



State Career Ladder

There are two recognized levels of dental assistants in Washington. 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.



2 Expanded Function Dental Auxiliary (EFDA)

1 Registered Dental Assistant (RDA)

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.

Dental Anesthesia Assistant See page 183

State Radiography Requirements

All dental assistants (registered dental assistants or EFDAs) operating x-ray equipment in the state of Washington shall be adequately instructed in safe operating procedures and shall be able to demonstrate competency, upon request from the Washington State Dental Quality Assurance Commission, in the correct use of the equipment.

The following are areas in which the department considers it important that an individual have expertise for the competent operation of x-ray equipment:

- (1) Familiarization with equipment
 - (a) Identification of controls
 - (b) Function of each control
 - (c) The use of a technique chart
- (2) Radiation protection
 - (a) Collimation
 - (b) Filtration
 - (c) Gonad shielding and other patient protection devices
 - (d) Restriction of X-ray tube radiation to the image receptor
 - (e) Personnel protection
 - (f) Grids
- (3) Film processing
 - (a) Film speed as relates to patient exposure
 - (b) Film processing parameters
 - (c) Quality assurance and quality control

A registered dental assistant requires close supervision and an EFDA requires general supervision by a licensed dentist to perform dental radiography procedures.



Functions NOT Permitted by Dental Assistants in Washington

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 procedures

70. Cement or recement any permanent restoration or stainless steel crown

- Removal of or addition to the hard or soft natural tissue of the oral cavity (except for placing and carving direct restorations by an EFDA)
- Diagnosis of or prescription for treatment of disease, pain, deformity, deficiency, injury, or physical condition of the human teeth or jaws, or adjacent structure
- Administration of general or local anesthetic, including intravenous sedation
- Oral prophylaxis [except coronal polishing as part of oral prophylaxis as defined in WAC 246-817- 510 and 246-817-520(4)(e)]
- Intraorally adjust and finish permanent restorations
- Incise gingiva or other soft tissue
- Elevate soft tissue flap
- Luxate teeth
- Curette to sever epithelial attachment
- Suture
- Establish occlusal vertical dimension for dentures
- Try-in of dentures set in wax
- Insertion and post-insertion adjustments of dentures
- Endodontic treatment (open, extirpate pulp, ream and file canals, establish length of tooth, fill root canal)
- Use of any light or electronic device for invasive procedures
- Intraoral air abrasion or mechanical etching devices
- Place direct pulp caps.
- Fit and adjust occlusal guards

In addition to the functions listed above, the following functions are not permitted by a registered dental assistant:

12, 33. Placing of permanent or semi-permanent restorations in natural teeth

46. Taking of any impressions of the teeth or jaws for the purpose of fabricating any intraoral restoration, appliances, or prosthesis, other than impressions allowed as a delegated task for registered dental assistants pursuant to rules adopted by DQAC (see Allowable Functions on the next page)



1 Registered Dental Assistant (RDA)

Requirements

Education, Training and Credential Requirements

Every dental assistant in the state of Washington must be registered. To be eligible for registration as a dental assistant, one must:

- I. Be at least 18 years of age
AND
II. Provide a completed application on forms provided by the Washington State Dental Quality Assurance Commission (DQAC)
AND
III. Pay applicable fees
AND
IV. Provide any other information determined by the DQAC

The dental assistant registration must be renewed annually on or before the dental assistant's birthday.

A registered dental assistant must hold a current and valid health care provider basic life support (BLS) certification. An RDA must complete one hour of current infection prevention standards education annually provided by a qualified individual or organization.

A registered dental assistant in the state of Washington may earn an endorsement in sealant/fluoride varnish solely for the purpose of treating children in school-based and school-linked programs. To earn the endorsement, a dental assistant must provide proof of 200 hours of employment by a WA licensed dentist, which included theoretical and clinical training in sealants and fluoride varnish, and provide proof of completion of a training program meeting WA state requirements, and submit an application and fee.

A volunteer dental assistant is an individual who, without compensation, provides supportive services in a charitable dental clinic. For information about requirements visit www.doh.wa.gov.

Note: Dental assistants who monitor patients receiving deep sedation or general anesthesia must receive a minimum of fourteen hours of documented training in a course specifically designed to include instruction and practical experience in the use of equipment.

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 Supervision

- Administer screening tests for novel coronavirus disease 2019 (provided the RDA has demonstrated skills necessary to perform the task competently)

Under General Supervision*, with endorsement in sealant/fluoride varnish

- 40. Apply sealant/fluoride varnish solely for the purpose of treating children in school-based and school-linked programs

Under Close Supervision*

- 1. Oral inspection, with no diagnosis
6. Place retraction cord
9. Perform coronal polish (a licensed dentist shall determine the teeth are free of calculus or other extraneous material prior to dismissing the patient)
13, 62. Remove periodontal packs or sutures
15. Remove and replace archwires and orthodontic wires
18. Give fluoride treatments
22. Place, expose, and process radiographs
24. Give patient education in oral hygiene
25. Sterilize equipment and disinfect operatories
26. Give preoperative and postoperative instructions
27. Place and remove the rubber dam
29. Select and fit orthodontic bands, try in fixed or removable orthodontic appliances prior to the dentist cementing or checking the appliance
34. Place cavity liners and bases
35. Place periodontal packs
37. Take and record blood pressure and vital signs
40. Apply sealants
42. Place and remove orthodontic separators
44. Take impressions, bite registrations, or digital scans of the teeth and jaws for: (i) Diagnostic and opposing models; (ii) Fixed and removable orthodontic appliances, occlusal guards, bleaching trays, and fluoride trays; and (iii) Temporary indirect restorations such as temporary crowns
45. Place a matrix and wedge for a direct restorative material after the dentist has prepared the cavity
47, 54. Fabricate, cement, and remove temporary crowns or temporary bridges
50. Place a temporary filling (as zinc oxide-eugenol (ZOE)) after diagnosis and examination by the dentist
54, 61. Remove the excess cement after the dentist has placed a permanent or temporary inlay, crown, bridge or appliance, or around orthodontic bands
56. Place topical anesthetics
59. Assist in the administration of inhalation minimal sedation (nitrous oxide) analgesia or sedation, including starting and stopping the flow as directed by the supervising dentist
63. Pack and medicate extraction areas
64. Fabricate and deliver bleaching and fluoride trays.

Allowable functions for this level continued on next page

*Close Supervision: A supervising dentist whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. The supervising dentist is continuously on-site and physically present in the treatment facility while the procedures are performed by the assistive personnel and capable of responding immediately in the event of an emergency. Close supervision does not require a dentist to be physically present in the operator.

General Supervision: A supervising dentist has examined and diagnosed the patient and provided subsequent instructions to be performed by the assistive personnel, but does not require the dentist to be physically present in the treatment facility.



Allowable Functions (for Registered Dental Assistant), continued

Allowable

Under Close Supervision*

- Hold in place and remove impression materials after the dentist has placed them
- Apply tooth separators as for placement for Class III gold foil
- Deliver an oral sedative drug to patient
- Polish restorations but may not intraorally adjust or finish permanent restorations
- Select denture shade and mold
- Perform acid etch and apply bonding agents
- Take intraoral and extraoral photographs
- Take health histories
- Prepare teeth for the bonding of orthodontic appliances
- Fit and adjust headgear
- Remove fixed orthodontic appliances, orthodontic cement, and orthodontic bonded resin materials
- Take a facebow transfer for mounting study casts
- Bond attachments for clear removable orthodontic aligners
- Take digital scans of prepared teeth for fabrication of permanent indirect restorations
- Monitor patients receiving deep sedation or general anesthesia (see requirements above)

Note: An unlicensed person may select the shade for crowns or fixed prostheses with the use of a technique which does not contact the oral cavity (outside treatment facility, pursuant to written instructions and order of a licensed dentist)

2 Expanded Function Dental Auxiliary (EFDA)

Education, Training and Credential Requirements

To become an **Expanded Function Dental Auxiliary (EFDA)** in Washington, a dental assistant must:

Requirements

- I. Be at least 18 years of age
AND
- II. a. Graduate from a CODA-accredited dental assisting program **OR**
b. Be DANB CDA certified through CDA/GC Pathway II; in addition to DANB's requirements, the candidate must take an additional dental assisting review course
AND
- III. Complete an EFDA course approved by the Dental Quality Assurance Commission (DQAC)
AND
- IV. Pass the Washington State Restorative Exam (WARE) administered by DANB
AND
- V. Pass the clinical exam approved by the DQAC
AND
- VI. Provide any other information determined by DQAC
AND
- VII. Apply to DQAC for an EFDA license.

To be eligible for a **license as an EFDA without examination**, one must:

- I. Be at least 18 years of age
AND
- II. a. Hold a current license in another state with substantially equivalent licensing standards as determined by DQAC **OR**
b. Hold a Washington full dental hygiene license and complete a course in taking final impressions affiliated with or provided by a CODA accredited dental assisting program, dental hygiene school or dental school,
AND
- III. Provide any other information determined by the state,
AND
- IV. Apply to DQAC for an EFDA license

An EFDA must hold a current and valid health care provider basic life support (BLS) certification. An EFDA must complete one hour of current infection prevention standards education annually provided by a qualified individual or organization.

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.

Allowable Requirements

Under Supervision

- Administer screening tests for novel coronavirus disease 2019 (*provided the EFDA has demonstrated skills necessary to perform the task competently*)

Under General Supervision*

- 9. Perform coronal polishing
- 18. Give fluoride treatments
- 22. Place, expose, and process radiographs
- 40. Apply sealants
- Give patient oral health instructions

Under Close Supervision*

- 12, 33, 51. Place, carve, finish, and polish direct restorations
- 44, 46. Take preliminary and final impressions and bite registrations, to include computer assisted design and computer assisted manufacture applications
- All other functions allowed to be performed by RDAs

***Close Supervision:** A supervising dentist whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. The supervising dentist is continuously on-site and physically present in the treatment facility while the procedures are performed by the assistive personnel and capable of responding immediately in the event of an emergency. Close supervision does not require a dentist to be physically present in the operator.

General Supervision: A supervising dentist has examined and diagnosed the patient and provided subsequent instructions to be performed by the assistive personnel, but does not require the dentist to be physically present in the treatment facility.



Dental Anesthesia Assistant

Education, Training and Credential Requirements

Each applicant for certification as a dental anesthesia assistant must submit to the Washington State Dental Quality Assurance Commission (DQAC):

- I. Be at least 18 years of age
AND
- II. An application, on a form provided by the department
AND
- III. An application fee
AND
- IV. Evidence of completion of one of the following:
 - a. The "Dental Anesthesia Assistant National Certification Examination (DAANCE)" or predecessor program, provided by the American Association of Oral and Maxillofacial Surgeons (AAOMS) **OR**
 - b. The "Oral and Maxillofacial Surgery Assistants Course" course provided by the California Association of Oral and Maxillofacial Surgeons (CALAOMS) **OR**
 - c. Substantially equivalent education and training approved by DQAC
AND
- V.
 - a. Evidence of completion of training in intravenous access or phlebotomy that includes 8 hours of didactic training and hands on experience starting and maintaining intravenous lines with at least ten successful intravenous starts on a human or simulator/ manikin **OR**
 - b. Evidence of completion of substantially equivalent education and training approved by DQAC
AND
- VI. A current and valid certification for health care provider basic life support (BLS), advanced cardiac life support (ACLS), or pediatric advanced life support (PALS)
AND
- VII. A valid Washington state general anesthesia permit of the oral and maxillofacial surgeon or dental anesthesiologist where the dental anesthesia assistant will be performing his or her services
AND
- VIII. Any other information determined by DQAC

A Dental Anesthesia Assistant must complete one hour of current infection prevention standards education annually provided by a qualified individual or organization, as well as two hours of health equity training every three years.

Note: A certified dental anesthesia assistant shall notify DQAC in writing on a form provided by DQAC of any changes in his or her supervisor. DQAC must be notified of the change prior to the certified dental anesthesia assistant accepting delegation from another supervisor.

Allowable Functions

Under Close Supervision*

- Initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation, or general anesthesia
- Adjust the rate of intravenous fluids infusion only to maintain or keep the line patent or open

Under Direct Visual Supervision*

- Draw up and prepare medications
- Follow instructions to deliver medications into an intravenous line upon verbal command
- Adjust the rate of intravenous fluids infusion beyond a keep open rate
- Adjust an electronic device to provide medications, such as an infusion pump
- Administer emergency medications to a patient in order to assist the oral and maxillofacial surgeon or dental anesthesiologist in an emergency

Functions NOT Permitted by Dental Anesthesia Assistants in Washington

A certified dental anesthesia assistant may not practice or represent himself or herself as a registered dental assistant without being registered by the Washington Dental Quality Assurance Commission (DQAC) as having met the standards for registration. See requirements for registration as a dental assistant on page 181.

*A dental anesthesia assistant may only accept delegation from an oral and maxillofacial surgeon or dental anesthesiologist who holds a valid Washington state general anesthesia permit.

Close Supervision: A supervising dentist whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. The supervising dentist is continuously on-site and physically present in the treatment facility while the procedures are performed by the assistive personnel and capable of responding immediately in the event of an emergency. Close supervision does not require a dentist to be physically present in the operator.

Direct Visual Supervision: Supervision by an oral and maxillofacial surgeon or dental anesthesiologist by verbal command and under direct line of sight.