

Ohio

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



† DANB has not received confirmation that the information in this state's overview has been reviewed and approved by the appropriate state office. The charts in this volume contain summaries reflecting DANB's understanding of the state dental practice act and administrative rules. For authoritative information, please contact this state's dental board (contact information is on the last page of this volume).

State Job Titles

State Career Ladder

There are three recognized levels of dental assistants in Ohio. 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 (EFDA)

2 Certified Assistant

1 Basic Qualified Personnel (BQP)

State Radiography Requirements

State Radiography Requirements

To legally operate dental x-ray equipment and perform dental radiographic procedures in Ohio under the supervision of a dentist, a dental assistant must be state certified as a Dental X-Ray Machine Operator. To obtain this certification, one must:

- I. a. Be a Certified Assistant (See "Certified Assistant" requirements on page 135) **OR**
- b. Complete an Ohio Board-approved training course, including a clinical section*

AND

- II. Apply to the OSDB for certification as a Dental X-Ray Machine Operator

* Applicants may complete the DALE Foundation's DANB RHS Review course and obtain an affidavit of clinical training from a licensed dentist to meet this requirement.

The board may issue a certificate to an applicant if the applicant holds a license or certificate in another state or if the applicant has satisfactory work experience, a government certification, or a private certification as a dental x-ray machine operator in a state that does not issue that license or certificate.

A Dental X-Ray Machine Operator may perform radiologic procedures when the supervising dentist is not physically present at the location where the radiologic procedures are performed if the supervising dentist examined the patient not more than one year prior to the date the Dental X-Ray Machine Operator performs the radiologic procedures and the supervising dentist has ordered the radiologic procedures.

A Dental X-Ray Machine Operator who is also an EFDA may perform radiologic procedures when the supervising dentist is not physically present by authorization of a dentist working under a teledentistry permit, subject to conditions listed on page 137.

Prohibited Duties

Functions NOT Permitted by Dental Assistants in Ohio

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 of any tissue-bearing area upon which a prosthetic restoration is to be placed (not including the taking of impressions for athletic mouthguards or similar appliances)
- 70. Final placement of pre-fabricated or cast restorations or crowns
- Definitive diagnosis and treatment planning
- Final placement of any fixed or removable appliances
- Final removal of any fixed appliance
- Therapeutic intraoral adjustment of any fixed or removable appliance
- Cutting procedures utilized in the preparation of the coronal or root portion of the tooth
- Cutting procedures involving the supportive structures of the tooth
- Placement of the final root canal filling
- Occlusal registration procedures for any prosthetic restoration
- Diagnosis
- Treatment planning and prescription, including prescription for drugs and medicaments or authorization for restorative, prosthetic or orthodontic appliances
- Parenteral injection for the administration of drugs, including local anesthetic agents



1 Basic Qualified Personnel

Requirements

Education, Training and Credential Requirements

Basic Qualified Personnel must be trained directly via an employer/dentist, via a planned sequence of instruction in an educational institution or via in-office training.

Note: All dental health care workers in Ohio must show evidence of immunity to or immunization against the hepatitis B virus, unless a waiver has been granted.

To **monitor nitrous oxide-oxygen minimal sedation**, Basic Qualified Personnel must:

- I. Be at least 18 years of age **AND**
- II. Have completed an accepted basic life-support training course and remain current at all times when monitoring nitrous oxide/oxygen **AND**
- III. Have successfully completed a six-hour course in N₂O-O₂ monitoring (unless exempt due to prior education or existing credential) **AND**
- IV. Have at least two years of active practice and at least 3,000 hours of experience in the practice 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 Direct Supervision*

- 2. Preliminary charting of missing and filled teeth
- 4. Physical positioning of the patient
- 6. Retraction of the gingival tissue prior to the final impression which is performed by the licensed, supervising dentist
- 11. Intraoral instrument transfer
- 13. Suture removal
- 14. Irrigation and drying of canals during endodontic procedures
- 15. Placement and removal of orthodontic arch wires, auxiliary arch wires, and ligation of same to orthodontic bands and/or brackets
- 18. Fluoride application
- 24. Demonstration of oral hygiene procedures, including, but not limited to, use of toothbrushes and dental floss
- 24, 26. All patient education services, including, but not limited to, progress reports, consultations (oral or written), oral hygiene instructions, use of intraoral hygiene devices, normal nutrition information as it relates to dental health, behavioral modification, self adjustment of orthodontic appliances, and all other post-operative and post-insertion instructions, as deemed appropriate by the supervising dentist
- 25. All supportive services necessary to the maintenance of a hygienic practice environment, including, but not limited to, all sterilizing procedures
- 27. Placement of rubber dam over pre-placed clamp, and removal of clamp and rubber dam
- 29. Preliminary selection and sizing of orthodontic bands and arch wires
- 30, 48. Aspiration and retraction
- 35, 62. Application and removal of periodontal dressings
- 37. Measurement of blood pressure and body temperature
- 38. Monitoring of vital signs
- 42. Placement and removal of orthodontic separators and ties
- 43. Preliminary selection and sizing of stainless steel crowns
- 44. Taking impressions for the construction of custom athletic mouth protectors/mouthguards, and trays for application of medicaments
- 44. Elastomeric impressions for diagnostic models and models to be used for opposing models in the construction of appliances and restorations
- 47, 50, 54, 55. Impression, fabrication, cementation and removal of provisional restorations, not to include palliative or sedative restorations
- 49. Pulp testing
- 56. Application of topical anesthetics
- 59. Monitor nitrous oxide-oxygen analgesia (*see requirements above*)
- 63, 69. Placement and removal of surgical dressings
- 67. Assistance during administration of life-support activities
 - Application of disclosing solutions
 - Caries susceptibility testing
 - Shade selection for fabrication of appliances or restorations
 - Application of cavity varnish
 - Taking photographs
 - Placement of medication in the pulp chamber(s) of teeth with non-vital pulp or instrumented root canals
 - Topical applications of desensitizing agents to teeth
 - Intraoral bite registrations for diagnostic model articulation, restorations and appliances
 - Polymerization of light-activated restorative/bonding materials
 - Basic remediable intraoral and extraoral dental tasks and/or procedures (those which do not create irreparable changes within the oral cavity and/or the contiguous structures)
 - Recording patient treatment
 - Checking for and removal of loose orthodontic bands and loose brackets
 - Repair, construction and finishing of metallic and plastic prosthetic devices
 - Compilation of radiographic data for interpretation by the dentist, i.e., tracings, etc.
 - The preparation of materials, drugs and medications for use in dental procedures, including, but not limited to, palliative, impression and restorative materials
 - Any other non-invasive procedures deemed necessary by the supervising dentist to maintain the health and safety of the patient
 - All non-invasive supportive services normally utilized in conjunction with the treatment by the dentist of fascia pain or TMJ syndrome

List of allowable functions for this level continued on next page

***Direct Supervision:** Acts must be performed in a dental facility wherein a licensed dentist is physically present at all times during the performance of such acts and such acts are performed pursuant to his order, control, and full professional responsibility, and are checked and approved by the licensed dentist before the patient upon whom such act has been performed departs from the dental facility of said dentist.

Personal Supervision: A dentist is personally operating on a patient and authorizes an auxiliary to aid treatment by concurrently performing supportive procedures.

Allowable Functions for Basic Qualified Personnel, continued

Allowable

Under Direct Supervision*

- Preparing the teeth for restorations or for the bonding of orthodontic brackets by treating the supragingival coronal surfaces of the teeth to be bonded with a conditioning or etching agent and by the placement of a bonding agent adhesive
- Impressions for removable or fixed orthodontic appliances
- All non-invasive supportive services and procedures necessary to the gathering and maintaining of accurate and complete medical and dental history of the patient
- All supportive services or procedures necessary to protect the physical well-being of the patient during routine treatment procedures and during periods of emergencies

Under Personal Supervision*

- Assist in the concurrent performance of supportive procedures, and with the administration of drugs, medications and inhalation anesthetic agents, including nitrous oxide

2 Certified Assistant

Education, Training and Credential Requirements

The Ohio State Dental Board (OSDB) recognizes the following three dental assisting certifications:

1. DANB CDA certification **OR**
2. Certified Ohio Dental Assistant certification administered by the Ohio Commission on Dental Assistant Certification (CODA) **OR**
3. Registered Dental Assistant (RDA) certification administered by the American Medical Technologists (AMT))

Current holders of any of these certifications are considered **Certified Assistants**.

Current Certified Assistants may qualify to perform placement of pit and fissure sealants and to earn a state certificate in coronal polishing by meeting the following additional requirements:

Coronal Polishing:

- I. Successfully complete an OSDB-approved training program **AND**
- II. a. Successfully pass standardized testing immediately following successful completion of a skills assessment component of an approved training program **OR**
- b. Pass DANB's Coronal Polishing (CP) exam
- AND**
- III. Apply to the OSDB for certification to perform coronal polishing.

Pit and Fissure Sealants:

- I. Successfully complete a course containing a minimum of 2 hours of didactic instruction and 6 hours of clinical instruction **AND**
- II. The supervising dentist must observe the assistant successfully apply at least 6 sealants.

NOTE: Certified Assistants may perform specified functions when the supervising dentist is not physically present (for not more than 15 consecutive business days), subject to the conditions listed on page 137.

***Please note: Holders of the Ohio coronal polishing certificate must maintain DANB CDA certification, certification through CODA, or RDA(AMT) certification.*

Requirements

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*

- 9. Coronal polishing (rubber cup and slow-speed rotary dental hand piece only); assistant must be Ohio Board-certified in polishing (see requirements above)
- 40. Pit and fissure sealants (see requirements above)
- Basic remediable intraoral dental tasks
- All duties designated to Basic Qualified Personnel, under the same levels of required supervision

When the supervising dentist is not physically present at the location where the services are provided, subject to certain conditions (See list of conditions on page 137)

- 18. Application of fluoride varnish
- 40. Application of pit and fissure sealants*
- 47. Recementation of temporary crowns or recementation of crowns with temporary cement
- Application of disclosing solutions
- Application of desensitizing agents, excluding silver diamine fluoride
- Caries susceptibility testing
- Instruction on oral hygiene home care, including the use of toothbrushes and dental floss

**A Certified Assistant who has met the prescribed education and training requirements may apply pit and fissure sealants prior to a dentist examining the patient and rendering a diagnosis if all of the other conditions listed on page 137 have been met.*

Allowable

***Direct Supervision:** Acts must be performed in a dental facility wherein a licensed dentist is physically present at all times during the performance of such acts and such acts are performed pursuant to his order, control, and full professional responsibility, and are checked and approved by the licensed dentist before the patient upon whom such act has been performed departs from the dental facility of said dentist.

Personal Supervision: A dentist is personally operating on a patient and authorizes an auxiliary to aid treatment by concurrently performing supportive procedures.



3 Expanded Function Dental Auxiliary

Education, Training and Credential Requirements

To perform expanded functions under the direct supervision of a licensed dentist in Ohio, a dental assistant must qualify as an Expanded Function Dental Auxiliary (EFDA). To qualify as an EFDA, one must:

- I. a. Be an unlicensed dentist who has graduated from an accredited dental college and does not have a dental license under suspension or revocation by the OSDB **OR**
- b. Be a dental student who is enrolled in an accredited dental college and is in good standing as a dental student **OR**
- c. Be a graduate of an unaccredited dental college located outside the US **OR**
- d. Be a current Certified Assistant (See page 135 for requirements) **OR**
- e. Be a dental hygienist licensed by the OSDB in good standing **OR**
- f. Be a dental hygienist who has graduated from an accredited dental hygiene program and does not have a dental hygiene license under suspension or revocation by the OSDB
- II. Complete an EFDA training course that is accredited by either the Commission on Dental Accreditation (CODA) or the Higher Learning Commission

AND

- III. Pass the EFDA exam administered by the Commission on Dental Testing in Ohio (CODT) or the Commission on Dental Competency Assessments (CDCA)

AND

- IV. Complete a BLS training course certified by the American Red Cross, American Heart Association, or American Safety and Health Institute

AND

- V. Apply to the OSDB for registration

AND

The board may issue a certificate to an applicant if the applicant holds a license or certificate in another state or if the applicant has satisfactory work experience, a government certification, or a private certification as an expanded function dental auxiliary in a state that does not issue that license or certificate.

Note: An EFDA may **perform specified functions when the supervising dentist is not physically present** (for not more than 15 consecutive business days) or by authorization of a dentist working under a teledentistry permit subject to the conditions listed on the next page.

To qualify to perform **placement of interim therapeutic restorations** or **application of silver diamine fluoride**, an EFDA must complete an OSDB-approved course in the function.

Requirements

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. Place amalgam restorative materials
- 18. Application of topical fluoride
- 18. Application of fluoride varnish
- 33. Place nonmetallic restorative materials, including direct-bonded restorative materials
- 40. Application of pit and fissure sealants
- Application of disclosing solutions
- Application of desensitizing agents
- Caries susceptibility testing
- Instruction on oral hygiene home care, including the use of toothbrushes and dental floss
- Any additional procedures authorized by the state dental board
- All duties designated to Certified Assistants[‡] and Basic Qualified Personnel, under the same levels of required supervision.

‡ Note: An EFDA may not perform coronal polishing unless he or she has met the requirements described on page 135 and received a state certificate in coronal polishing from the Ohio State Dental Board.

When the supervising dentist is not physically present at the location where the services are provided, subject to certain conditions (See list of conditions on the next page.)

- 40. Application of pit and fissure sealants (An EFDA may apply pit and fissure sealants prior to a dentist examining the patient and rendering a diagnosis, if all of the conditions listed on the next page have been met.)

When the supervising dentist is not physically present at the location where the services are provided, regardless of whether the dentist has examined the patient (if the dentist meets the conditions of item 7 on the next page)

- 18. Application of topical fluoride
- 18. Application of fluoride varnish
- 47. Recementation of temporary crowns or recementation of crowns with temporary cement
- Application of disclosing solutions
- Caries susceptibility testing
- Application of desensitizing agents, excluding silver diamine fluoride
- Instruction on oral hygiene home care, including the use of toothbrushes and dental floss
- Any additional procedures authorized by the state dental board

By authorization of a dentist working under a teledentistry* permit, when the supervising dentist is not physically present at the location where the services are provided, subject to certain conditions (See list of conditions on the next page.)

- 18. Application of topical fluoride
- 18. Application of fluoride varnish
- 22. Standard diagnostic radiologic procedures (EFDA must also hold the dental x-ray machine operator certificate; see requirements on page 133)
- 40. Application of pit and fissure sealants
- 47. Recementation of temporary crowns or recementation of crowns with temporary cement
- Place interim therapeutic restorations (when the EFDA has completed an OSDB-approved course)

List of allowable functions for this level continued on next page

Allowable

*Direct Supervision: Acts must be performed in a dental facility wherein a licensed dentist is physically present at all times during the performance of such acts and such acts are performed pursuant to his order, control, and full professional responsibility, and are checked and approved by the licensed dentist before the patient upon whom such act has been performed departs from the dental facility of said dentist.

Personal Supervision: A dentist is personally operating on a patient and authorizes an auxiliary to aid treatment by concurrently performing supportive procedures.

Teledentistry: The delivery of dental services through the use of synchronous, real-time communication and the delivery of services of a dental hygienist or expanded function dental auxiliary pursuant to a dentist's authorization.



Allowable

Allowable Functions for Expanded Function Dental Auxiliaries, continued

By authorization of a dentist working under a teledentistry permit, when the supervising dentist is not physically present at the location where the services are provided, subject to certain conditions (See list of conditions below)

- Application of silver diamine fluoride (when the EFDA's supervising dentist has examined the patient and diagnosed the need for such treatment and the EFDA has completed an OSDB-approved course)
• Application of disclosing solutions
• Application of desensitizing agents
• Caries susceptibility testing
• Instruction on oral hygiene home care, including the use of toothbrushes and dental floss
• Any additional procedures authorized by the state dental board

Conditions for Performing Functions When Supervising Dentist is Not Physically Present

Conditions under which a Certified Assistant or an Expanded Function Dental Auxiliary (EFDA), may perform specified functions when the supervising dentist is not physically present, for not more than 15 consecutive business days:

- 1. The Certified Assistant or EFDA has at least 1 year/1,500 hours experience as a dental assistant or EFDA
2. The Certified Assistant or EFDA successfully completes a board-approved course in identification and prevention of potential medical emergencies
3. The supervising dentist has evaluated the skills of the Certified Assistant or EFDA and made a determination that the Certified Assistant or EFDA is competent to treat patients without the dentist being physically present
4. The supervising dentist has established written protocols or written standing orders for the Certified Assistant or EFDA to follow during and in the absence of an emergency
5. The supervising dentist completed and evaluated a medical and dental history of the patient not more than one year prior to the date that the Certified Assistant or EFDA provides services to the patient, and the supervising dentist determines that the patient is in a medically stable condition
6. The patient is notified, in advance of the appointment for services, that the supervising dentist will be absent from the location and that the Certified Assistant or EFDA cannot diagnose the patient's dental health care status
7. The Certified Assistant or EFDA is employed by, or under contract with, the supervising dentist, a government entity that employs the Certified Assistant or EFDA to provide services in a public school or in connection with other programs the government entity administers, or a dentist licensed under this chapter who is one of the following:
(a) The employer of the supervising dentist
(b) A shareholder in a professional association formed under Chapter 1785. of the Revised Code of which the supervising dentist is a shareholder
(c) A member or manager of a limited liability company formed under Chapter 1705. of the Revised Code of which the supervising dentist is a member or manager
(d) A shareholder in a corporation formed under division (B) of section 1701.03 of the Revised Code of which the supervising dentist is a shareholder
(e) A partner or employee of a partnership or a limited liability partnership formed under Chapter 1775. or 1776. of the Revised Code of which the supervising dentist is a partner or employee

Conditions under which a Certified Assistant or an Expanded Function Dental Auxiliary (EFDA), may perform application of pit and fissure sealants prior to the dentist examining the patient and rendering a diagnosis:

- 8. All of the conditions listed above, with the exception of item 5
9. The Certified Assistant or EFDA is providing the service as part of a program operated through any of the following: a school district board of education or the governing board of an educational service center; the board of health of a city or general health district or the authority having the duties of a board of health; a national, state, district, or local dental association; or any other public or private entity recognized by the state dental board
10. The supervising dentist for the program is employed by or a volunteer for, and the patients are referred by, the entity through which the program is operated and is available for consultation by telephone, videoconferencing, or other means of electronic communication
11. The application of sealants is limited to erupted permanent posterior teeth without suspicion of dentinal cavitation
12. For minor patients, a parent or other person responsible for the patient is notified that a dentist will not be present and that the dental assistant is not trained to diagnose or treat other serious dental concerns that could exist

Conditions under which an Expanded Function Dental Auxiliary (EFDA), may perform specified functions when the supervising dentist is not physically present, by authorization of a dentist working under a teledentistry permit:

- 13. Conditions described in items 1-4 and 7 above
14. The authorizing dentist must prepare a written authorization that includes all of the information required by law
15. Before any dental services are provided all of the following must occur:
(a) The patient is notified that an authorizing dentist will perform a clinical evaluation through teledentistry
(b) The patient is given an explanation of alternatives to, and the capabilities and limitations of, teledentistry
16. The patient consents to the provision of services through teledentistry and the consent is documented in the patient's record
17. If the services to be provided are the placement of interim therapeutic restorations or the application of silver diamine fluoride, the requirements for informed consent in rules adopted by the OSDB have been met
18. The authorizing dentist establishes the patient's identity and physical location through synchronous, real-time communication
19. The authorizing dentist provides dental services through teledentistry only as is appropriate for the patient and in accordance with appropriate standards of care
20. The authorizing dentist establishes a diagnosis and treatment plan and documents it in the patient's record
21. The authorizing dentist specifies the services the expanded function dental auxiliary is authorized to provide to the patient

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.

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