DANB
Dental Assisting
National Board

North Dakota

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.

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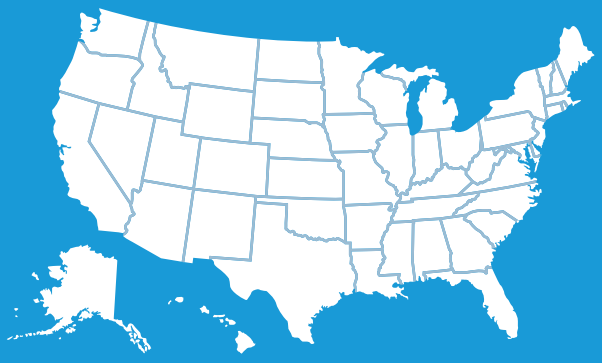

INSIDE:

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

NORTH DAKOTA

Updated by DANB 5/4/2026

State Job Titles

State Career Ladder

There are four recognized levels of dental assistants in North Dakota. 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.

4. Registered Dental Assistant (RDA) *with Restorative Functions Permit*
3. Registered Dental Assistant (RDA)
2. Qualified Dental Assistant (QDA)
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.

Anesthesia Assisting	See page 132

State Radiography Requirements

State Radiography Requirements

To legally operate dental x-ray equipment and perform dental radiographic procedures under general supervision in North Dakota, a dental assistant must:

1. Be a Qualified Dental Assistant (QDA) (*see requirements*)
   OR
2. Hold a Qualified Dental Assistant (QDA) limited radiology registration. To register, an applicant must provide evidence of having completed, within two years of application, the following:
   a. A board-approved course on radiation health and safety or the DANB Radiation Health and Safety (RHS) exam
   AND
   b. A course in CPR
   OR
3. Be a Registered Dental Assistant (RDA) **(***see requirements***)**

   AND

4. Complete the North Dakota State Board of Dental Examiners Qualified Dental Assistant – Limited Radiology Registrant Application

Every QDA-Limited Radiology Registrant in North Dakota must maintain a current certificate of proficiency in cardiopulmonary resuscitation.

*Note: A **Qualified Dental Assistant (QDA)-Limited Radiology Registrant** may also perform any of the functions allowed to a dental assistant.*

Prohibited

Functions NOT Permitted by Dental Assistants in North Dakota

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:

20. Scaling, root planing or gingival curettage
34. Place bases or cavity liners
40. Apply pit and fissure sealants (unless requirements have been met)

- Diagnosis and treatment planning
- Surgery on hard or soft tissue
- Administer local anesthetics, sedation or general anesthesia drugs or titrate local anesthetics, sedation or general anesthesia drugs without board authorized permit
- Initiate the administration of nitrous oxide to a patient
- Any irreversible dental procedure or procedures which require the professional judgment and skill of a licensed dentist
- Adjust a crown which has been cemented by a dentist
- Activate any type of orthodontic appliance or fabricate orthodontic impressions for an individual who is not a patient of record
- Cement or bond orthodontic bands or brackets that have not been previously placed by a dentist
- Measure the gingival sulcus with a periodontal probe
- Use a high-speed handpiece inside the mouth
- Unless authorized by permit in accordance with North Dakota code, monitor a patient who has been induced to a level of moderate sedation, deep sedation, or general anesthesia until the dentist authorized by permit to administer sedation or anesthesia determines the patient may be discharged for recovery
- Produce on a patient of record, a final scan by digital capture for review by the authorizing dentist for a prescriptive fixed or removable appliance

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NORTH DAKOTA

Updated by DANB 5/4/2026

1 Dental Assistant

Requirements

Education, Training and Credential Requirements

A dental assistant in North Dakota may perform basic supportive dental procedures specified by the state dental practice act (see below) under the supervision of a licensed dentist.

Every dental assistant in North Dakota must have a current certificate of proficiency in cardiopulmonary resuscitation.

Note: An unregistered dental assistant enrolled in a board-approved qualified dental assistant program and working under the direct supervision of a dentist may perform the duties of a qualified dental assistant.

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*

37. Take and record pulse, blood pressure, and temperature
39. Receive removable dental prosthesis for cleaning or repair
44. Take impressions for study casts
48. Retract patient's cheek, tongue, or other tissue parts during a dental procedure
48. Isolate the operative field, not to include rubber dams

18, 56. Apply topical medications and drugs to oral tissues, including topical anesthetic, topical fluoride, fluoride varnish, and desensitizing agents, but not including caustic agents

- Take and record preliminary dental medical history for the interpretation by the dentist
- Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base)
- Hold a curing light for any dental procedure. Curing lights may not include a laser capable of cutting, burning, or damaging hard or soft tissue or for electrosurgery for tissue retraction
- 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
- Produce on a patient of record, a final scan by digital capture for review and inspection by the authorizing dentist for a prescriptive fixed or removable appliance
- Monitor a patient that has been induced into nitrous oxide analgesia after the dentist has provided sufficient training to the dental assistant completed after January 1, 2024. The dentist must maintain documentation of the training for the duration of the delegation and must provide documentation of the training to the board upon request

Under General Supervision

24. Provide oral hygiene instructions and education
62. Remove periodontal dressings

***Direct Supervision**: The dentist is physically present 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 dental assistant, and, before dismissal of the patient, evaluates the performance of the dental assistant.

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2 Qualified Dental Assistant (QDA)

Requirements

Education, Training and Credential Requirements

To earn status as a Qualified Dental Assistant (QDA) in North Dakota, one must:

1. a. Complete 300 hours of on-the-job clinical training **and either**
   - have passed DANB's National Entry Level Dental Assistant (NELDA) certification within one year prior to application ***or***
   - have passed DANB's NELDA certification and completed, within two years prior to application, 16 hours of continuing education

   OR

   b. Pass DANB's NELDA certification and the North Dakota Department of Career and Technical Education dental assisting education program association

   OR

   c. Successfully complete a North Dakota board-approved equivalent course within one year prior to application

   OR

   d. Be licensed in good standing in another jurisdiction and possess qualifications, education, or experience substantially similar to the requirements for licensure in North Dakota. Applicants must submit evidence of at least one year of prior employment as a dental assistant, have completed 16 hours of continuing education, and meet any other requirement set by the Board

   AND

2. Pass a written examination of the laws and rules governing the practice of dentistry in North Dakota within one year of application

   AND

3. Maintain current CPR certification

   AND

4. Provide verification of completing an infection control course within two years prior to application (if passing DANB's ICE exam occurred more than two years prior to application)

   AND

5. Complete the North Dakota State Board of Dental Examiners Qualified Dental Assistant Application

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*

3. Orally transmit a prescription that has been authorized by the supervising dentist.
14. Dry root canal with paper points
45. Place and remove matrix bands and wedges

- Acid etch enamel surfaces as directed by the dentist
- Apply resin infiltration
- Remove band and bracket adhesives with a slow speed hand-piece

Under General Supervision*

13. Remove sutures
15. Place and remove arch wires or appliances that have been activated by the dentist

15, 42. Place, tie, and remove ligature wires and elastic ties, and select and place orthodontic separators

18, 56. Apply topical medications and drugs to oral tissues, including topical anesthetic and anticariogenic agents, and desensitizing agents

22. Take dental radiographs (see "Radiography Requirements")
29. Preselect and prefit orthodontic bands
37. Take and record pulse, blood pressure, and temperature
46. Produce on a patient of record, a final scan by digital capture for review and inspection by the authorizing dentist for a prescriptive fixed or removable appliance

- Take and record preliminary dental and medical history for the interpretation by the dentist
- Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative care
- Repack dry socket medication and packing for palliative care
- All duties designated to Dental Assistants

Under Indirect Supervision*

9. Polish coronal surfaces of teeth with a rubber cup or brush after the dentist provides the dental assistant with sufficient training. The dentist must maintain documentation of the training completion for the duration of the delegation and provide it to the board upon request
29. Place orthodontic brackets using an indirect bonding technique by seating the transfer tray loaded with brackets previously positioned in the dental laboratory by a licensed dentist

***Direct Supervision**: The dentist is physically present 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 dental assistant, and, before dismissal of the patient, evaluates the performance of the dental assistant.

***Indirect Supervision**: The 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 dental assistant.

***General Supervision**: The dentist has authorized the procedures and they are carried out in accordance with the dentist's diagnosis, and treatment plan. The dentist is not required to be in the treatment facility. A new patient who has not been examined by the authorizing dentist may be seen by a dental hygienist authorized to provide duties under general supervision.

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3 Registered Dental Assistant (RDA)

Requirements

Education, Training and Credential Requirements

To earn status as a Registered Dental Assistant (RDA) in North Dakota, one must:

1. a. Within one year prior to application, have passed DANB's national Certified Dental Assistant (CDA) exam ***or*** have completed a CODA-accredited or North Dakota board-approved dental assisting program

   OR

   b. Have passed DANB's national CDA exam and submit evidence of prior employment as a dental assistant ***or*** have completed a CODA-accredited or North Dakota board-approved dental assisting program (more than one year prior to application)

   AND

   Have completed 16 hours of continuing education within two years prior to application

   OR

   c. Be licensed in good standing in another jurisdiction and possess qualifications, education, or experience substantially similar to the requirements for licensure in North Dakota. Applicants must submit evidence of at least one year of prior employment as a dental assistant, have completed 16 hours of continuing education, and meet any other requirement set by the Board

   OR

   d. Have passed an examination administered by the Joint Commission on National Dental Examinations (JCNDE) or the dental hygiene certification board of Canada (FDHRC) ***and*** have completed 16 hours of continuing education within two years prior to application

   AND

2. Pass a written examination of the laws and rules governing the practice of dentistry in North Dakota within one year of application

   AND

3. Maintain current CPR certification

   AND

4. Provide verification of completing an infection control course within two years prior to application (if graduation from approved program or passing DANB's CDA exam occurred more than two years prior to application)

   AND

5. Complete the North Dakota State Board of Dental Examiners Registered Dental Assistant Application

To **apply pit and fissure sealants** under the general supervision of a licensed dentist, a registered dental assistant must provide documentation of successful completion of a North Dakota board-approved sealant course or training that includes hand-skills, and has received an endorsement from the board. The endorsement will appear on the registration card.

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. Polish the coronal surfaces of the teeth with a rubber cup or brush
13. Remove sutures
15. Place and remove arch wires or appliances that have been activated by a dentist
15, 42. Place, tie, and remove ligature wires and elastic ties, and place orthodontic separators
18, 56. Apply topical medications and drugs to oral tissues, including topical anesthetic and topical fluoride, fluoride varnish, silver diamine fluoride, hemostatic agents, and desensitizing agents
22. Take dental radiographs
24. Provide oral hygiene education and instruction
29 Preselect and prefit orthodontic bands
37. Take and record pulse, blood pressure, and temperature
40. Apply pit and fissure sealants and adjust sealants with a slow-speed handpiece (*see requirements above)*
44. Take impressions or occlusal bite registrations for study casts
44. Take impressions for fixed or removable orthodontic appliances, athletic mouth guards,bleaching trays, bite splints, flippers, and removable prosthetic repairs
47, 54. Fabricate, adjust, place, recement or remove a temporary crown, bridge, or onlay or temporary restorative material. This applies only to dentitions actively under treatment for which a permanent restoration is being fabricated
49 Perform nonsurgical clinical and laboratory diagnosis tests, including pulp testing, for interpretation by the dentist

- Cut and remove arch wires or replace loose bands, loose brackets or other orthodontic appliances for palliative treatment
- Polish restorations with a slow-speed handpiece
- Take and record preliminary dental and medical history for the interpretation by the dentist
- Receive removable dental prosthesis for cleaning or repair
- Provide an oral assessment for interpretation by the dentist
- Repack dry socket medication and packing for palliative treatment
- Provide screenings for the early identification of individuals at potentially high risk for a specific condition or disorder (a screening is neither diagnostic nor a definitive indication of a specific condition and does not involve making diagnoses that lead to treatment plans)
- Adjust a temporary denture or partial for dentitions actively under treatment for which permanent dentures or partial dentures are being fabricated

Allowable functions for this level continued on next page

***General Supervision**:The dentist has authorized the procedures and they are carried out in accordance with the dentist's diagnosis, and treatment plan. The dentist is not required to be in the treatment facility. A new patient who has not been examined by the authorizing dentist may be seen by a dental hygienist authorized to provide duties under general supervision.

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Allowable

Allowable Functions for Registered Dental Assistant (RDA), continued

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*, on a patient of record

6. Place retraction cord in the gingival sulcus of a prepared tooth prior to the dentist taking an impression of the tooth
27. Place and remove rubber dams
29. Place orthodontic brackets using an indirect bonding technique by seating the transfer tray loaded with brackets previously positioned in the dental laboratory by a licensed dentist
59. Monitor a patient who has been inducted by a dentist into nitrous oxide inhalation analgesia
61. Remove excess cement from inlays, crowns, bridges and orthodontic appliances with hand instruments or a slow-speed handpiece

- Apply bleaching solution, activate light source, and monitor and remove bleaching materials

Under Direct Supervision*

- Take face bow transfers
- Acid-etch enamel surfaces prior to direct bonding of orthodontic brackets or composite restorations
- Adjust permanent crowns outside of the mouth
- Administer emergency medications to a patient in order to assist the dentist in an emergency
- Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base)

Indirect Supervision

- Terminate or reduce the amount of nitrous oxide previously administered by the authorized nitrous oxide inhalation analgesia provider

4 Registered Dental Assistant with Restorative Functions Permit

Requirements

Education, Training and Credential Requirements

To earn a permit **to perform specified restorative functions** under the direct supervision of a dentist, a Registered Dental Assistant must:

1. a. Complete a board-approved curriculum from a program accredited by the Commission on Dental Accreditation or other board-approved course within the last five years. The course must include a clinical and written examination, **AND**
   b. Pass an examination from a dental testing agency approved by the board within the last five years

   The Board may require completion of the Restorative Function (RF) component of DANB's Certified Restorative Functions Dental Assistant (CRFDA) certification exam

OR

2. a. Pass an examination from a dental testing agency more than five years from the date of application **AND**
   b. Complete the RF component of DANB's CRFDA certification examination **AND**
   c. Provide evidence from another state or jurisdiction where the applicant legally is or was authorized to perform restorative functions and certification from the supervising dentist of successful completion of at least 25 restorative procedures within the immediate five years prior to the date of application

AND

3. Complete the North Dakota State Board of Dental Examiners Restorative Functions Permit Application

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, carve, and adjust amalgam, glass ionomer, or composite restorations with hand instruments or a slow-speed hand**
33. Place, contour, and adjust composite restorations where the margins are entirely within the enamel with hand instruments or a slow-speed handpiece
70. Adapt and cement stainless steel crowns

***An RDA with a restorative functions permit may perform the placement and finishing of direct alloy or direct composite restorations after the supervising dentist has prepared the dentition for restoration.*

***Direct Supervision**:The dentist is physically present 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 dental assistant, and, before dismissal of the patient, evaluates the performance of the dental assistant.
***Indirect Supervision**: The 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 dental assistant.

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Dental Anesthesia Assistant

Requirements

Education, Training and Credential Requirements

To provide supportive anesthesia care, a dental anesthesia assistant must possess the expertise to do so in a safe and effective manner and receive education in the perioperative and emergent care management of patients undergoing dental office sedation and anesthesia.

Every dental anesthesia assistant in North Dakota must have a current certificate of proficiency in cardiopulmonary resuscitation.

Allowable

Allowable Functions

- Provide supportive anesthesia care

Dental Anesthesia Assistant with Anesthesia Assisting Permit

Requirements

Education, Training and Credential Requirements

To be authorized **to perform specified anesthesia assisting function**s under the supervision of a dentist authorized by permit to provide moderate sedation, deep sedation or general anesthesia, a Dental Anesthesia Assistant may earn a Class I or a Class II anesthesia assistant permit.

To earn a **Class I anesthesia assistant permit**, a Dental Anesthesia Assistant must:

1. Complete hands-on training in intravenous access or phlebotomy that includes live experience in starting and maintaining IV lines, and infection control. The evidence may be either a certificate of completion issued by a board approved dental anesthesia assistant education and training course or an attestation by a supervising dentist who provided the training. A supervising dentist providing the training shall retain documentation of the training and provide it to the board upon request
   AND
2. Complete a board-approved dental anesthesia assistant education and training course that includes vital sign monitoring, training on emergency oxygen administration, suction, use of advanced automated external defibrillators, and crash cart equipment. competency examination,
   AND
3. Hold current and valid certification for health care provider basic life support, or advanced cardiac life support or pediatric advanced life support
   AND
4. Provide a copy of a valid North Dakota general anesthesia, deep sedation, or moderate sedation permit of the dentist where the individual will be performing anesthesia assistant services
   AND
5. Apply to the North Dakota Board of Dental Examiners for a Class I Anesthesia Assisting Permit.

To earn a **Class II anesthesia assistant permit**, a Dental Anesthesia Assistant must:

1. Complete the dental anesthesia assistant national course or an equivalent board-approved pharmacology course
   AND
2. Complete either a dental anesthesia assistant national certification or an equivalent pharmacology certification, or proof of passage within the two years preceding application of a board-approved competency examination
   AND
3. Complete a board-approved hands-on training in intravenous access or phlebotomy that includes live experience starting and maintaining IV lines, and infection control. The evidence may be either a certificate of completion issued by a board-approved dental anesthesia assistant education and training course or an attestation by a supervising dentist who provided the training. A supervising dentist providing the training shall retain documentation of the training and provide it to the board upon request
   AND
4. Hold current and valid certification for health care provider basic life support, or advanced cardiac life support or pediatric advanced life support,
   AND
5. Provide a copy of a valid North Dakota general anesthesia, deep sedation, or moderate sedation permit of the dentist where the individual will be performing the anesthesia assistant services
   AND
6. Apply to the North Dakota Board of Dental Examiners for a Class II Anesthesia Assisting Permit.

Note: Individuals authorized by other North Dakota licensing boards and whose scope of practice encompasses the duties of a dental anesthesia assistant are not required to obtain the respective anesthesia permit from the board to carry out the duties listed below

See allowable functions for this level on next page

***Contiguous Supervision**: The dentist whose patient is being treated has personally authorized the procedures to be performed. The supervising dentist is continuously onsite and physically present in the treatment facility while the procedures are performed by the qualified dental staff member and capable of responding immediately in the event of an emergency. The term does not require a supervising dentist to be physically present in the operatory.
Direct visual supervision: The dentist is physically present to issue a verbal command and under direct line of sight.

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Dental Anesthesia Assistant with Anesthesia Assisting Permit (continues from previous page)

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.

A registered dental assistant or dental anesthesia assistant authorized by permit and **under the contiguous supervision* of a dentist authorized by permit to provide moderate sedation, deep sedation or general anesthesia** may:

- Initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medication, sedation or general anesthesia
- Adjust the rate of intravenous fluids infusion only to maintain or keep the line patent or open
- Prepare anesthesia equipment and perform patient monitoring
- Assist with emergency treatment and protocols
- Draw up and prepare medications
- Follow instructions to deliver medication into an intravenous line upon verbal command of the supervising dentist
- Adjust the rate of intravenous fluids infusion beyond a keep-open rate upon verbal command of the supervising dentist
- Adjust an electronic device to provide medications, such as an infusion pump upon verbal command of the supervising dentist

Registered Dental Assistant with Permit in Administering Nitrous Oxide Inhalation Analgesia

Requirements

Education, Training and Credential Requirements

To earn a permit **to administer nitrous oxide inhalation analgesia** under the indirect supervision of a dentist, a Registered Dental Assistant must:

1. a. Complete a twelve-hour, board-approved course of training or course provided by a program accredited by an accrediting body recognized by the U.S. Department of Education within thirteen months prior to application **OR**
   b. Complete a twelve-hour, board-approved course of training or course provided by a program accredited by an accrediting body recognized by the U.S. Department of Education more than thirteen months prior to application, have legally administered nitrous oxide inhalation analgesia for a period of time during the three years prior to application, and provide written documentation from an employing or supervising dentist attesting to current clinical proficiency to administer nitrous oxide inhalation analgesia.

AND

2. Hold current and valid certification in basic life support by the American Heart Association for the health care provider, or an equivalent program approved by the board.

AND

3. Apply to the North Dakota State Board of Dental Examiners for a Nitrous Oxide Inhalation Analgesia Permit.

Note: Before authorizing a registered dental assistant to administer nitrous oxide inhalation analgesia, the dentist must have provided and documented training in the proper and safe operation of the nitrous oxide inhalation analgesia equipment.

Allowable

Allowable Functions

Under Indirect Supervision

- Administer nitrous oxide inhalation analgesia to a patient who has not taken sedative medications before treatment

*__Direct Visual Supervision__: The dentist is physically present to issue a verbal command and under direct line of sight.
Indirect Supervision: The 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 dental assistant.

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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

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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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