DANB
Dental Assisting National Board

New Mexico

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.

INSIDE:

- State requirements and functions chart
- Appendix A: information about numbering system
- Appendix B: information about supervision levels for dental assistants

NEW MEXICO

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State Job Titles

State Career Ladder

There are three recognized levels of dental assistants in New Mexico. 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.

3 Expanded Function Dental Auxiliary

2 Dental Assistant with State Certificate in Expanded Functions

1 Dental Assistant

Other Levels

Other Specialized Dental Assistant Categories

This state allows dental assistants meeting requirements in the following specialized categories to perform sets of functions specific to those categories. See requirements and functions for these categories on the indicated pages.

Community Dental Health Coordinator (CDHC) See page 120

State Radiography Requirements

State Radiography Requirements

A dental assistant must be New Mexico state-certified. To obtain certification, one must:

1. Meet the education and examination requirements through one of the following pathways:
   - **a.** Pathway one: Study by independent preparation or in a training course on radiation health and safety and pass the dental assisting national board (DANB) written examination on radiation health and safety. The results of the DANB exam are valid in New Mexico for a period not to exceed 24 months. OR
   - **b.** Pathway two: Successful completion of a board-approved training course in radiation health and safety that includes a board-approved written examination on radiation health and safety; and the course and examination must have been successfully completed within (24) months prior to application to the board. AND
2. Pass the jurisprudence exam with a score of at least seventy-five percent. AND
3. Obtain basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification from the American heart association, the American red cross, or the American safety and health institute/health and safety Institute (ASHI/HSI); cannot be a self-study course.
4. Submit application to the New Mexico Board of Dental Health Care for certification to perform radiography.

Note: A dental assistant certified to perform dental radiography in another state with requirements not less stringent than those in New Mexico may be certified based on credentials,

Prohibited

Functions NOT Permitted by Dental Assistants in New Mexico

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:

46. Final impressions, to include physical and digital impressions, for multiple-unit restorations or prosthetic appliances*
- Removal of, or addition to, the hard or soft tissue of oral cavity
- Diagnosis and treatment planning
- Final fitting and adaptation of prostheses
- Final fitting, adaptation, seating and cementation of any fixed or removable dental appliance or restoration, including but not limited to inlays, crowns, space maintainers, habit devices, anti-snoring or sleep apnea appliances, or splints
- Irrigation and medication of canals, cone try-in, reaming, filing or filling of root canals
- Other services defined as the practice of dentistry or dental hygiene
- Bleaching or whitening teeth without the direct or indirect supervision of a dentist
- Laser-assisted non-surgical periodontal treatment

**This task is prohibited for dental assistants and dental assistants with state certification in expanded functions. EFDAs are permitted, under direct supervision, to take impressions, including digital impressions, for permanent fixed or removable prosthetics involving single teeth; EFDAs are prohibited from taking final impressions for multiple units of crowns, bridges, cast framework, partial dentures, or full dentures final impressions.*

NEW MEXICO

NM

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1 Dental Assistant

Requirements

Education, Training and Credential Requirements

A dental assistant in New Mexico is an individual who may perform basic supportive dental procedures specified by the state dental practice act under the supervision of a licensed dentist.

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

Allowable

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 Indirect Supervision*

9. Rubber cup coronal polishing
18. Application of topical fluoride
40. Pit and fissure sealant application
59. Administer nitrous oxide with the dentist's authorization

- Any basic supportive dental procedure, not excluded elsewhere in rule or in statute

Note: Rubber cup coronal polishing, application of topical fluoride and pit and fissure sealants must be approved by the dentist or dental hygienist upon completion.

DANB's Note on Allowable Dental Assisting Functions

In the state of New Mexico, all dental assistants may:

- Perform infection control and occupational safety procedures
- 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.

* **Indirect Supervision:** A dentist, or in certain settings a dental hygienist or dental assistant certified in expanded functions is present in the treatment facility while authorized treatments are being performed by a dental assistant

2 Dental Assistant with State Certification in Expanded Functions

Requirements

Education, Training and Credential Requirements

To perform expanded functions under the general supervision of a licensed dentist in New Mexico, a dental assistant must earn state certification in each of the desired expanded functions. To qualify, one must:

Rubber cup coronal polishing and application of topical fluoride:

1. Study by independent preparation or in a training course in the functions and assist with/observe five cases of rubber cup coronal polishing on children and adults and five applications of topical fluoride on children, **AND**
2 Pass DANB's Coronal Polish exam and DANB's Topical Fluoride exam **AND**
3. Perform rubber cup coronal polishing on five adults and children and application of topical fluoride on five children while being personally observed by a licensed dentist, dental hygienist, or dental assistant certified in rubber cup coronal polishing and application of topical fluoride, and submit verification to the New Mexico Board of Dental Health Care, **AND**
4. Pass the New Mexico Jurisprudence (take-home) exam, **AND**
5. Apply to the New Mexico Board of Dental Health Care for certification in coronal polishing and application of topical fluoride.

Note: A dental assistant who is certified to perform rubber cup coronal polishing and application of topical fluoride in another state with requirements not less stringent than those in New Mexico may be certified based on credentials.

Application of pit and fissure sealants:

1. The applicant must have 2,080 hours of clinical chair side dental assisting within the two years prior to applying for certification, **AND**
2. Study by independent preparation or a training course on pit and fissure sealant application and assisted with and observed application of 12 pit and fissure sealants, **AND**
3. Pass a board or DANB examination on the application of pit and fissure sealants, **AND**
4. Apply pit and fissure sealants while being personally observed by a licensed dentist or dental hygienist on five patients and submit verification to the New Mexico Board of Dental Health Care, **AND**
5. Pass the New Mexico Jurisprudence (take-home) exam, **AND**
6. Apply to the New Mexico Board of Dental Health Care for certification in the application of pit and fissure sealants.

Note: A dental assistant who is certified to perform application of pit and fissure sealants in another state with requirements not less stringent than those in New Mexico may be certified based on credentials.

Allowable

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 General Supervision*
9. Rubber cup coronal polishing
18. Application of topical fluoride
22. Place and expose dental radiographs
40. Pit and fissure sealants

Note: New Mexico rules indicate that collaborative practice dental hygienists may work with and supervise dental assistants, including dental assistants certified to perform these expanded functions.

* **General Supervision:** Authorization by a dentist of the procedures to be used by a dental assistant or expanded functions dental auxiliary and the execution of the procedures in accordance with a dentist's diagnosis and treatment plan at a time the dentist is not physically present and in facilities as designated by rule of the board

NEW MEXICO

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3 Expanded Function Dental Auxiliary

Requirements

Education, Training and Credential Requirements

To earn New Mexico certification as an expanded function dental auxiliary (EFDA), one must:

1 a. Complete an accepted EFDA course in a program approved by the New Mexico Board of Dental Health Care or accredited by CODA **OR**

b. • Complete a minimum of five years, 1000 hours per year, continuous employment as a dental assistant or dental hygienist, **AND**
• Complete a course of study in subject areas prescribed by the board, including a post-test approved by the board, **AND**
• Obtain a recommendation for EFDA certification from a supervising dentist,

AND

2. Earn state certification in radiography, rubber cup coronal polishing and application of topical fluoride and pit and fissure sealant expanded functions, **AND**

3. Pass a clinical exam accepted by the New Mexico Board of Dental Health Care for EFDA certification, **AND**

4. Complete the New Mexico jurisprudence exam with a score of at least 75%, **AND**

5. Apply for an apprenticeship permit from the NM Board of Dental Health Care, **AND**

6. Complete an apprenticeship within 180 days, **AND**

7. Return permit and a signed affidavit to New Mexico Board of Dental Health Care, which will then issue EFDA certificate.

Note: Holders of state certification in dental assisting expanded functions and EFDAs must have formal training in infection control from a course approved in accordance with New Mexico Board of Dental Health Care rules and regulations.

Allowable

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*

12, 51. Place and shape direct restorative materials into cavity preparations completed by a dentist, using instrumentation as necessary and proper for this purpose

43. Perform preliminary fitting and shaping of stainless steel crowns which shall undergo final evaluation and cementation by a dentist

46. Take impressions for permanent fixed or removable prosthetics involving single teeth, to include digital impressions; these include single crowns or single tooth replacement prosthetics; EFDAs shall not take final impressions for multiple units of single crowns, bridges, cast framework partial dentures or full dentures final impressions

47, 50. Cement permanent or provisional restorations with temporary or provisional cement, provided the permanent cementation will be completed or monitored by the dentist within six months

50. Place temporary or sedative restorations in open carious lesions after hand excavation of gross decay and debris; if pain is perceived by the patient, dentist shall evaluate lesion before completion by EFDA. The EFDA shall NOT use any automated method to clean out the lesion or prepare the tooth, including but not limited to high speed, slow speed, air abrasion, ultrasonic, laser etc.

50. Place temporary or sedative restorative material into unprepared tooth fractures as a palliative measure; the EFDA shall NOT use any automated method to clean out the fracture or prepare the tooth, including but not limited to high speed, slow speed, air abrasion, ultrasonic, laser etc.

61. Remove residual orthodontic bracket or band cement or resin from teeth after the brackets or bands have been removed by the dentist, or to prepare the tooth or teeth for re-cementation of a debonded bracket or band, using instrumentation as necessary and proper for this purpose

Under General Supervision*

40. Place pit and fissure sealants (under supervision as certification or licensure allows)

47. In emergency situation, recement temporary or permanent crowns or bridges using provisional cement when instructed to do so by the dentist, provided the permanent cementation will be completed or monitored by the dentist within six months

Note: *EFDA duties are allowed under direct supervision of a NM licensed dentist provided the dentist has prepared the cavity or tooth for the restorative procedure; instructed the EFDA on the particular elements of the individual case; fully examined and evaluated the procedure carried out by the EFDA, and corrected or replaced any deficiency found in the EFDA work before allowing the patient to leave the treatment facility; the dentist is ultimately responsible for the quality of the final restorative procedure carried out by the EFDA; and not more than two EFDAs, performing expanded functions, per licensed dentist are present in office.)*

* **General Supervision**: Authorization by a dentist of the procedures to be used by a dental assistant or expanded functions dental auxiliary and the execution of the procedures in accordance with a dentist's diagnosis and treatment plan at a time the dentist is not physically present and in facilities as designated by rule of the board

* **Direct Supervision:** The process under which an act is performed when a dentist licensed pursuant to the Dental Health Care Act: (1) is physically present throughout the performance of the act; (2) orders, controls and accepts full professional responsibility for the act performed; and (3) evaluates and approves the procedure performed before the patient departs the care setting

NEW MEXICO (COMMUNITY DENTAL HEALTH COORDINATOR)

NM

Updated by DANB 7/30/2026

Community Dental Health Coordinator

Requirements

Education, Training and Credential Requirements

New Mexico CDHCs may perform specified preventive, restorative, and palliative procedures under general supervision of a dentist. To qualify, one must:

1. Have a high school diploma or equivalent, or a college degree, **AND**
2. Have New Mexico certification in radiography, rubber cup coronal polishing and application of topical fluoride and pit and fissure sealant expanded functions (see above for requirements), **AND**
3. Complete the New Mexico jurisprudence exam with a score of at least 75%, **AND**
4. Successfully complete a CDHC program approved by the New Mexico Board of Dental Health Care, **AND**
5. Submit application to the New Mexico Board of Dental Health Care.

CDHCs must have formal training in infection control from a course approved in accordance with New Mexico Board of Dental Health Care rules and regulations.

Allowable

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 General Supervision*

9. Rubber cup coronal polishing (not to be represented as a prophylaxis)**
18. Topical application of fluorides**
22, 52. Expose and develop necessary radiographs as ordered by the supervising dentist or as established in protocol by a supervising dentist
40. Application of pit and fissure sealants**
50. Place temporary and sedative restorative materials in unexcavated carious lesions and unprepared tooth fractures

- Take a complete health and dental history
- Observe and transmit patient data through teledentistry means to a dentist
- Transmit prescription or medication orders on the direct order of a dentist
- Act as an advocate for patients and the community in accessing dental care
- Provide the following limited palliative procedures:
  24. Instruct the patient on brushing, flossing, gingival massage or cleaning for gingival inflammation or infection
  - Application of hot/cold compresses to the face and mouth
  - Instruct patient in the use of various rinses containing salt, sodium bicarbonate, chlorhexidine, etc. as ordered by the dentist
  - Place avulsed teeth in the proper preservation solution for transport to a dentist
  - Apply pressure compresses to intraoral wounds
  - Perform any other palliative procedures as directly instructed by the supervising dentist, and within the scope of practice of the CDHC

** when previously authorized by the supervising dentist or dental hygienist and cavitation of the enamel is not present

* **General Supervision:** Authorization by a dentist of the procedures to be used by a dental assistant or expanded functions dental auxiliary and the execution of the procedures in accordance with a dentist's diagnosis and treatment plan at a time the dentist is not physically present and in facilities as designated by rule of the board

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 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
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 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 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

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.