

ARTICLE XVII

DENTAL ASSISTANT FUNCTIONS

A. ALL FUNCTIONS DELEGATED TO A DENTAL ASSISTANT MUST BE PERFORMED UNDER **PERSONAL SUPERVISION**, PERSONAL SUPERVISION MEANS:

1. The Dentist is in the office or treatment facility.
2. The Dentist has personally diagnosed the condition
To be treated;
3. The Dentist has personally authorized the procedures.
4. The Dentist remains in the office or treatment facility while
The procedures are being performed; and
5. The Dentist evaluates the performance of the Dental Assistant
before the dismissal of the patient.

The licensed, supervising Dentist is responsible for determining the appropriateness of delegation of any specific function based upon knowledge of the skills of the assistant, the needs of the patient, the requirements of the task and whether proof of competence is required.

The Dentist is ultimately responsible for patient care. Nothing contained in the authority given the Dentist by this rule to delegate the performance of certain procedure shall in any way relieve the supervising Dentist from the liability to the patient for negligent performance by a Dental Assistant.

B: DEFINITIONS:

1. Dental Assistant: A staff member of a duly-licensed Dentist who is involved in direct patient care to include a Certified Dental Assistant or a Registered Dental Assistant.
2. Registered Dental Assistant: A Dental Assistant who has obtained a permit(s) from the Board to perform any or all of the following expanded duties:
 - a) Administration of nitrous oxide/oxygen analgesia
 - b) Operation of dental radiographic equipment
 - c) Coronal polishing
3. Certified Dental Assistant: A Dental Assistant who is currently certified by the Dental Assisting National Board.

C. TASKS AUTHORIZED TO BE PERFORMED BY DENTAL ASSISTANTS

With the exceptions listed below, a Dental Assistant may perform any dental task or procedure assigned to the assistant by the supervising Dentist that does not require the professional skills of a

licensed Dentist or licensed dental hygienist, but only under the personal supervision of a licensed Dentist on the premises. These duties may only be delegated when the effect of the procedure assigned is reversible.

D: PROHIBITED ACTIVITIES

The responsibility for diagnosis, treatment planning, or the prescription of medications in the practice of Dentistry shall remain with a licensed Dentist and may not be assigned or delegated to a Dental Assistant. No dental procedure that will contribute to or result in an irreversible alteration of the oral anatomy may be performed by anyone other than a licensed Dentist. The following activities are prohibited for dental assistants:

1. Diagnosis and treatment planning.
2. **Scaling**, Root, Planing and curettage.
3. Surgical or cutting procedures on hard or soft tissue.
4. Prescription, injection, inhalation, and parenteral administration of drugs (except when the Dental Assistant obtains a permit to do the same from the Board)
5. Placement, seating or removal of any final or permanent restorations.
6. **Final placement of orthodontic brackets**
7. Any procedure that contributes to or results in irreversible alteration of the oral anatomy.
8. Performance of any of the following expanded duties without a permit:
 - a) Administration of nitrous oxide/oxygen analgesia
 - b) Operation of dental radiographic equipment
 - c) Coronal polishing
9. Those functions relegated to a dental hygienist and stated in Regulation XI A.2a and b(1)(2)(3)(4)(5)

E. REGISTERED DENTAL ASSISTANT EXPANDED FUNCTION PERMITS

It is the responsibility of the Dental Assistant to provide the Arkansas State Board of Dental Examiners with proof of competence in the desired expanded function prior to receiving a permit from the Board.

1. A Dental Assistant may induce and monitor nitrous oxide/oxygen analgesia After successful completion of a course approved by the Board and the

Payment of a designated fee. At this time a permit will be issued.

2. A Dental Assistant may operate dental radiographic equipment after successful completion of an educational course as approved by the Board and submits proof of competency by passing an examination and the payment of a designated fee. At this time, a permit will be issued.
3. A Dental Assistant may perform coronal polishing after successful completion of educational requirements as approved by the Board and submits proof of competency by passing such examination as the Board requires, and the payment of a designated fee. At this time, a permit will be issued.
4. A Certified Dental Assistant, or an assistant who is a graduate of a school which is accredited or provisionally accredited by the Council on Dental Accreditation of the American Dental Association, need only submit proof of graduation or certification to the Board along with the designated fee and a permit will be issued for any expanded duty requested.

After receipt of one or more of the expanded function permits, the Dental Assistant will then be considered a Registered Dental Assistant with the Board. Those permits must be on display within the dental office or treatment facility.

F: PROCESS FOR OBTAINING PERMIT FOR ADMINISTRATION OF NITROUS OXIDE

A Dental Assistant desiring to obtain an expanded duty permit for nitrous oxide/oxygen analgesia from the Board must do the following:

1. Successfully complete a nitrous oxide administration and monitoring course As approved by the Board.
2. Submit a copy of the certificate of completion to the Board along with any designated fee.

G. PROCESS FOR OBTAINING PERMIT FOR RADIOGRAPHY AND/OR CORONAL POLISHING:

A Dental Assistant desiring to obtain an expanded duty permit for radiography and/or coronal polishing from the Board must do the following:

1. Request the educational packet from the Board for the desired permit and pay the Appropriate fee.
2. Successfully complete the examination or clinical checklist administered by the supervising Dentist as provided by the Board, and return the required materials to the Board.

H Said Permits must be renewed yearly on Forms as provided by the Board pursuant to Ark. Code Ann 17-82-405.