#### **Proposed Infection Control Regulations Changes**

#### § 1070.6. Approval of Infection Control <u>Stand-alone</u> Courses.

In addition to the requirements of Sections 1070 and 1070.1 of these regulations, the following criteria shall be met by a course in infection control, as required in Sections 1750, 1750.2, 1750.4, and 1752.1 of the Business and Professions Code, to secure and maintain approval by the Board:

In addition to the requirements of Cal. Code of Regs., Title 16, Sections 1070 and 1070.1, the following criteria shall be met by a course offering certification in infection control to secure and maintain approval by the Board.

(a) The course shall be taught at the postsecondary educational level or deemed equivalent thereto by the Board. A course in infection control primary purpose providing theory and clinical application in infection control practices and principles where the protection of the public is its primary focus.

(1) An infection control course provider applying for approval shall submit to the Board a completed "Application for Approval of Course in Infection Control (New INSERT DATE)", which is hereby incorporated by reference, accompanied by a non-refundable processing fee of \$\_\_\_\_\_.

(2) The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own as it relates to any evaluation or re-evaluation required by this article.

(3) Approval may be granted after evaluation of all components of the course have been performed and the report of such evaluation indicates that the course meets the Board's requirements.

(4) The Board may withdraw its approval of a course at any time, after giving the course provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond within 30 calendar days. Approval may be withdrawn for failure to comply with the provisions of the Dental Practice Act or the Board's regulations.

(b) Course Faculty. Course faculty shall be authorized to provide instruction by the program or course director at the facility in which instruction is provided. The faculty shall be adequate in number, qualifications and composition and shall be suitably qualified through academic preparation, professional expertise, and/or appropriate training, as provided herein. Each faculty member shall possess the following qualifications:

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(1) Possess a valid, active, and license as a Registered Dental Assistant (RDA), Registered Dental Assistant in Extended Functions (RDAEF), Registered Dental Hygienist (RDH), Registered Dental Hygienist in Extended Functions (RDHEF), Registered Dental Hygienist in Alternative Practice (RDHAP), or dentist issued by the Board or the Dental Hygiene Committee of California (Dental Hygiene Committee).

(2) All faculty shall have been licensed for a minimum of two (2) years. All faculty shall have the education, background, and occupational experience and/or teaching expertise necessary to perform, teach, and evaluate (a) Adequate provisions for the supervision and operation of the course in infection control shall be made in compliance with Section 1070. Notwithstanding Section 1070, faculty shall not be required to be licensed by the Board, but faculty shall have experience in the instruction of California Division of Occupational Safety and Health (Cal/OSHA) regulations (Cal. Code Regs., Title 8, Sections 330-344.85) and the Board's Minimum Standards for Infection Control (Cal. Code Regs., Title 16, Section 1005).

(3) In addition to the requirements of Cal. Code of Regs., Title 16, Section 1070, prior to instruction, all faculty responsible for clinical evaluation shall have completed a two-hour (2-hour) methodology certification course in clinical evaluation which shall include curriculum specific to their teaching responsibilities.

(c) Course Director. The course director, who may also be an instructor, shall possess a valid, active, and current license issued by the Board or the Dental Hygiene Committee, shall have been licensed for a minimum of two (2) years, and possess the experience in the subject matter he or she is teaching. The course director shall provide guidance and be responsible for the administration of the course. Specifically, the course director shall be responsible for fulfilling all the requirements listed in Cal. Code of Regs., Title 16, Section 1070(b).

(bd) Length of Course. A course in infection control shall be of sufficient duration for the student to develop minimum competency in all aspects of Cal/OSHA regulations (Cal. Code Regs., Title 8, Sections 330-344.85) and the Board's Minimum Standards for Infection Control (Cal. Code Regs., Title 16, Section 1005), but in no event less than eight (8) hours, including at least four five (5) hours of didactic instruction, and at least two three (3) hours of laboratory or preclinical instruction, and at least two hours of clinical instruction. Preclinical instruction shall utilize instruments, surfaces, and situations where contamination is simulated, without actual contamination, from bloodborne and other pathogens being present.

(<u>ee) Equipment and Armamentaria.</u> The minimum requirements for equipment and armamentaria shall include personal protective equipment, sterilizer approved by the

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United States Food and Drug Administration (FDA), ultrasonic unit or instrument processing device, sharps container, selection of instruments, equipment, and armamentaria that are necessary to instruct or demonstrate proper hazardous waste disposal, consistent with Cal/OSHA regulations (Cal. Code Regs., Title 8, Sections 330-344.85), local, state, and federal mandates, and all other armamentaria required to instruct or properly demonstrate the subjects described in the course content.

(d) Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (e) and (f).

(f) Facilities. Facilities and operatories shall be in compliance with the requirements of Cal. Code of Regs., Title 16, Section 1070 (e)(1)(A)(B) and (e)(2). Facilities shall be in compliance with the Board's Minimum Standards for Infection Control (Cal. Code of Regs., Title 16, Section 1005).

(g) Course Content. As part of an organized course of instruction, sufficient time shall be available for all students to obtain laboratory experience to achieve minimum competence in the various protocols used in the application of infection control. Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (h) through (i).

(1) A detailed course outline shall be provided to the Board which clearly states curriculum subject matter and specific instructional hours in the individual areas of didactic and laboratory instruction.

(2) General course objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the course shall provide the content necessary for students to make judgments regarding the application of infection control. The course shall assure that students who successfully complete the course can perform infection control with minimum competence.

(3) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written and/or practical examinations.

(eh) Didactic Instruction. Didactic instruction shall include, at a minimum, the following as they relate to Cal/OSHA regulations (Cal. Code Regs., Title 8, Sections 330-344.85) and the Board's Minimum Standards for Infection Control (Cal. Code Regs., Title 16, Section 1005):

(1) Basic dental science and microbiology as they relate to infection control in dentistry

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(2) Legal and ethical aspects of infection control procedures

(3) Terms and protocols specified in Cal. Code of Regs., Title 16, Section 1005 regarding the minimum standards for infection control

(4) Principles of modes of disease transmission and prevention

(5) Principles, techniques, and protocols of hand hygiene, personal protective equipment, surface barriers and disinfection, sterilization, sanitation, and hazardous chemicals associated with infection control

(6) Principles and protocols of sterilizer monitoring and the proper loading, unloading, storage, and transportation of instruments to work area

(7) Principles and protocols associated with sharps management

(8) Principles and protocols of infection control for laboratory areas

(9) Principles and protocols of waterline maintenance

(10) Principles and protocols of regulated and nonregulated waste management

(11) Principles and protocols related to injury and illness prevention, hazard communication, general office safety, exposure control, postexposure requirements, and monitoring systems for radiation safety and sterilization systems.

(fi) Preclinical instruction shall include three experiences in the following areas, with one used for a practical examination. Laboratory Instruction. Sufficient time shall be available for all students to complete at least three (3) laboratory experiences to achieve minimum competence in infection control with one used as a final practical examination.

(1) Skills required to be evaluated for competency shall include:

(<u>4A</u>) Apply hand cleansing products and perform hand cleansing techniques and protocols.

(2B) Apply, remove, and dispose of patient treatment gloves, utility gloves, overgloves, protective eyewear, masks, and clinical attire.

(3C) Apply the appropriate techniques and protocols for the preparation, sterilization, and storage of instruments including, at a minimum, application of personal protective equipment, <u>the use of utility gloves for</u> precleaning, ultrasonic cleaning, rinsing, sterilization wrapping, internal or

#### **Proposed Infection Control Regulations Changes**

external process indicators, labeling, sterilization, drying, storage, and delivery to work area.

(4<u>D</u>) Preclean and disinfect contaminated operatory surfaces and devices, and properly use, place, and remove surface barriers.

(5) Maintain sterilizer including, at a minimum, proper instrument loading and unloading, operation cycle, spore testing, and handling and disposal of sterilization chemicals.

(6) Apply work practice controls as they relate to the following classification of sharps: anesthetic needles or syringes, orthodontic wires, and broken glass.

(7G) Apply infection control protocol for the following laboratory devices: impressions, bite registrations, and prosthetic appliances.

(8<u>H</u>) Perform waterline maintenance, including use of water tests and purging of waterlines.

(g) Clinical instruction shall include two experiences in the following areas, with one used for a clinical examination:

(1) Apply hand cleansing products and perform hand cleansing techniques and protocols.

(2) Apply, remove, and dispose of patient treatment gloves, utility gloves, overgloves, protective eyewear, masks, and clinical attire.

(3) Apply the appropriate techniques and protocols for the preparation, sterilization, and storage of instruments including, at a minimum, application of personal protective equipment, precleaning, ultrasonic cleaning, rinsing, sterilization wrapping, internal or external process indicators, labeling, sterilization, drying, storage, and delivery to work area.

(4) Preclean and disinfect contaminated operatory surfaces and devices, and properly use, place, and remove surface barriers.

(5) Maintain sterilizer including, at a minimum, proper instrument loading and unloading, operation cycle, spore testing, and handling and disposal of sterilization chemicals.

(6) Apply work practice controls as they relate to the following classification of sharps: anesthetic needles or syringes, orthodontic wires, and broken glass.

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(7) Apply infection control protocol for the following laboratory devices: impressions, bite registrations, and prosthetic appliances.

(8) Perform waterline maintenance, including use of water tests and purging of waterlines.

(hj) Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.

(ik) <u>Notice of Compliance</u>. To maintain approval, course providers approved prior to the effective date of these regulations, shall submit to the Board a completed "Notice of Compliance with New Requirements for Infection Control Courses (New-9/10 INSERT DATE)", hereby incorporated by reference, within 90 days of the effective date of these regulations.

(I) Certificate of Completion. In addition to the requirements of Cal. Code of Regs., Title 16, Section 1070 subdivision (k), two (2) original copies of a certificate of completion shall be issued to each student within 30 days following their completion of the course. Certificates of completion shall contain an embossed seal impression that is not photographically reproducible. Providers shall retain records of course completion for seven (7) years from the date of completion and provide records of completion to the Board within 30 days, upon written request.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1750, 1750.2, 1750.4 and 1752.1, Business and Professions Code.

#### HISTORY

1. New section filed 10-12-2011; operative 11-11-2011 (Register 2011, No. 41).

**Proposed Orthodontic Assistant Permit Course Regulation Changes** 

#### § 1070.7. Approval of Orthodontic Assistant Permit Courses.

In addition to the requirements of <u>Cal. Code of Regs., Title 16</u>, Sections 1070 and 1070.1, the following criteria shall be met by an <u>course offering a permit in</u> orthodontic assistanting to secure and maintain approval by the <u>Bb</u>oard.

(a) The course shall be taught at the postsecondary educational level or deemed equivalent thereto by the Board. An orthodontic assistant permit course is one that has as its primary purpose providing theory, laboratory and clinical application in orthodontic assisting techniques.

(1) An orthodontic assistant permit course provider applying for approval shall submit to the Board a completed "Application for Approval of Course in Orthodontic Assisting" (New INSERT DATE)", which is hereby incorporated by reference, accompanied by a non-refundable processing fee of \$\_\_\_\_\_.

(2) The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own as it relates to any evaluation or re-evaluation required by this article.

(3) Approval may be granted after evaluation of all components of the course have been performed and the report of such evaluation indicates that the course meets the Board's requirements.

(4) The Board may withdraw its approval of a course at any time, after giving the course provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond within 30 calendar days. Approval may be withdrawn for failure to comply with the provisions of the Dental Practice Act or the Board's regulations.

(ab) Length of Course. The course shall be of sufficient duration for the student to develop minimum competence in all of the duties that orthodontic assistant permit holders are authorized to perform, but in no event less than 84 hours, including at least 24 hours of didactic instruction, at least 28 hours of laboratory instruction, and at least 32 hours of clinical instruction. A registered dental assistant shall not be required to complete further instruction in the duties of placing ligature ties and archwires, removing orthodontic bands, and removing excess cement from tooth surfaces with a hand instrument. The course hours for a student who holds a valid and current registered dental assistant license shall be no less than 55 hours, including 11 didactic hours, 24 laboratory hours, and 20 clinical hours. A registered dental assistant who has completed a Board-approved course in the use of an ultrasonic scaler shall not be required to complete further instruction in that duty. The course hours for a student who holds a valid and current registered dental assistant license and who has completed a Board-approved course in the use of an ultrasonic scaler shall not be required to avalid and current registered dental assistant license and who has completed a Board-approved course in the use of an ultrasonic scaler shall not be required to complete further instruction in that duty. The course hours for a student who holds a valid and current registered dental assistant license and who has completed a Board-approved course in the use of an ultrasonic scaler shall be no less than 51 hours, including <u>nine (9)</u> didactic hours, 22 laboratory hours, and 20 clinical hours.

**Proposed Orthodontic Assistant Permit Course Regulation Changes** 

(bc) Equipment and Armamentaria. The minimum requirements for equipment and armamentaria shall include banded or bonded orthodontic typodonts in the ratio of at least one (1) for every four (4) students, bench mount or dental chair mounted mannequin head, curing light, regular typodont with full dentition and soft gingiva in the ratio of at least one (1) for every four (4) students, and a selection of orthodontic instruments and adjunct material for all of the procedures that orthodontic assistant permitholders are authorized to perform under Business and Professions Code Section 1750.3.

(ed) Course Faculty. In addition to the requirements of Section 1070, all faculty or instructional staff members responsible for clinical evaluation shall have completed a two-hour methodology course in clinical evaluation prior to conducting clinical evaluations of students. Course faculty shall be authorized to provide instruction by the program or course director at the facility in which instruction is provided. The faculty shall be adequate in number, qualifications and composition and shall be suitably qualified through academic preparation, professional expertise, and/or appropriate training, as provided herein. Each faculty member shall possess the following qualifications:

(1) Possess a valid, active, and license as a Registered Dental Assistant (RDA), Registered Dental Assistant in Extended Functions (RDAEF), Registered Dental Hygienist (RDH), Registered Dental Hygienist in Extended Functions (RDHEF), Registered Dental Hygienist in Alternative Practice (RDHAP), or dentist issued by the Board or the Dental Hygiene Committee of California (Dental Hygiene Committee);

(2) All faculty shall have been licensed for a minimum of two (2) years. All faculty shall have the education, background, and occupational experience and/or teaching expertise necessary to perform, teach, and evaluate orthodontic assisting procedures.

(3) In addition to the requirements of Cal. Code of Regs., Title 16, Section 1070, all faculty responsible for clinical evaluation shall have completed a two-hour (2-hour) methodology course in clinical evaluation prior to conducting clinical evaluations of students.

(e) Course Director. The course director, who may also be an instructor, shall possess a valid, active, and current license issued by the Board or the Dental Hygiene Committee, shall have been licensed for a minimum of two (2) years, and possess the experience in the subject matter he or she is teaching. The course director shall provide guidance and be responsible for the administration of the course. Specifically, the course director shall be responsible for fulfilling all the requirements listed in Cal. Code of Regs., Title 16, Section 1070(b).

(df) Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (g) to (l), inclusive, as well as, instruction in basic background information

#### Proposed Orthodontic Assistant Permit Course Regulation Changes

on orthodontic practice. "Basic background information on orthodontic practice" means, for purposes of this subdivision, the orthodontic treatment review, charting, patient education, and legal and infection control requirements as they apply to orthodontic practice.

(eg) The following requirements shall be met for sizing, fitting, cementing, and removing orthodontic bands:

(1) Didactic instruction shall contain the following:

(A) Theory of band positioning and tooth movement.

(B) Characteristics of band material: malleability, stiffness, ductility, and work

(C) Techniques for orthodontic banding and removal, which shall include all of the following:

(i) Armamentaria.

(ii) General principles of fitting and removing bands.

(iii) Normal placement requirements of brackets, tubes, lingual sheaths, lingual cleats, and buttons onto bands.

(iv) Orthodontic cements and adhesive materials: classifications, armamentaria, and mixing technique.

(v) Cementing bands: armamentaria, mixing technique, and band cementation procedures.

(vi) Procedure for removal of bands after cementation.

(2) Laboratory instruction shall include typodont experience in the sizing, fitting, cementing, and removal of four (4) posterior first molar bands a minimum of two (2) times, with the cementing and removal of two (2) first molar bands used as a practical examination.

(3) Clinical instruction shall include the sizing, fitting, cementing, and removal of four (4) posterior first molar bands on at least two (4) patients.

(fh) The following requirements shall be met for preparing teeth for bonding:

(1) Didactic instruction shall contain the following:

(A) Chemistry of etching materials and tooth surface preparation

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(B) Application and time factors

(C) Armamentaria

(D) Techniques for tooth etching.

(2) Laboratory instruction shall include typodont experience with etchant application in preparation for subsequent bracket bonding on four (<u>4</u>) anterior and four (<u>4</u>) posterior teeth a minimum of four (<u>4</u>) times each, with one (<u>1</u>) of each of the four (<u>4</u>) times used for a practical examination.

(3) Clinical instruction shall include etchant application in preparation for bracket bonding on anterior and posterior teeth on at least two ( $\underline{2}$ ) patients.

(gi) The following requirements shall be met for bracket positioning, bond curing, and removal of orthodontic brackets.

(1) Didactic instruction shall include the following elements:

(A) Characteristics and methods of orthodontic bonding.

(B) Armamentaria.

(C) Types of bracket bonding surfaces.

(D) Bonding material characteristics, application techniques, and curing time factors.

(E) Procedure for direct and indirect bracket bonding.

(F) Procedures for bracket or tube removal.

(2) Laboratory instruction shall contain typodont experience with selecting, prepositioning, tooth etching, positioning, curing and removing of four (<u>4</u>) anterior and four (<u>4</u>) posterior brackets a minimum of four (<u>4</u>) times each, with one (<u>1</u>) each of the four (<u>4</u>) times used for a practical examination.

(3) Clinical instruction shall contain selecting, adjusting, prepositioning, etching, curing and removal of anterior and posterior brackets on at least two (2) patients.

(hj) The following requirements shall be met for archwire placement and ligation:

(1) Didactic instruction shall contain the following:

(A) Archwire characteristics.

Proposed Orthodontic Assistant Permit Course Regulation Changes

(B) Armamentaria.

(C) Procedures for placement of archwire previously adjusted by the dentist.

(D) Ligature systems, purpose and types, including elastic, wire, and self-ligating.

(2) Laboratory instruction shall contain typodont experience on the following:

(A) The insertion of a preformed maxillary and mandibular archwire a minimum of four  $(\underline{4})$  times per arch, with one  $(\underline{1})$  of each of the four  $(\underline{4})$  times used for a practical examination.

(B) Ligation of maxillary and mandibular archwire using elastic or metal ligatures or self-ligating brackets a minimum of four (<u>4</u>) times per arch, with one (<u>1</u>) of each of the four (<u>4</u>) times used for a practical examination.

(3) Clinical instruction shall contain the following:

(A) Insertion of a preformed maxillary and mandibular archwire on at least two (2) patients.

(B) Ligating both preformed maxillary and mandibular archwires using a combination of elastic and metal ligatures or self-ligating brackets on at least two (2) patients for each.

 $(i\underline{k})$  The following requirements shall be met for cement and bonding agent removal with a hand instrument:

(1) Didactic instruction shall contain the following:

(A) Armamentaria

(B) Techniques of cement and bonding agent removal using hand instruments and related materials

(2) Laboratory instruction shall contain typodont experience on the removal of excess cement supragingivally from an orthodontically banded typodont using a hand instrument four (4) times, with one (1) of the four (4) times used for a practical examination.

(3) Clinical instruction shall contain removal of excess cement supragingivally from orthodontic bands with a hand instrument on at least two (2) patients.

#### **Proposed Orthodontic Assistant Permit Course Regulation Changes**

 $(\underline{j})$  Instruction for cement removal with an ultrasonic scaler shall be in accordance with Cal. Code Regs., Title 16, Section 1070.5, which governs courses in the removal of excess cement from teeth under orthodontic treatment with an ultrasonic scaler.

(km) <u>Examination</u>. Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.

(In) <u>Notice of Compliance.</u> To maintain approval, programs approved prior to the effective date of these regulations shall submit to the Board a completed "Notice of Compliance with New Requirements for Orthodontic Assistant Permit Courses (New <u>9/10-INSERT DATE</u>)", hereby incorporated by reference, within ninety (90) days of the effective date of these regulations.

(o) Facilities. Facilities and operatories shall be in compliance with the requirements of Cal. Code of Regs., Title 16, Section 1070 (e)(1)(A)(B) and (e)(2). Facilities shall be in compliance with the Board's Minimum Standards for Infection Control (Cal. Code of Regs., Title 16, Section 1005).

(p) Course Content. As part of an organized course of instruction, sufficient time shall be available for all students to obtain laboratory, and clinical experience to achieve minimum competence in the various protocols used in orthodontic assisting. Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (g) through (I).

(1) A detailed course outline shall be provided to the Board which clearly states curriculum subject matter and specific instructional hours in the individual areas of didactic, laboratory, and clinical instruction.

(2) General course objectives and specific instructional unit objectives shall be stated in writing, and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the course shall provide the content necessary for students to make judgments regarding orthodontic assisting. The course shall assure that students who successfully complete the course can perform orthodontic assisting with minimum competence.

(3) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and the evaluation criteria that will be used for all aspects of the curriculum including written, practical and clinical examinations.

(q) Prerequisites. Each student must possess the necessary requirements for application for RDA licensure or currently possess an RDA license. Each student must satisfactorily demonstrate to the instructor clinical competency in infection control requirements prior to clinical instruction in orthodontic assisting.

**Proposed Orthodontic Assistant Permit Course Regulation Changes** 

(r) Certificate of Completion. In addition to the requirements of Cal. Code of Regs., Title 16, Section 1070 subdivision (e), two (2) original copies of a certificate of completion shall be issued to each student within 30 days following their completion of the course. Certificates of completion shall contain an embossed seal impression that is not photographically reproducible and shall specify that only orthodontic assistant permit holders may perform authorized procedures for orthodontic assistants pursuant to Business and Professions Code, Section 1750.3. Providers shall retain records of course completion for seven (7) years from the date of completion and provide records of completion to the Board within 30 days, upon written request.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1750.2 and 1752.4, Business and Professions Code.

#### HISTORY

1. New section filed 10-12-2011; operative 11-11-2011 (Register 2011, No. 41).

### **Proposed RDAEF Program Regulation Changes**

#### Section 1071. Approval of <u>Registered Dental Assistant in Extended Functions</u> (RDAEF) Educational Programs.

In addition to the requirements of Cal. Code Regs., Title 16, Sections 1070 and 1070.1, the following criteria shall be met by an RDAEF educational program to secure and maintain approval by the Board.

(a) All new Registered Dental Assistant in Extended Functions (RDAEF) educational programs in California shall apply for and receive Board approval prior to operation. The Board may approve, provisionally approve, or deny approval of any such program. The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accreditation agency approved by the Board and adopt those findings as its own.

(b) In addition to the requirements of Cal. Code Regs., Title 16, Sections 1070 and 1070.1, the following criteria shall be met by an RDAEF educational program to secure and maintain approval by the Board.

(1) A program applying for approval to teach all of the duties specified in Business and Professions Code, Section 1753.5 shall comply with all of the requirements of this Section.

(2) A program applying for approval to teach RDAEFs licensed on or before January 1, 2010 the additional duties specified in Business and Professions Code Section 1753.6 shall comply with all of the requirements of this Section, except as follows:

(A) The program shall be no less than 318 hours, including at least 76 hours of didactic instruction, at least 186 hours of laboratory instruction, and at least 56 hours of clinical instruction.

(B) Students shall not be required to complete instruction related to the placement of gingival retraction cord, the taking of final impressions for permanent indirect restorations, or the fitting of endodontic master points and accessory points.

(3) A RDAEF program provider applying for approval shall submit to the Board a completed "Application for Approval of Registered Dental Assistant Program (New INSERT DATE)", which is hereby incorporated by reference, accompanied by a non-refundable processing fee of \$\_\_\_\_\_.

(4) The Board may, in lieu of conducting its own investigation, accept the findings of any commission or accrediting agency approved by the Board and adopt those findings as its own as it relates to any evaluation or re-evaluation required by this

### **Proposed RDAEF Program Regulation Changes**

article. Acceptance of any accrediting agencies' findings is at the discretion of the Board and does not prohibit the Board from exercising its right to site-evaluate a program.

(5) If the program is granted the status of "Approved with Reporting Requirements" from accrediting agency, the program shall submit to the Board copies of any and all correspondence received from or submitted to the accrediting agency until such time as the status of "Approval without Reporting Requirements" is granted. Additionally, if the program's accrediting status changes in any way with the accrediting agency, the program shall notify the Board, in writing, of such status within 30 days.

(6) Approval may be granted after evaluation of all components of the program have been performed and the report of such evaluation indicates that the program meets the Board's requirements.

(7) The Board may withdraw its approval of a program at any time, after giving the program provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond within 30 calendar days. Approval may be withdrawn for failure to comply with the provisions of the Dental Practice Act or the Board's regulations.

(eb) Prerequisites. In order to be admitted to the program, each student shall possess a valid, active, and current license as a registered dental assistant issued by the Board and shall submit documentary evidence of successful completion of a Board-approved pit and fissure sealant course prior to graduation from an RDAEF program.

(dc) Program Faculty. In addition to the requirements of <u>Cal. Code Regs., Title 16</u>, Sections 1070 and 1070.1, all faculty members responsible for clinical evaluation shall have completed a course or certification program in educational methodology of at least six (6) hours by January 1, 2012, unless he or she holds any one (1) of the following: an <u>associate's postgraduate</u> degree in education, a Ryan Designated Subjects Vocational Education Teaching Credential, a Standard Designated Subjects Teaching Credential, or, a Community College Teaching Credential. Each faculty member employed after January 1, 2012, shall complete a course or certification program in educational methodology within six (6) months of employment. The program director or designated administrator shall be responsible to obtain and maintain records of each faculty member showing evidence of having met this requirement.

(d) Program Director. The program director, who may also be an instructor, shall possess a valid, active, and current license issued by the Board or the Dental Hygiene Committee of California, shall have been licensed for a minimum of two (2) years, and possess the experience in the subject matter he or she is teaching. The course director shall provide guidance and be responsible for the administration of the course.

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Specifically, the course director shall be responsible for fulfilling all the requirements listed in Cal. Code Regs., Title 16, Section 1070(b).

(e) Length of Program. The program shall be of sufficient duration for the student to develop minimum competence in all of the duties that RDAEFs are authorized to perform, but in no event less than 410 hours, including at least 100 hours of didactic instruction, at least 206 hours of laboratory instruction, and at least 104 hours of clinical instruction. All laboratory and simulated clinical instruction shall be provided under the direct supervision of program staff. Clinical instruction shall be provided under the direct supervision of a licensed dentist and may be completed in an extramural dental facility as defined in <u>Cal. Code Regs., Title 16</u>, Section 1070.1(c).

(f) The following requirements are in addition to the requirements of <u>Cal. Code Regs.</u>, <u>Title 16</u>, Sections 1070 and 1070.1:

(1) Minimum requirements for equipment and armamentaria:

(A) Laboratory facilities with individual seating stations for each student and equipped with air/water, hand piece connections, suction gas and air, or electric driven rotary instrumentation capability. Each station or operatory shall allow an articulated typodont to be mounted in a simulated head position.

• Justification: Technical update

(B) Clinical simulation facilities that provide simulated patient heads mounted in appropriate position and accommodating an articulated typodont in an enclosed intraoral environment, or mounted on a dental chair in a dental operatory. Clinical simulation spaces shall be sufficient to permit one (1) simulation space for each two (2) students at any one (1) time.

(C) Articulated typodonts of both deciduous and permanent dentitions with flexible gingival tissues and with prepared teeth for each procedure to be performed in the laboratory and clinical simulation settings. One (1) of each type of typodont is required for each student.

(D) A selection of restorative instruments and adjunct materials for all procedures that RDAEFs are authorized to perform.

 $(2\underline{E})$  Notwithstanding Section 1070, there shall be at least one  $(\underline{1})$  operatory for every two  $(\underline{2})$  students who are simultaneously engaged in clinical instruction.

### **Proposed RDAEF Program Regulation Changes**

(g) Areas of instruction shall include, at a minimum, the instruction specified in subdivisions (h) to (o), inclusive, and the following didactic instruction:

(1) The following instruction as it relates to each of the procedures that RDAEFs are authorized to perform: restorative and prosthetic treatment review; charting; patient education; legal requirements; indications and contraindications; problem solving techniques; laboratory, preclinical, and clinical criteria and evaluation; and infection control protocol implementation.

(2) Dental science, including dental and oral anatomy, histology, oral pathology, normal or abnormal anatomical and physiological tooth descriptions, tooth morphology, basic microbiology relating to infection control, and occlusion. "Occlusion" is the review of articulation of maxillary and mandibular arches in maximum intercuspation.

(3) Characteristics and manipulation of dental materials related to each procedure.

(4) Armamentaria for all procedures.

(5) Principles, techniques, criteria, and evaluation for performing each procedure, including implementation of infection control protocols.

(6) Tooth isolation and matrix methodology review.

(h) General laboratory instruction shall include:

(1) Rubber dam application for tooth isolation in both maxillary and mandibular arches and for deciduous and permanent dentitions. A minimum of four (4) experiences per arch is required, with two (2) anterior and two (2) posterior applications, with one (1) of the applications used for a practical examination.

(2) Matrix placement for amalgam, and nonmetallic restorative material restorations in both primary and permanent dentitions, with three (3) experiences for each cavity classification and for each material.

(3) Base, liner, and etchant placement on three posterior teeth for each base, liner, or etchant, with one (1) of the three (3) teeth used for a practical examination.

(i) With respect to preliminary evaluation of the patient's oral health, including charting of existing conditions excluding periodontal assessment <u>as it relates to RDAEF functions</u>, intraoral and extraoral evaluation of soft tissue, classifying occlusion, and myofunctional evaluation:

### **Proposed RDAEF Program Regulation Changes**

(1) Didactic instruction shall contain the following:

(A) Normal anatomical structures: oral cavity proper, vestibule, and lips.

(B) Deviations from normal to hard tissue abnormalities to soft tissue abnormalities.

(C) Overview of classifications of occlusion and myofunction.

(D) Sequence of oral inspection: armamentaria, general patient assessment, review of medical history form, review of dental history form, oral cavity mouth-mirror inspection, and charting existing conditions.

(2) Preclinical instruction shall include performing an oral inspection on at least two (2) other students.

(3) Clinical instruction shall include performing an oral inspection on at least two (2) patients, with one (1) of the two (2) patients used for a clinical examination.

(j) With respect to sizing, fitting, and cementing endodontic master points and accessory points:

(1) Didactic instruction shall include the following:

(A) Review of objectives, canal preparation, filling of root canal space, including the role of the RDAEF as preparatory to condensation which is to be performed by the licensed dentist.

(B) Description and goals of filling technique using lateral condensation techniques.

(C) Principles and techniques of fitting and cementing master points and accessory points using lateral condensation, including characteristics, manipulation, use of gutta percha and related materials, and criteria for an acceptable master and accessory points technique using lateral condensation.

(2) Laboratory instruction shall include fitting and cementing master points and accessory points on extracted teeth or simulated teeth with canals in preparation for lateral condensation by the dentist, with a minimum of two experiences each on a posterior and anterior tooth. This instruction shall not include obturator-based techniques or other techniques that employ condensation.

(3) Simulated clinical instruction shall include fitting and cementing master points and accessory points in preparation for condensation by the dentist with

### **Proposed RDAEF Program Regulation Changes**

extracted or simulated teeth prepared for lateral condensation mounted in simulated patient heads mounted in appropriate position and accommodating and articulated typodont in an enclosed intraoral environment, or mounted on a dental chair in a dental operatory. This instruction shall not include obturator-based techniques that employ condensation. Simulated clinical instruction shall include fitting and cementing master points and accessory points for lateral condensation by the dentist in at least four (4) teeth, one of which shall be used for a practical exam.

(k) With respect to gingival retraction, general instruction shall include:

(1) Review of characteristics of tissue management as it relates to gingival retraction with cord and electrosurgery.

(2) Description and goals of cord retraction tissue management.

(3) Principles of cord retraction tissue management, including characteristics and manipulation of epinephrine, chemical salts classification of cord, characteristics of single versus double cord technique, and techniques and criteria for an acceptable cord retraction tissue management technique.

(I) With respect to final impressions for permanent indirect and toothborne restorations:

(1) Didactic instruction shall contain the following:

(A) Review of characteristics of impression material and custom.

(B) Description and goals of impression taking for permanent indirect restorations and toothborne prosthesis.

(C) Principles, techniques, criteria, and evaluation of impression taking for permanent indirect restorations and toothborne prosthesis.

(D) At least 10 percent of the experiences shall use amalgam.

(2) Laboratory instruction shall include the following:

(A) Cord retraction <u>Tissue management for prosthodontic procedures</u> and final impressions for permanent indirect restorations, including impression taking of prepared teeth in maxillary and mandibular arches, one (1) time per arch with elastomeric impression materials.

• Justification: Technical update

(B) Impressions for toothborne removable prostheses, including, at a minimum, taking a total of four (4) impressions on maxillary and

### **Proposed RDAEF Program Regulation Changes**

mandibular arches with simulated <u>partially</u> edentulous sites. and rest
preparations on at least two supporting teeth in each arch.
Justification: Editorial change

(3) Clinical instruction shall include taking final impressions on five (5) cord retraction patients, with one (1) used for a clinical examination.

(m) With respect to placing, contouring, finishing, and adjusting direct restorations:

(1) Didactic instruction shall contain the following:

(A) Review of cavity preparation factors and restorative material.

- (B) Review of cavity liner, sedative, and insulating bases.
- (C) Characteristics and manipulation of direct filling materials.

(D) Amalgam restoration placement, carving, adjusting and finishing, which includes principles, techniques, criteria and evaluation, and description and goals of amalgam placement, adjusting and finishing in children and adults.

(E) Glass-ionomer restoration placement, carving, adjusting, contouring and finishing, which includes, principles, techniques, criteria and evaluation, and description and goals of glass-ionomer placement and contouring in children and adults.

• Carving is not done for this procedure

(F) Composite restoration placement, carving, adjusting, contouring and finishing in all cavity classifications, which includes, principles, techniques, criteria, and evaluation.

• Carving is not done for this procedure

(2) Laboratory instruction shall include typodont experience on the following:

(A) Placement of Class I, II, and V amalgam restorations in eight (8) prepared permanent teeth for each classification, and in four (4) deciduous teeth for each classification.

(B) Placement of Class I, II, III, and V composite resin restorations in eight (8) prepared permanent teeth for each classification, and in four (4) deciduous teeth for each classification.

### **Proposed RDAEF Program Regulation Changes**

(C) Placement of Class I, II, III, and V glass-ionomer restorations in four  $(\underline{4})$  prepared permanent teeth for each classification, and in four  $(\underline{4})$  deciduous teeth for each classification.

(3) Simulated clinical instruction shall include experience with typodonts mounted in simulated heads on a dental chair or in a simulation laboratory as follows:

(A) Placement of Class I, II, and V amalgam restorations in four (4) prepared permanent teeth for each classification, with one (1) of each classification used for a clinical examination.

(B) Placement of Class I, II, III, and V composite resin restorations four (4) prepared permanent teeth for each classification, with one (1) of each classification used for a clinical examination.

(C) Placement of Class I, II, III, and V glass-ionomer restorations in four  $(\underline{4})$  prepared permanent teeth for each classification, with one  $(\underline{1})$  of each classification used for a clinical examination.

(4) Clinical instruction shall require proficient completion of placing, contouring and finishing at least twenty (20) direct restorations in prepared permanent teeth. At least five (5) of each restorative classification of I, II, III and V are required.

(A) At least fifty (50) percent of the experiences shall be Class II restorations using esthetic materials.

(B) At least twenty (20) percent of the experiences shall be Class V restorations using esthetic materials.

(C) At least ten (10) percent of the experiences shall use amalgam.

- Outdated procedure
- This should be something taught in Didactic instruction.

(**DC**) Students who complete the 20 restorations and meet all the instructional requirements of this Section may complete additional Class I, II, III or V restorations as deemed appropriate for program success.

(n) With respect to polishing and contouring existing amalgam restorations:

(1) Didactic instruction shall include principles, techniques, criteria and evaluation, and description and goals of amalgam polishing and contouring in children and adults.

(2) Laboratory instruction shall include typodont experience on polishing and contouring of Class I, II, and V amalgam restorations in three (3) prepared

### **Proposed RDAEF Program Regulation Changes**

permanent teeth for each classification, and in two (2) deciduous teeth for each classification.

(3) Simulated clinical instruction shall include experience with typodonts mounted in simulated heads on a dental chair or in a simulation laboratory in the polishing and contouring of Class I, II, and V amalgam restorations in two (2) prepared permanent teeth for each classification, with one (1) of each classification used for a clinical examination.

(o) With respect to adjusting and cementing permanent indirect restorations:

(1) Didactic instruction shall contain the following:

(A) Review of fixed prosthodontics related to classification and materials for permanent indirect restorations, general crown preparation for permanent indirect restorations, and laboratory fabrication of permanent indirect restorations.

(B) Interocclusal registrations for fixed prosthesis, including principles, techniques, criteria, and evaluation.

(C) Permanent indirect restoration placement, adjustment, and cementation, including principles, techniques, criteria, and evaluation.

(2) Laboratory instruction shall include:

(A) Interocclusal registrations. using elastomeric and resin materials. Two (2) experiences with each material are required.

• Correction on specific materials no longer used.

(B) Fitting, adjustment, and cementation of permanent indirect restorations on a minimum of two (2) posterior crowns. on one anterior and one posterior tooth for each of the following materials, with one of each type used for a practical examination: ceramic, ceramometal, and cast metallic.

Not current practice

(3) Clinical experience for interocclusal registrations shall be performed on four (<u>4</u>) patients who are concurrently having final impressions recorded for permanent indirect restorations, with one (<u>1</u>) experience used for a clinical examination.

(4<u>A</u>) Clinical instruction shall include fitting, adjustment, and cementation of permanent indirect restorations on at least two (2) teeth.

### **Proposed RDAEF Program Regulation Changes**

(p) <u>Examination</u>. Each student shall pass a written examination that reflects the curriculum content, which may be administered at intervals throughout the course as determined by the course director.

(q) <u>Notice of Compliance.</u> To maintain approval, programs approved prior to the effective date of these regulations shall submit to the Board a completed "Notice of Compliance with New Requirements for Registered Dental Assistant in Extended Functions Educational Programs (New <u>9/10\_INSERT DATE</u>)", hereby incorporated by reference, within 90 days of the effective date of these regulations.

(r) Facilities and Resources. Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties that registered dental assistants in extended functions are authorized to perform. The following requirements are in addition to those contained in Cal. Code of Regs., Title 16, Sections 1070 and 1070.1:

(1) Facilities and operatories shall be in compliance with the requirements of Cal. Code of Regs., Title 16, Section 1070 (e)(1)(A)(B) and (e)(2). Facilities shall be in compliance with the Board's Minimum Standards for Infection Control (Cal. Code of Regs., Title 16, Section 1005).

(2) Provision shall be made for reasonable access to current and diverse dental and medical reference texts, current journals, audiovisual materials, and other necessary resources. Library holdings, which may include, in total or in part, access through the Internet, shall include materials relating to all subject areas of the program curriculum.

(s) Certificate of Completion. In addition to the requirements of Cal. Code of Regs., Title 16, Section 1070 subdivision (e), two (2) original copies of a certificate, diploma, or other evidence of completion shall be issued to each student who successfully completes the program within 30 days following the students' completion of the program.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1753, Business and Professions Code.

#### HISTORY

1. Renumbering and amendment of former Section 1071 to Section 1071.1 and new Section 1071 filed 1-23-86; effective thirtieth day thereafter (Register 86, No. 4). 2. Amendment of subsection (c) and new subsection (d) filed 2-22-88; operative 3-23-88 (Register 88, No. 10). 2. Repealer and new section and Note filed 10-12-2011; operative 11-11-2011 (Register 2011, No. 41).

**Proposed General Provision Definition Changes** 

#### Section 1067. Definitions.

As used in this subchapter:

(a) "Dental auxiliary" means a person who may perform dental supportive procedures authorized by the provisions of these regulations under the specified supervision of a licensed dentist.

(b) "Dental assistant" means an unlicensed person who may perform basic supportive dental procedures specified by these regulations under the supervision of a licensed dentist.

(c) "Registered <u>dD</u>ental <u>aA</u>ssistant" or "RDA" means a licensed person who may perform all procedures authorized by the provisions of these regulations and in addition may perform all functions which may be performed by a dental assistant under the designated supervision of a licensed dentist.

(d) "Registered <u>dD</u>ental <u>hHygienist</u>" or "RDH" means a licensed person who may perform all procedures authorized by the provisions of these regulations and in addition may perform all functions which may be performed by a dental assistant and registered dental assistant, under the designated supervision of a licensed dentist.

(e) "Registered dDental aAssistant in eExtended fFunctions" or "RDAEF" means a person licensed as a registered dental assistant who has completed post-licensure clinical and didactic training approved by the Bboard and satisfactorily performed on an examination designated by the Bboard for registered dental assistant in extended function applicants.

(f) "Registered dDental hHygienist in eExtended fFunctions" or "RDHEF" means a person licensed as a registered dental hygienist who has completed post-licensure clinical and didactic training approved by the Bboard and satisfactorily performed on an examination designated by the Bboard for registered dental hygienist in extended functions applicants.

(g) "Oral prophylaxis" means the preventive dental procedures including complete removal of explorer-detectable calculus, soft deposits, plaque, stains, and the smoothing of unattached tooth surfaces. The objective of this treatment shall be creation of an environment in which hard and soft tissues can be maintained in good health by the patient.

(h) "Coronal polishing" means a procedure limited to the removal of plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with rubber cup or brush and a polishing agent.

#### **Proposed General Provision Definition Changes**

(i) "Direct supervision" means supervision of dental procedures based on instructions given by a licensed dentist who must be physically present in the treatment facility during performance of those procedures.

(j) "General supervision" means supervision of dental procedures based on instructions given by a licensed dentist, but not requiring the physical presence of the supervising dentist during the performance of those procedures.

(k) "Satisfactory educational qualification" means theory, laboratory and/or clinical experience approved by the <u>B</u>oard.

(I) "Basic supportive dental procedures" means fundamental duties or functions which may be performed by an unlicensed dental assistant under the supervision of a licensed dentist because of their technically elementary characteristics, complete reversibility and inability to precipitate potentially hazardous conditions for the patient being treated.

(m) "Root planing" means the process of instrumentation by which the unattached surfaces of the root are made smooth by the removal of calculus and/or cementum.

(n) "Periodontal soft tissue curettage" means the closed removal of tissue lining the periodontal pocket, not involving the reflection of a flap.

(o) "Gingival" means pertaining to the gingivae, the mucous membrane with the supporting fibrous tissue.

(p) "Postsecondary education" means a formal institutional educational program whose curriculum is designed primarily for students who have completed or terminated their secondary education or are beyond the compulsory age of secondary education, including regional occupational programs and programs whose purpose is academic, vocational and continuing professional education.

(q) "Curriculum" means an organized set of courses or discrete modules of learning which are prerequisite to the award of a certificate, degree or diploma.

#### • Do we need to define here any other terms? RDHAP?

Note: Authority cited: Sections 1614 and 1762, Business and Professions Code. Reference: Sections 1741(d), 1754, 1759, 1760 and 1762, Business and Professions Code.

#### HISTORY

1. Change without regulatory effect amending subsection (h) filed 9-11-89 pursuant to section 100, title 1, California Code of Regulations (Register 89, No. 37).

#### Proposed Changes to Educational Program, Course Definitions, and Instructor Ratios

## Section 1070.1. Educational Program, and Course Definitions, and Instructor Ratios.

As used in this Article, the following definitions shall apply:

(a) "Clinical instruction" means instruction in which students receive supervised experience in performing procedures in a clinical setting on patients. Clinical procedures shall only be allowed upon successful demonstration and evaluation of laboratory and preclinical skills. There shall be at least one (1) instructor for every six (6) students who are simultaneously engaged in clinical instruction.

(b) "Didactic instruction" means lectures, demonstrations, and other instruction involving theory that may or may not involve active participation by students. The faculty or instructional staff of an educational institution or approved provider may provide didactic instruction via electronic media, home study materials, or live lecture modality.

(c) "Extramural dental facility" means any clinical facility utilized by a Board-approved dental assisting educational program for instruction in dental assisting that exists outside or beyond the walls, boundaries or precincts of the primary location of the Board-approved program and in which dental treatment is rendered.

(d) "Laboratory instruction" means instruction in which students receive supervised experience performing procedures using study models, mannequins, or other simulation methods. There shall be at least one (1) instructor for every 14 students who are simultaneously engaged in instruction.

(e) "Preclinical instruction" means instruction in which students receive supervised experience within the educational facilities performing procedures on simulation devices or patients which are limited to students, faculty, or instructional staff members. There shall be at least one (1) instructor for every six (6) students who are simultaneously engaged in instruction.

(f) "Simulated clinical instruction" means instruction in which students receive supervised experience performing procedures using simulated patient heads mounted in appropriate position and accommodating an articulated typodont in an enclosed intraoral environment, or mounted on a dental chair in a dental operatory. Clinical simulation spaces shall be sufficient to permit one simulation space for each 2 students at any one time.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1750, 1750.2, 1750.4, 1752.1, 1752.4, 1752.6 and 1753, Business and Professions Code.

#### HISTORY

 Renumbering of former Section 1018 to Section 1070.1 filed 7-17-85; effective thirtieth day thereafter (Registered 85, No. 29). For prior history, see Register 85, No. 17.
 Duplicate order renumbering former Section 1018 to Section 1070.1 filed 9-27-85; effective upon filing pursuant to Government Code Section 11346.2(d) (Register 85, No. 41).

#### **Proposed Changes to Educational Program, Course Definitions, and Instructor Ratios**

3. Renumbering of former section 1070.1 to section 1070.2 and new section 1070.1 filed 4-30-2003; operative 5-30-2003 (Register 2003, No. 18).

4. Repealer and new section heading, section and Note filed 10-12-2011; operative 11-11-2011 (Register 2011, No. 41).

**Proposed General Application Requirements Regulation Changes** 

#### Section (§) 1076. General Application Requirements.

(a) Application for licensure as a registered dental auxiliary shall be made on a form prescribed by the Bboard and shall be accompanied by the following:

(1) The fees fixed by the **B**board;

(2) 2 classifiable sets of fingerprints on forms provided by the Bboard;

(3) Where applicable, a record of any previous dental assisting or hygiene practice and verification of license status in another jurisdiction.

(b) Completed applications shall be filed with the **B**board not later than the following number of days prior to the date set for the examination for which application is made;

#### RDH – 45 days

Registered Dental Assistant (RDA) - 60 days

Registered Dental Assistant in Extended Functions (RDAEF) and RDHEF – 45 days

(c) An incomplete application shall be returned to the applicant together with a statement setting forth the reason for returning the application and indicating the amount of money, if any, which will be refunded.

(1) An application shall not be deemed incomplete for failure to establish compliance with educational requirements if the application is accompanied by a certification from an approved program that the applicant is expected to meet all educational requirements established for the license for which application has been made and if the approved program certifies not less than 30 days prior to examination that the applicant has in fact met such educational requirements.

The processing times for dental auxiliary licensure are set forth in Section 1069.

(d) Permission to take an examination shall be granted to those applicants who have paid the necessary fees and whose credentials have been approved by the executive officer. Nothing contained herein shall be construed to limit the Bboard's authority to seek from an applicant such other information as may be deemed necessary to evaluate the applicant's qualifications.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1753, 1754, 1758 and 1759, Business and Professions Code; and Section 15376, Government Code.

HISTORY

**Proposed General Application Requirements Regulation Changes** 

1. Amendment of subsections (a) and (b) filed 1-22-86; effective thirtieth day thereafter (Register 86, No. 4).

2. Amendment of subsection (b) filed 2-22-88; operative 3-23-88 (Register 88, No. 10).

3. Amendment of subsection (b) filed 4-16-90; operative 5-16-90 (Register 90, No. 28).

4. Amendment of subsection (b) filed 2-22-2001; operative 3-24-2001 (Register 2001, No. 8).

**Proposed General Application Requirements Regulation Changes** 

#### Section 1077. <u>Registered Dental Assistant</u> (RDA) Applications.

(a) In addition to the requirements set forth in Section 1076, an application for licensure as a registered dental assistant RDA shall be accompanied by the following:

(1) satisfactory evidence that the applicant has been granted a diploma or certificate in dental assisting from an educational program approved by the <u>B</u>board; or

(2) satisfactory evidence that the applicant has met the required <u>18</u> <u>15</u> months satisfactory work experience as a dental assistant. "Satisfactory work experience" means performance of the duties specified in Section 1085(b) and/or (c) in a competent manner, as determined by the dentist employer. An applicant shall obtain work experience verification forms from the <u>Bb</u>oard and supply such forms to those persons in whose employ the applicant obtained the required work experience. The completed form shall be returned to the <u>Bb</u>oard by such person.

(A) The <u>18</u> <u>15</u> months of experience, which must be gained in California while employed by a California licensed dentist(s), shall be considered qualifying only if the experience was comprised of performing duties specified in Section 1085(b) and/or (c) during a majority of the experience hours;

(B) The <u>18</u> <u>15</u> months shall be calculated as follows:

1. experience gained while working 20 or more hours per week shall be credited on a weekly basis, with  $\frac{78}{64}$  weeks considered equivalent to  $\frac{18}{15}$  months;

2. experience gained while working less than 20 hours per week shall be credited on an hourly basis, with  $\frac{1,560}{1280}$  hours considered equivalent to  $\frac{18}{15}$  months.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1753 and 1754, Business and Professions Code.

#### HISTORY

1. Editorial correction filed 11-7-85; effective thirtieth day thereafter (Register 85, No. 45). 2. Designation of first paragraph as subsection (a), amendment of newly designated subsection (a)(2), new subsections (a)(2)(A)-(a)(2)(B)2. and amendment of Note filed 6-11-98; operative 7-11-98 (Register 98, No. 24).

**Proposed General Application Requirements Regulation Changes** 

#### Section 1077.1 <u>Registered Dental Assistant in Extended Functions (RDAEF)</u> Applications.

In addition to the requirements, including the processing times, set forth in Section 1076, an application for licensure as an RDAEF shall be accompanied by satisfactory evidence that the applicant has successfully completed an approved RDAEF program.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1758, Business and Professions Code.

#### HISTORY

1. New section filed 1-22-86; effective thirtieth day thereafter (Register 86, No. 4).

#### **Proposed Duties and Settings Regulation Changes**

#### Section 1085. Dental Assistant Duties and Settings.

(a) Unless specifically so provided by regulation, a dental assistant may not perform the following functions or any other activity which represents the practice of dentistry or requires the knowledge, skill and training of a licensed dentist:

(1) Diagnosis and treatment planning;

(2) Surgical or cutting procedures on hard or soft tissue;

(3) Fitting and adjusting of correctional and prosthodontic appliances;

(4) Prescription of medicines;

(5) Placement, condensation, carving or removal of permanent restorations, including final cementation procedures;

(6) Irrigation and medication of canals, try-in cones, reaming, filing or filling of root canals;

(7) Taking of impressions for prosthodontic appliances, bridges or any other structures which may be worn in the mouth;

(8) Administration of injectable and/or general anesthesia; and

(9) Oral prophylaxis procedures.

(b) A dental assistant may perform such basic supportive dental procedures as the following under the general supervision of a licensed dentist:

(1) Extra-oral duties or functions specified by the supervising dentist; provided that these duties or procedures meet the definition of a basic supportive procedure specified in Business and Professions Code, Section 1750.

(2) Operation of dental radiographic equipment for the purpose of oral radiography if the dental assistant has complied with the requirements of section 1656 of the <u>Business and Professions</u> Code.

(3) Examine orthodontic appliances.

(c) A dental assistant may perform such basic supportive dental procedures as the following under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

**Proposed Duties and Settings Regulation Changes** 

(1) Take impressions for diagnostic and opposing models, bleaching trays, temporary crowns and bridges, and sports guards;

- Does this conflict with (a)(7) above? Need feedback.
- (2) Apply non-aerosol and non-caustic topical agents;

(3) Remove post-extraction and periodontal dressings <u>after inspection of the site</u> by the dentist;

- (4) Placement of elastic orthodontic separators;
- (5) Remove orthodontic separators;

(6) Examine orthodontic appliances;

(67) Assist in the administration of nitrous oxide analgesia or sedation; however, a dental assistant shall not start the administration of the gases and shall not adjust the flow of the gases unless instructed to do so by the dentist who shall be present at the patient's chairside at the implementation of these instructions. This regulation shall not be construed to prevent any person from taking appropriate action in the event of a medical emergency.

(78) Hold anterior matrices;

- (89) Remove sutures after inspection of the site by the dentist;
- (910) Take intra-oral measurements for orthodontic procedures;
- (1011) Seat adjusted retainers or headgears, including appropriate instructions;
- (1112) Check for loose bands;
- (1213) Remove arch wires;
- (1314) Remove ligature ties;

(14<u>15</u>) Apply topical fluoride, after scaling and polishing by the supervising dentist or a registered dental hygienist;

- (1516) Place and remove rubber dams;
- (1617) Place, wedge and remove matrices for restorative procedure;-

#### **Proposed Duties and Settings Regulation Changes**

(1718) Cure restorative or orthodontic materials in operative site with light-curing device

(19) Take facebow transfers and bite registrations;

(20) Place patient monitoring sensors; and

(21) Monitor patient sedation, limited to reading and transmitting information from the monitor display during the intraoperative phase of surgery for electrocardiogram waveform, carbon dioxide and end tidal carbon dioxide concentrations, respiratory cycle data, continuous noninvasive blood pressure data, or pulse arterial oxygen saturation measurements, for the purpose of interpretation and evaluation by a supervising licensed dentist who shall be at the patient's chairside during this procedure.

(d) Notwithstanding subdivision (b), when operating in a school-based setting or a public health program created or administered by a federal, state, county, or local governmental entity pursuant to Sections 104762 and 104830 of the Health and Safety Code, a dental assistant may apply topical fluoride under the general direction of a licensed dentist or physician.

(e) Under the supervision of a registered dental hygienist in alternative practice, a dental assistant may perform intraoral retraction and suctioning.

(f) For the purpose of this section a supervising licensed dentist is defined as a dentist whose patient is receiving the services of a dental assistant in the treatment facility and is under the direct control of said licensed dentist.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1751, Business and Professions Code.

#### HISTORY

1. Editorial correction of subsection (c)(6) filed 7-17-85; effective thirtieth day thereafter (Register 85, No. 29).

2. Editorial correction of subsection (a) (Register 91, No. 30).

3. New subsections (b)(3) and (c)(17) filed 8-2-95; operative 9-1-95 (Register 95, No. 31).

4. Amendment of subsections (c)(1) and (c)(6) filed 2-23-98; operative 3-25-98 (Register 98, No. 9).

5. Change without regulatory effect amending subsection (c)(1) filed 7-15-98 pursuant to section 100, title 1, California Code of Regulations (Register 98, No. 29).

**Proposed Duties and Settings Regulation Changes** 

#### Section 1086. Registered Dental Assistant (RDA) Duties and Settings.

(a) Unless specifically so provided by regulation, the prohibitions contained in section 1085 of these regulations apply to <u>RDAs</u> registered dental assistants.

(b) A RDA registered dental assistant may perform the following duties:

(1) <u>Aall functions which may be performed by a dental assistant.</u>

(c) Under general supervision, a registered dental assistant may perform the following duties:

(<u>42</u>) Mouth-mirror inspection of the oral cavity, to include charting of obvious lesions, existing restorations and missing teeth;

(23) Placement and removal of temporary sedative dressings.

(d) A registered dental assistant may perform the following procedures under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

(14) Obtain endodontic cultures;

(25) Dry canals, previously opened by the supervising dentist, with absorbent points;

(36) Test pulp vitality;

(47) Place bases, liners, and bonding agents on sound dentin;

(58) Remove excess cement from supragingival surfaces of teeth with a hand instrument or floss;

(69) Size stainless steel crowns, temporary crowns and bands;

(710) Fabrication of temporary crowns intra-orally;

(811) Temporary cementation and removal of temporary crowns and removal of orthodontic bands;

(912) Placement and removal of orthodontic separators;

(1013) Placement and ligation of ties and arch wires;

**Proposed Duties and Settings Regulation Changes** 

(1114) Placement of post-extraction and periodontal dressings;

(1215) Apply bleaching agents;

(1316) Activate bleaching agents with non-laser light-curing device;

(1417) Take bite registrations for diagnostic models for case study only;

(18) Use of automated carries detection devices and materials to gather information for diagnosis by the dentist.

(19) Obtain intraoral images for computer-aided design (CAD), milled restorations.

(20) Adjust dentures extra-orally.

(c) A RDA may only perform the following additional duties if he or she has completed a Board-approved RDA educational program in those duties, or if he or she has provided evidence, satisfactory to the Board, of having completed a Board-approved course in those duties.

(151) Coronal polishing (Evidence of satisfactory completion of a board-approved course of instruction in this function must be submitted to the board prior to any performance thereof). The processing times for coronal polishing course approval are set forth in section 1069. This procedure shall not be intended or interpreted as a complete oral prophylaxis (a procedure which can be performed only by a licensed dentist or registered dental hygienist). A licensed dentist or registered dental hygienist (RDH) shall determine that the teeth to be polished are free of calculus or other extraneous material prior to coronal polishing.

(162) Removal of excess cement from coronal surfaces of teeth under orthodontic treatment by means of an ultrasonic scaler. (Evidence of satisfactory completion of a board-approved course of instruction or equivalent instruction in an approved RDA program in this function must be submitted to the board prior to any performance thereof.) The processing times for ultrasonic scaler course approval are set forth in section 1069.

(3) The application of pit and fissure sealants.

(4) The allowable duties of an orthodontic assistant permitholder as specified in the Business and Professions Code, Section 1750.3. A RDA shall not be required to complete further instruction in the duties of placing ligature ties and archwires, removing orthodontic bands, and removing excess cement from tooth surfaces with a hand instrument.

#### **Proposed Duties and Settings Regulation Changes**

(5) The allowable duties of a dental sedation assistant permitholder as specified in Business and Professions Code, Section 1750.5.

(d) Except as provided in Business and Professions Code, Section 1777, the supervising licensed dentist shall be responsible for determining whether each authorized procedure performed by a RDA should be performed under general or direct supervision.

(e) Settings. <u>RDAs</u> Registered dental assistants may undertake the duties authorized by this section in a treatment facility under the jurisdiction and control of the supervising licensed dentist, or in an equivalent facility approved by the <u>B</u>board.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614 and 1754, Business and Professions Code; and Section 15376, Government Code.

#### HISTORY

1. Amendment of subsection (d) filed 2-22-88; operative 3-23-88 (Register 88, No. 10).

2. Change without regulatory effect amending subsection (d)(11) filed 9-11-89 pursuant to section 100, title 1, California Code of Regulations (Register 89, No. 37).

3. Amendment of subsection (d)(11) filed 10-29-90; operative 11-28-90 (Register 90, No. 48). 4. New subsection (d)(11) and subsection renumbering filed 5-9-96; operative 6-8-96 (Register 96, No. 19).

5. New subsections (d)(7), (d)(12) and (d)(13) and subsection renumbering filed 1-24-2000; operative 2-23-2000 (Register 2000, No. 4).

**Proposed Duties and Settings Regulation Changes** 

# Section 1087. <u>Registered Dental Assistant in Extended Functions (RDAEF)</u> Duties and Settings.

(a) Unless specifically so provided by regulation, the prohibitions contained in <u>California</u> <u>Code of Regulations, Title 16</u>, Section 1085 apply to RDAEFs.

(b) An RDAEF <u>licensed before, on or after January 1, 2010,</u> may perform all duties assigned to dental assistants and registered dental assistants.

(c) An RDAEF <u>licensed on or after January 1, 2010</u>, may perform the procedures set forth below under the direct supervision of a licensed dentist when done so pursuant to the order, control and full professional responsibility of the supervising dentist. Such procedures shall be checked and approved by the supervising dentist prior to dismissal of the patient from the office of said dentist.

(1) Conduct preliminary evaluation of the patient's oral health, including but not limited to charting, intraoral and extra-oral evaluation of soft tissue, classifying occlusion, and myofunctional evaluation.

(2) Perform oral health assessments in school-based, community health project settings under the direction of a Registered Dental Hygienist (RDH), Registered Dental Hygienist in Alternative Practice (RDHAP), or dentist.

(3) Cord retraction of gingiva for impression procedures.

(4) Size and fit endodontic master points and accessory points.

(5) Cement endodontic master points and accessory points.

(6) Take final impressions for permanent indirect restorations.

(7) Take final impressions for tooth-borne removable prosthesis.

(8) Polish and contour existing amalgam restorations.

(9) Place, contour, finish, and adjust all direct restorations.

(10) Adjust and cement permanent indirect restorations.

(11) Other procedures authorized by regulations adopted by the Board.

(1) Cord retraction of gingivae for impression procedures;

(2) Take impressions for cast restorations;

**Proposed Duties and Settings Regulation Changes** 

(3) Take impressions for space maintainers, orthodontic appliances and occlusal guards.

(4) Prepare enamel by etching for bonding;

(5) Formulate indirect patterns for endodontic post and core castings;

(6) Fit trial endodontic filling points;

(7) Apply pit and fissure sealants;

(8) Remove excess cement from subgingival tooth surfaces with a hand instrument;

(9) Apply etchant for bonding restorative materials.

(d) An RDAEF licensed before January 1, 2010, may only perform the procedures specified in paragraphs (1) to (9) below, until he or she provides evidence of having completed a Board-approved course in the additional procedures specified in paragraphs (1), (2), (5), and (7) to (11), inclusive, of subdivision (b) of Section 1753.5 of the Business and Professions Code, and an examination as specified in Section 1753.4 of the Business and Professions Code:

(1) Cord retraction of gingivae for impression procedures;

(2) Take impressions for cast restorations;

(3) Take impressions for space maintainers, orthodontic appliances and occlusal guards-;

• Not specified in Statute 1753.6. Need feedback

(4) Prepare enamel by etching for bonding;

#### • Not specified in Statute 1753.6. Need feedback

(5) Formulate indirect patterns for endodontic post and core castings;

(6) Fit trial endodontic filling points;

(7) Apply pit and fissure sealants;

(8) Remove excess cement from subgingival tooth surfaces with a hand instrument; and

#### **Proposed Duties and Settings Regulation Changes**

(9) Apply etchant for bonding restorative materials.

#### • Not specified in Statute 1753.6. Need feedback

(de) Settings. Registered dental assistants in extended functions may undertake the duties authorized by this section in a treatment facility under the jurisdiction and control of the supervising licensed dentist, or in an equivalent facility approved by the Beoard.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1614, 1756 and 1757, Business and Professions Code.

#### HISTORY

1. Amendment of subsection (c)(7) and new subsections (c)(8)-(9) filed 4-27-2000; operative 5-27-2000 (Register 2000, No. 17).