Apply silver diamine fluoride

State

1 Traditional Dental Assistant

Education, Training and Credential Requirements

A traditional dental assistant in New Hampshire may perform basic supportive dental procedures specified by the state dental practice act under the direct or general supervision of a licensed dentist. There are no education or training requirements for this level of dental assisting. A traditional dental assistant is a dental assistant who is neither a Certified Dental Assistant nor a Graduate Dental Assistant.

To perform specified duties under public health supervision to assist a Certified Public Health Dental Hygienist (CPHDH), a dental assistant must qualify in infection control in the dental office as described on page 108.

Allowable Functions

Functions with numbers correspond to functions included in a 2002-2005 study of dental assisting core competencies. See page 11 for more information.

Under Direct Supervision*

- 27. Assist with the placement or removal of a rubber dam and accessories used for its placement and retention, as directed by an operating dentist or during the course of a dental operation
- 48. Retract a patient's cheek, tongue or other oral tissues during a dental operation
- 48. Place cotton rolls prior to delivery of local anesthesia by dentist or dental hygienist

Under General Supervision*

- . Seat patient, place protective materials or garments including the lubrication of such patient's lips
- 24. Train or instruct groups or individual patients in techniques of oral hygiene and mouth care
- 25. Sterilize instruments
- 25. Reorganize instruments and equipment after the patient has departed

during the course of treatment being rendered by a licensed dentist by the use of vacuum devices, compressed air, mouthwashes and water 56. Place topical anesthesia prior to delivery of local anesthesia by

48. Remove such debris as is normally created or accumulated

- 56. Place topical anesthesia prior to delivery of local anesthesia by dentist
- 37. Take the blood pressure of a patient
- 41. Organize and arrange instruments on bracket tables
- 52. Process dental radiographs
- · Function as a dental laboratory technician
- · Perform tests on saliva

Under Public Health Supervision* to assist a Certified Public Health Dental Hygienist (CPHDH)

- 4. Seat patient, place protective materials or garments including the lubrication of such patient's lips
- 24. Train or instruct groups or individual patients in techniques of oral hygiene and mouth care
- 25. Process and sterilize instruments and perform infection control
- 41. Organize and arrange instruments on bracket tables
- 48. Retract a patient's cheek, tongue or other oral tissues during a dental hygiene and remove such debris as is normally created or accumulated during the course of treatment being rendered by a CPHDH by the use of vacuum devices, compressed air, mouthwashes and water
- 52. Process dental radiographs
 - Reorganize instruments and equipment after the patient has departed the healthcare facility
 - Assist with the placement or removal of a rubber dam and accessories used for its placement and retention, as directed by an operating CPHDH during the course of a dental hygiene operation

*Direct Supervision: A dentist with an active license is in the dental office, authorizes the procedures, remains in the dental office while the procedures are being performed and, before dismissal of the patient, evaluates the performance of the dental assistant.

General Supervision: A dentist with an active license has authorized the procedures; the procedures are being carried out in accordance with the dentist's diagnosis and treatment plan; and the procedures will be personally evaluated and reviewed by the dentist with the patient at least once in a 12-month period

Public Health Supervision: A dentist with an active license authorizes procedures which are to be carried out by: (1) A dental hygienist with an active license practicing in a school, hospital or other institution, or for a homebound person without the dentist having to be present, provided the dentist reviews the records once in a 12 month period; or (2) A dental assistant in a school, hospital or other institution, or for a homebound person who shall be supervised by a CPHDH as set forth in Den 401.01 (d).

2 DANB Certified Assistant (CDA) and Graduate Dental Assistant (GDA)

Education, Training and Credential Requirements

New Hampshire allows dental assistants who hold the national DANB Certified Dental Assistant (CDA) certification or are Graduate Dental Assistants* to perform specified duties (see below).

*Dental assistants in New Hampshire can earn status as a Graduate Dental Assistant by graduating from a CODA-accredited program of dental assisting.

Allowable Functions

Functions with numbers correspond to functions included in a 2002-2005 study of dental assisting core competencies. See page 11 for more information.

Under Direct Supervision*

- 6. Place and remove gingival retraction cord
- 12. Place amalgam prior to condensing by a dentist
- 13, 62, 69. Remove sutures and dressings
- 18. Apply topical fluoride after prophylaxis by a licensed professional
- 27. Place and remove rubber dams
- 28, 44, 46. Select impression trays; seat, hold, remove and pour impressions for study models, single arch athletic mouth guards, custom fluoride trays and whitening trays
- 29. Cement bands and bond brackets, not to include the use of rotary instruments to remove excess cement or bonding material
- 34. Place cavity liners and bases
- 35. Place periodontal dressings
- 37. Take and record blood pressure
- 45. Place and remove matrices
- 46. Make final impressions

- 49. Perform pulpal vitality testing procedures
- 50, 55. Place and remove temporary restorations, not to include temporary crowns and bridges, unless qualified (see requirements on page 108), and not to include the use of intraoral rotary instruments
- 56. Apply non-prescription topical anesthesia
- Take dental and medical histories
- Apply non-prescription desensitizing agents to the cementum and dentin
- Insert athletic mouth guards
- Make bite registrations when maximum intercuspation can be achieved
- Place and remove dry socket medications
- All duties designated to Dental Assistants, under the same levels of required supervision

3 Dental Assistant qualified to perform expanded duties

Education, Training and Credential Requirements

To perform any expanded duty in New Hampshire, with the exception of restorative duties restricted to EFDAs, a dental assistant must

- I. Be at least 18 years of age AND
- Requirements

Allowable

- II. a. Be a Graduate Dental Assistant* or DANB Certified Dental Assistant **OR**
- b. Pass an introduction to dental assisting course and qualify in infection control in the dental office as described on page 108 AND
- III. Meet specific course, certification, or experience requirements for each function, as described on page 108

Allowable Functions

Functions with numbers correspond to functions included in a 2002-2005 study of dental assisting core competencies. See page 11 for more information.

Under Direct Supervision*

- 1. Preliminary inspections of the oral cavity
- 9. Coronal polishing (see DANB's State Fact Booklet or NH Rule
- 302.06(u) for specific requirements related to coronal polishing) 22. Dental radiography
- 40. Dental sealants
- 47. Fabrication of provisional crown and bridge restorations
- 59. Monitor nitrous oxide administration
- In-office tooth whitening
- Orthodontic duties:
- 15. Attachment or tying in and removal of orthodontic wires
- 29. Trial fitting of orthodontic bands
- 42. Placement and removal of orthodontic separators

- 44. Taking impressions for orthodontic appliances
- 61. Using hand instruments to remove excess cement from bands on the coronal surfaces of the teeth
- 68. Simple emergency adjustment of orthodontic appliances to relieve pain
- Preparation of teeth for bonding of brackets
- Removal of orthodontic bands or brackets
- Trial fitting of head gear
- Bending arch wires

Under Direct Supervision of a Licensed Dental Hygienist*

9. Coronal polishing (see page 108 for specific information)

*Direct Supervision: A dentist with an active license is in the dental office, authorizes the procedures, remains in the dental office while the procedures are being performed and, before dismissal of the patient, evaluates the performance of the dental assistant.

Requirements

(4) Expanded Function Dental Auxiliary (EFDA) Education, Training and Credential Requirements To qualify to place, contour and adjust direct restorative materials within the oral cavity, one must register as an Expanded Function Dental Auxiliary (EFDA) with the New Hampshire Board of Dental Examiners (NHBDE). To register, one must: I. Be at least 18 years of age AND II. a. Be a registered dental hygienist OR b. Hold current DANB CDA certification (and be qualified to perform preliminary inspection of the oral cavity) OR c. Be a graduate of a CODA-accredited dental assisting program Requirements AND III. Have a minimum of 4,500 hours of dental clinical experience AND IV. Obtain a recommendation for the EFDA course from a NH-licensed dentist AND V. Complete an EFDA course in dental restorations meeting requirements established by rule of the NHBDE AND VI. Be currently certified in BLS-HCP AND VII. Apply to the NHBDE for an EFDA permit (Note: A dental auxiliary qualified in these restorative functions in another jurisdiction may qualify for endorsement by the Board by presenting written documentation of equivalent training and a letter from a supervising dentist attesting to experience with direct restorations within the previous two years.)

Allowable Functions

Functions with numbers correspond to functions included in a 2002-2005 study of dental assisting core competencies. See page 11 for more information.

Under Direct Supervision*

Allowable

12, 33, 51. Place, contour and adjust direct restorative materials within the oral cavity

*Direct Supervision: A dentist with an active license is in the dental office, authorizes the procedures, remains in the dental office while the procedures are being performed and, before dismissal of the patient, evaluates the performance of the dental assistant.

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Additional Requirements for Dental Assistants to Qualify in Expanded Functions Permitted in New Hampshire

The following table summarizes requirements for Graduate Dental Assistants, for holders of DANB Certified Dental Assistant (CDA) certification and for <u>Traditional Dental Assistants</u> to qualify to perform the expanded dental assistant functions permitted under New Hampshire regulations. See page 106 for Graduate Dental Assistant requirements.

Summary of Expanded Functions Requirements for <u>Graduate Dental</u> <u>Assistants</u> or for <u>Holders of DANB</u> <u>CDA Certification</u>		Summary of Expanded Functions Requirements for Traditional Dental Assistants
		Introduction to Dental Assisting For more detailed information, see New Hampshire administrative rule Den 302.06(e)-(f).
•	No further requirements beyond those to earn status as a Graduate Dental Assistant or to hold DANB's CDA certification	 Have at least 200 hours of clinical dental assisting experience prior to course, AND Successfully complete an introduction to dental assisting course and exam meeting requirements established by rule of the NHBDE
		Function: Infection control in the dental office For more detailed information, see New Hampshire administrative rule Den 302.06(b).
•	No further requirements beyond those to earn status as a Graduate Dental Assistant or to hold DANB's CDA certification	• Successfully complete a course and exam in infection control meeting requirements established by rule of the NHBDE (Note: The DALE Foundation's DANB ICE Review course meets this requirement. Successful performance on DANB's Infection Control exam [ICE] also meets this requirement.)
		Function: Provisional crown and bridge restorations For more detailed information, see New Hampshire administrative rule Den 302.06(k)-(m).
•	Successfully complete a course or exam in provisional crown and bridge restorations meeting requirements established by rule of the NHBDE	 Have at least 200 hours of clinical dental assisting experience prior to course, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in provisional crown and bridge restorations meeting requirements established by rule of the NHBDE
Function: Orthodontic duties For more detailed information, see New Hampshire administrative rule Den 302.06(n)-(p).		
•	Successfully complete a course and exam in orthodontic duties meeting requirements established by rule of the NHBDE	 Have at least 200 hours of clinical dental assisting experience prior to course, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in orthodontic duties meeting requirements established by rule of the NHBDE
Function: Dental sealants For more detailed information, see New Hampshire administrative rule Den 302.06(q)-(s).		
•	Successfully complete a course and exam in dental sealants meeting requirements established by rule of the NHBDE	 Have at least 400 hours of clinical dental assisting experience prior to course, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in dental sealants meeting requirements established by rule of the NHBDE
		Function: Coronal polishing For more detailed information, see New Hampshire administrative rule Den 302.06(t)-(v).
•	Successfully complete a course and exam in coronal polishing meeting requirements established by rule of the NHBDE	 Have at least 400 hours of clinical dental assisting experience, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in coronal polishing meeting requirements established by rule of the NHBDE
		Function: Monitoring nitrous oxide administration For more detailed information, see New Hampshire administrative rule Den 302.06(w)-(y).
•	Successfully complete a course and exam in nitrous oxide meeting requirements established by rule of the NHBDE, AND Be currently certified in BLS-HCP	 Have at least 400 hours of clinical dental assisting experience prior to course, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in monitoring the administration of nitrous oxide anesthesia meeting requirements established by rule of the NHBDE, AND Be currently certified in BLS-HCP
		For more detailed information, see New Hampshire administrative rule Den 302.06(z)-(ab).
•	Successfully complete a course and exam in in-office tooth whitening meeting requirements established by rule of the NHBDE	 Have at least 400 hours of clinical dental assisting experience prior to course, AND Meet Introduction to Dental Assisting course requirements (see requirements above), AND Qualify in infection control (see requirements above), AND Successfully complete a course and exam in in-office tooth whitening meeting requirements established by rule of the NHBDE

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
- 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 arch wires
- 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
- 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 setups
- 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 fourhanded 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

Appendix B: 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 five levels of supervision for allied dental personnel, 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 2020. Note that "allied dental personnel" refers to dental assistants, dental hygienists 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, has 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 has not made 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 template.

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