

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



Measuring Dental Assisting Excellence®

## How To Use The Following Charts

**Chart 1**

View which job designations are used in your state.

Be sure to follow the legal requirements to perform dental radiographic procedures.

See which tasks are not permitted by state law.

View the education/training/credential required for each level of dental assisting.

Compare your state's job designations to those used as standardized job titles in the DANB/ADAA Core Competency Study.

**Chart 2**

Review all the allowable tasks for each level of dental assisting as published in the state practice act.

The numbers next to each task correspond to the 70 numbered tasks that were identified and used in the DANB/ADAA Core Competency Study. Tasks that are not numbered do not directly match one of the 70 tasks, yet are identified by the state in the practice act. A full list of those tasks follow your state's chart.

If your state's dental practice act specifically defines levels of supervision, the state-specific definition is noted in the template.

# Dental Assisting Functions List

*The following is a list of 70 dental assisting tasks developed by the ADA/DANB Alliance in the course of its research. These selected tasks were determined to be representative of a broad range of dental assisting core competencies.*

Functions in each state that correspond to the national Core Competencies Study functions are **numbered** in the Career Ladder Template, using language directly from the state's dental practice act. Functions listed with **bullets** in the *Career Ladder Template* are part of the state's practice act but are not specific matches to DANB research.

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 archwires
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 set-ups
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



## 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 four levels of supervision for dental auxiliaries, including dental assistants, which it defines in its “Comprehensive Policy Statement on Allied Dental Personnel,” (2006: 307) which is part of its *Current Policies*, last updated in 2007. Note that “allied dental personnel” refers to dental assistants, dental hygienists and dental laboratory technicians.

The four levels of supervision defined by the ADA are as follows:

**Personal supervision:** A 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 dentist is 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 allied dental personnel and, before dismissal of the patient, evaluates the performance of the allied dental personnel.

**Indirect supervision:** A 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 allied dental personnel, and will evaluate the performance of the allied dental personnel.

**General supervision:** A dentist is not required to be in the dental office or treatment facility when procedures are being performed by the allied dental personnel, but has personally diagnosed the condition to be treated, has personally authorized the procedures and will evaluate the performance of the allied dental personnel.

Furthermore, the ADA’s Comprehensive Policy Statement on Allied Dental Personnel stipulates that intraoral expanded functions should be performed by allied dental personnel “only under the direct 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 does not make 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 this volume, if a state’s dental practice act specifically defines levels of supervision, the state-specific definition is noted in the template.**



Dental Assisting National Board, Inc. (DANB)

444 N. Michigan Ave., Suite 900  
Chicago, IL 60611  
1-800-367-3262 or 312-642-3368  
Fax: 312-642-1475  
www.danb.org • danbmail@danb.org

Education/Training/ Credential Required	Job Title According to State of MN	Proposed Standardized National Job Titles (see below)	Radiography Requirements	Functions <u>NOT</u> Permitted by Dental Assistants in MN
<p><b>2010 Licensed Dental Assistant</b> Minnesota Statutes eliminate the Registered Dental Assistant (RDA) category, and create a category for <b>Licensed Dental Assistants (LDAs)</b>.</p> <p>To earn status as a <b>Licensed Dental Assistant</b> in the state of Minnesota, dental assistants must:</p> <ul style="list-style-type: none"> <li>■ Pass the national DANB Certified Dental Assistant (CDA) exam</li> <li>■ <b>AND</b> Graduate from a MN CODA-accredited dental assisting program <b>OR</b> Graduate from a CODA-accredited program in a state other than MN <b>and</b>, upon MN Board review of curriculum, complete additional coursework <b>OR</b> Graduate from a non-CODA-accredited dental assisting program or complete office training <b>and</b> complete a MN Board approved course in Expanded Functions in Minnesota</li> <li>■ <b>AND</b> Pass the MN Licensure exam (formerly known as the MN Registration exam)</li> <li>■ <b>AND</b> Pass the MN Jurisprudence Exam</li> <li>■ <b>AND</b> Apply for registration to the MN Board of Dentistry</li> </ul> <p><b>Note:</b> A dental assistant who received and maintained registration in MN prior to January 1, 2010, can continue to practice as a <i>licensed dental assistant</i> without completing any further requirements. The licensed dental assistant must submit the fee for an original license to the MN board at the time of renewal.</p> <p><b>Note:</b> All regulated dental assistants must be current in Cardiopulmonary Resuscitation (CPR) at the Health Care Provider level.</p>	<p>Licensed Dental Assistant (LDA)</p>	<p>Expanded Functions Dental Assistant (EFDA)</p> <hr/> <p>DANB Certified Dental Assistant (CDA) or Registered Dental Assistant (RDA)</p>	<p>To legally operate dental x-ray equipment and perform dental radiographic procedures in the state of Minnesota, a dental assistant <b>must</b> be a <b>Licensed Dental Assistant</b> (see requirements to the left).</p>	<p>According to the Minnesota Board of Dentistry, "The State of Minnesota only recognizes permissive (allowable) expanded functions and not non-permissive (prohibited) expanded functions."</p>
<p>A <b>dental assistant</b> in the state of Minnesota may perform basic supportive dental procedures specified by the state dental practice act (see opposite page) under the supervision of a licensed dentist.</p> <p>The dentist is responsible for ensuring that the assistant:</p> <ul style="list-style-type: none"> <li>■ Completes and maintains current CPR certification</li> <li>■ Complies with the most current infection control guidelines as specified in the Morbidity and Mortality Weekly Report (MMWR).</li> </ul>	<p>Dental Assistant</p>	<p>Dental Assistant</p> <hr/> <p>Entry Level Dental Assistant</p>	<p>The ADAA/DANB Alliance developed a listing of standardized job titles (left) based on its national Core Competencies Study conducted from 2002-2005.</p> <p>The same study utilized a list of 70 job functions which were determined to be representative of a broad range of dental assisting core competencies.</p> <p>Functions in this state that relate to the national DANB/ADAA Core Competencies Study are numbered to the right, using language directly from this state's dental practice act. (The numbers correspond to the study's task numbering system.)</p> <p>Functions listed with bullets are part of this state's practice act but are not specific matches to DANB/ADAA research.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>These state templates reflect the work being done by the ADAA/DANB Alliance to support a uniform national model for one set of dental assisting tasks, levels and requirements, which will serve as a viable career ladder for dental assistants.</p> </div>	

Job Title According to State of MN	Allowable Functions (Functions with numbers relate specifically to Core Competency designations; functions with bullets are in this state's practice act but are not specific matches to DANB research)
--	---

Licensed  
Dental  
Assistant  
(LDA)

**Under Direct Supervision\***

- |  |   |   |
|--|---|---|
| <ul style="list-style-type: none"> <li>45. Place and remove matrix bands</li> <li>47. Fabricate, cement and adjust temporary restorations extraorally or intraorally</li> <li>54. Remove temporary restorations with hand instruments only                             <ul style="list-style-type: none"> <li>• Remove excess bond material from orthodontic appliances</li> <li>• Etch appropriate enamel surfaces before bonding of orthodontic appliances by dentist</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Attach prefit and preadjusted orthodontic appliances</li> <li>• Remove fixed orthodontic bands and brackets</li> <li>• Remove bond material from teeth with rotary instruments after removal of orthodontic appliances††</li> <li>• Administer nitrous oxide inhalation analgesia (only after a maximum dosage has been prescribed by a dentist for a specific patient)††</li> </ul> | <ul style="list-style-type: none"> <li>• Initiate and place intravenous infusion line in preparation for intravenous medications and sedation†</li> </ul> |
|--|---|---|

**Under Indirect Supervision\***

- |  |   |   |
|--|---|---|
| <ul style="list-style-type: none"> <li>9. Perform mechanical polishing to clinical crowns not including instrumentation. Removal of calculus by instrumentation must be done by a dentist or dental hygienist before mechanical polishing.</li> <li>12, 33, 70. Perform restorative procedures limited to placing, contouring, and adjusting amalgam restorations, glass ionomers, and supragingival composite restorations (class I and V); and adapting and cementing stainless steel crowns††</li> <li>13. Remove sutures</li> <li>14. Dry root canals with paper points</li> <li>15. Remove and place ligature ties and arch wires on orthodontic appliances; a dentist must select and, if necessary, adjust arch wires prior to</li> </ul> | <ul style="list-style-type: none"> <li>placement</li> <li>18. Apply topical medications such as, but not limited to, topical fluoride, bleaching agents, and cavity varnishes; in appropriate dosages or quantities as prescribed by a dentist</li> <li>27. Place and remove rubber dam</li> <li>29. Preselect orthodontic bands</li> <li>35, 62. Place and remove periodontal dressings</li> <li>40, 49. Etch appropriate enamel surfaces, apply and adjust pit and fissure sealants††</li> <li>42. Place and remove elastic orthodontic separators</li> <li>59. Monitor a patient who has been induced by a dentist into nitrous oxide inhalation analgesia</li> <li>61. Remove excess cement from</li> </ul> | <ul style="list-style-type: none"> <li>inlays, crowns, bridges, and orthodontic appliances with hand instruments only</li> <li>• Place cotton pellets and temporary restorative materials into endodontic access openings</li> <li>• Maintain and remove intravenous lines†</li> <li>• Monitor a patient during preoperative, intraoperative and postoperative phases of general anesthesia or moderate sedation using noninvasive instrumentation such as pulse oximeters, electrocardiograms, blood pressure monitors and capnography†</li> </ul> |
|--|---|---|

**Under General Supervision\***

- |  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li>22. Take radiographs</li> <li>50. Place temporary fillings, not including temporization of inlays, onlays, crowns, and bridges                             <ul style="list-style-type: none"> <li>• Cut arch wires on orthodontic appliances</li> <li>• Remove loose bands on orthodontic appliances</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Remove loose brackets on orthodontic appliances</li> <li>• Recement intact temporary restorations</li> <li>• Take impressions for casts and appropriate bite registration, not to include impressions and bite registrations for final construction of</li> </ul> | <ul style="list-style-type: none"> <li>fixed and removable prostheses</li> <li>• Deliver vacuum-formed orthodontic retainers.</li> <li>• Place and remove elastic orthodontic separators</li> </ul> |
|--|--|---|

**Under Personal Supervision\***

- |  |   |   |
|--|---|---|
| <ul style="list-style-type: none"> <li>48. Retract a patient's cheek, tongue or other parts of tissue during a dental operation</li> <li>48. Remove such debris as is normally created or accumulated during the course of treatment being rendered by a licensed dentist during or after operative procedures by the dentist by the use of vacuum devices, compressed air, mouthwash and water</li> </ul> | <ul style="list-style-type: none"> <li>48. Provide any assistance, including the placement of articles and topical medication in a patient's oral cavity, in response to a specific direction to do so by a licensed dentist who is then and there actually engaged in performing a dental operation as defined in the act and who is then actually in a position to give personal supervision to the rendition of this assistance</li> </ul> | <ul style="list-style-type: none"> <li>• Aid dental hygienists and registered dental assistants in the performance of their duties</li> <li>• Assist with the placement or removal of a rubber dam and accessories used for its placement and retention, as directed by an operating dentist during the course of a dental operation</li> <li>• Perform all those duties not directly related with performing dental treatment or services on patients</li> </ul> |
|--|---|---|

Dental  
Assistant

\*General Supervision: The dentist has authorized the procedures and the dental assistant performs the procedures in accordance with the dentist's diagnosis and treatment plan in providing palliative treatment.  
 Indirect Supervision: The dentist is in the office, authorizes the procedures, and remains in the office while the procedures are being performed.  
 Direct Supervision: The dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and evaluates the performance of the auxiliary before dismissing patient.  
 Personal Supervision: The dentist is personally operating on a patient and authorizes the auxiliary to aid in treatment by concurrently performing supportive procedures.  
 † Requires board-approved course directly related to this function.  
 †† This function requires an additional CODA-accredited course directly related to this function.