

# OCCUPATIONAL ANALYSIS OF THE REGISTERED DENTAL ASSISTANT PROFESSION



DENTAL BOARD OF CALIFORNIA

# OCCUPATIONAL ANALYSIS OF THE REGISTERED DENTAL ASSISTANT PROFESSION



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#### OFFICE OF PROFESSIONAL EXAMINATION SERVICES

This occupational analysis report is mandated by California Business and Professions Code (BPC) § 139 and by DCA Policy OPES Licensure Examination Validation (Policy OPES 22-01.)

# **EXECUTIVE SUMMARY**

The Dental Board of California (Board) requested that the Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an occupational analysis (OA) of the registered dental assistant (RDA) profession in California. The purpose of the OA is to define practice in terms of critical tasks that RDAs must be able to perform safely and competently at the time of licensure. The results of this OA provide a description of practice for the RDA profession and provide the basis for constructing a valid and legally defensible Registered Dental Assistant Written Examination.

OPES test specialists began by researching the profession and meeting with RDAs working throughout California. The purpose of these meetings was to identify the tasks performed by RDAs and to specify the knowledge required to perform those tasks safely and competently. Using the information gathered from the research and meetings, OPES test specialists developed a preliminary list of tasks performed by RDAs in their practice, along with a list of the knowledge needed to perform those tasks.

In October 2022, OPES convened a workshop to review and refine the preliminary lists of tasks and knowledge statements describing RDA practice in California. RDAs participated in the workshops as subject matter experts (SMEs). The SMEs represented the profession in terms of location of practice and years licensed. In November 2022, OPES convened a second workshop to review and finalize the preliminary lists of tasks and knowledge statements describing RDA practice in California. The SMEs also linked each task with the knowledge required to perform that task and reviewed demographic questions to be used on a two-part OA questionnaire to be completed by a sample of RDAs statewide.

After the second workshop, OPES test specialists developed the OA questionnaire. The development included a pilot study that was conducted using a group of RDAs who participated in the October and November 2022 workshops. The pilot study participants' feedback was incorporated into the final questionnaire, which was administered in December 2022 and January 2023.

In the first part of the OA questionnaire, RDAs were asked to provide demographic information related to their work settings and practice. In the second part, RDAs were asked to rate specific tasks by frequency (i.e., how often the RDA performs the task in their current practice) and importance (i.e., how important the task is to effective performance in their current practice). They were also asked to rate each knowledge statement by importance (i.e., how important the knowledge is to effective performance in their current practice).

In December 2022, on behalf of the Board, OPES sent an email to a sample of 17,418 actively practicing RDAs, inviting them to complete the online OA questionnaire. The email invitation was sent to RDAs for whom the Board had an email address on file. Reminder emails were sent weekly after the initial invitation was made.

A total of 2,609 RDAs, or approximately 15.0% of the RDAs who received an email invitation, responded to the OA questionnaire. The final number of respondents included in the data analysis was 968 (5.6%). This response rate reflects two adjustments. First, OPES excluded data from respondents who indicated they were not currently licensed and practicing as RDAs in California. Second, OPES excluded data from questionnaires that contained a large portion of incomplete responses.

OPES test specialists then performed data analyses of the task and knowledge ratings obtained from the OA questionnaire respondents. The task frequency and importance ratings were combined to derive an overall criticality index for each task statement.

Once the data were analyzed, OPES conducted a third workshop with SMEs in February 2023. The SMEs evaluated the criticality indices and determined whether any task statements should be excluded from the examination outline. They also reviewed the list of knowledge statements to verify that each statement was critical for safe and competent entry level performance as an RDA in California. The SMEs established the final linkage between tasks and knowledge statements, organized the tasks and knowledge statements into content areas, and wrote descriptions of those content areas. The SMEs then evaluated the preliminary content area weights and determined the final weights for the California Registered Dental Assistant Written Examination outline. The examination outline is structured into four content areas weighted relative to each of the other content areas. The new outline identifies the tasks and knowledge critical to safe and competent RDA practice in California at the time of licensure. The examination outline developed as a result of this OA provides a basis for developing the Registered Dental Assistant Written Examination.

Results of this OA provide information regarding current practice that can be used to develop valid and legally defensible examinations and to make jobrelated decisions regarding occupational licensure.

# OVERVIEW OF THE REGISTERED DENTAL ASSISTANT WRITTEN EXAMINATION OUTLINE

Content Area	Content Area Description	Percent Weight
1. Assessment and Diagnostic Procedures	This area assesses the candidate's knowledge of reviewing information about a patient's history and oral conditions as they relate to dental treatment. This area also assesses the candidate's knowledge of assisting with diagnostic records and chart information related to dental treatment. These activities are performed under the supervision of a dentist.	15
2. Dental Procedures	This area assesses the candidate's knowledge of providing registered dental assistant services related to patient treatment. This includes services related to placing direct and indirect provisional restorations, implementing preventative procedures, and performing tasks associated with specialty procedures. This area also assesses the candidate's knowledge of educating the patient about oral health and maintenance. These activities are performed under the supervision of a dentist.	50
<ol> <li>Infection Control and Health and Safety</li> </ol>	This area assesses the candidate's knowledge of maintaining a safe and sanitary work environment and to adhere to infection control protocols and standard precautions.	25
4. Laws and Regulations	This area assesses the candidate's knowledge of laws and regulations regarding licensing requirements, scope of practice, professional conduct, and professional responsibilities.	10
	TOTAL	100

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# CHAPTER 1 | INTRODUCTION

## PURPOSE OF THE OCCUPATIONAL ANALYSIS

The Dental Board of California (Board) requested that the Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an occupational analysis (OA) as part of the Board's comprehensive review of the registered dental assistant (RDA) profession in California. The purpose of the OA is to identify critical activities performed by RDAs in California. The results of this OA provide a description of practice for the RDA profession and a basis for developing a valid and legally defensible Registered Dental Assistant Written Examination.

## PARTICIPATION OF SUBJECT MATTER EXPERTS

California RDAs participated as subject matter experts (SMEs) during the OA to ensure that the description of practice directly reflects current RDA practice in California. These SMEs represented the occupation in terms of geographic location of practice and years licensed. The SMEs provided technical expertise and information regarding different aspects of current RDA practice. During the workshops, the SMEs developed and reviewed the tasks and knowledge statements describing RDA practice, organized the tasks and knowledge statements into content areas, evaluated the responses to the OA questionnaire, and developed the examination outline.

#### ADHERENCE TO LEGAL STANDARDS AND GUIDELINES

Licensure programs in the State of California adhere strictly to federal and state laws and regulations, as well as to professional guidelines and technical standards. For the purposes of OAs, the following laws and guidelines are authoritative:

- California Business and Professions Code (BPC) § 139.
- 29 Code of Federal Regulations Part 1607 Uniform Guidelines on Employee Selection Procedures (1978).
- California Fair Employment and Housing Act, Government Code § 12944.
- Principles for the Validation and Use of Personnel Selection Procedures (2018), Society for Industrial and Organizational Psychology (SIOP).

• Standards for Educational and Psychological Testing (2014 Standards), American Educational Research Association, American Psychological Association, and National Council on Measurement in Education.

For a licensure, certification, or registration program to meet these standards, it must be solidly based upon the occupational activities required for practice.

#### DESCRIPTION OF OCCUPATION

An RDA may perform all the following duties according to BPC § 1752.4:

(1) All duties that a dental assistant is allowed to perform.

(2) Mouth-mirror inspections of the oral cavity, to include charting of obvious lesions, existing restorations, and missing teeth.

(3) Apply and activate bleaching agents using a nonlaser light-curing device.

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

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

- (6) Pulp vitality testing and recording of findings.
- (7) Place bases, liners, and bonding agents.
- (8) Chemically prepare teeth for bonding.
- (9) Place, adjust, and finish direct provisional restorations.

(10) Fabricate, adjust, cement, and remove indirect provisional restorations, including stainless steel crowns when used as a provisional restoration.

(11) Place post-extraction dressings after inspection of the surgical site by the supervising licensed dentist.

(12) Place periodontal dressings.

(13) Dry endodontically treated canals using absorbent paper points.

(14) Adjust dentures extra-orally.

(15) Remove excess cement from surfaces of teeth with a hand instrument.

(16) Polish coronal surfaces of the teeth.

(17) Place ligature ties and archwires.

(18) Remove orthodontic bands.

(19) All duties that the board may prescribe by regulation.

(b) A registered dental assistant may only perform the following additional duties if he or she has completed a board-approved registered dental assistant 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.

(1) Remove excess cement with an ultrasonic scaler from supragingival surfaces of teeth undergoing orthodontic treatment.

(2) The allowable duties of an orthodontic assistant permitholder as specified in Section 1750.3. 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.

(3) The allowable duties of a dental sedation assistant permitholder as specified in Section 1750.5.

(4) The application of pit and fissure sealants.

(c) Except as provided in Section 1777, the supervising licensed dentist shall be responsible for determining whether each authorized procedure performed by a registered dental assistant should be performed under general or direct supervision.

(d) This section shall become operative on January 1, 2010.

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# CHAPTER 2 | OCCUPATIONAL ANALYSIS QUESTIONNAIRE

# TASKS AND KNOWLEDGE STATEMENTS

To develop a preliminary list of tasks and knowledge statements, OPES test specialists integrated information gathered from literature reviews of professionrelated sources (e.g., previous OA reports, articles, laws and regulations, and industry publications) and from meetings with SMEs. The statements were then organized into major content areas of practice.

In October and November 2022, OPES test specialists facilitated two workshops. Eleven SMEs with varying years of experience and practicing in different geographic locations participated in these workshops. During the first workshop in October, SMEs evaluated the tasks and knowledge statements for technical accuracy, level of specificity, and comprehensiveness of assessment of practice. In addition, SMEs evaluated the organization of task statements within content areas to ensure that the content areas were independent and nonoverlapping.

During the second workshop, the SMEs performed a preliminary linkage of the tasks and knowledge statements. The linkage was performed to identify the knowledge required for performance of each task and to verify that each identified knowledge statement was important for safe and competent performance as an RDA. The linkage ensured that all tasks were linked to at least one knowledge statement and that each knowledge statement was linked to at least one task. The SMEs also evaluated the scales that would be used for rating tasks and knowledge statements. Finally, the SMEs reviewed and revised the proposed demographic questions for the online OA questionnaire.

OPES used the final list of tasks, associated knowledge statements, demographic questions, and rating scales to develop the online OA questionnaire that was sent to a sample of California RDAs.

#### QUESTIONNAIRE DEVELOPMENT

OPES test specialists developed the online OA questionnaire designed to solicit RDAs' ratings of the tasks and knowledge statements. The surveyed RDAs were asked to rate how often they perform each task in their current practice (Frequency) and how important each task is to effective performance of their current practice (Importance). In addition, they were asked to rate how important each knowledge statement is to the effective performance of their current practice (Importance). The OA questionnaire also included a demographic section to obtain relevant professional background information about responding RDAs. The OA questionnaire is Appendix E.

#### PILOT STUDY

Before administering the final questionnaire, OPES conducted a pilot study of the online questionnaire. The draft questionnaire was sent to the 11 SMEs who had participated in the OA workshops. OPES received feedback on the pilot study from 7 respondents. The SMEs reviewed the tasks and knowledge statements in the questionnaire for technical accuracy and for whether they reflected RDA practice. The SMEs also provided feedback about the estimated time for completion, online navigation, and ease of use of the questionnaire. OPES used this feedback to refine the final questionnaire, which was administered from December 18, 2022 to January 22, 2023.

# CHAPTER 3 | RESPONSE RATE AND DEMOGRAPHICS

# SAMPLING STRATEGY AND RESPONSE RATE

In December 2022, on behalf of the Board, OPES sent an email to a sample of 17,418 actively practicing RDAs for whom the Board had an email address on file, inviting them to complete the online OA questionnaire. Reminder emails were sent weekly after the initial invitation. The email invitation to practitioners is Appendix D.

A total of 2,609 RDAs, or approximately 15.0% of the RDAs who received an email invitation, responded to the OA questionnaire. The final number of respondents included in the data analysis was 968 (5.6%). This response rate reflects two adjustments. First, OPES excluded data from respondents who indicated they were not currently holding a license and practicing as RDAs in California. Second, OPES excluded data from questionnaires with a large portion of incomplete responses.

## DEMOGRAPHIC SUMMARY

As shown in Table 1 and Figure 1, the responding RDAs reported a range of years of experience from more than 20 (27.5%) to 1–5 (26.3%). A majority of respondents (52.7%) reported holding an RDA license for 11 years or more, while 47.3% reported holding an RDA license for 10 years or fewer.

Table 2 and Figure 2 show that 69.8% of respondents reported that they had worked as an unlicensed dental assistant for 5 years or fewer before obtaining an RDA license, while 12.6% reported that they had worked as a dental assistant for 6 years or longer.

Table 3 and Figure 3 show other licenses or certificates that respondents reported holding in addition to their RDA license. Most respondents reported holding a coronal polishing certificate (97.2%), while 91.0% of respondents reported that they held a radiation safety certificate. In addition, 67.1% of respondents reported holding a pit and fissure sealant certificate. A small percentage of respondents reported that they held an ultrasonic scaling certificate (18.4%), an orthodontic assistant permit (5.7%), or a dental sedation assistant permit (2.9%).

Table 4 and Figure 4 show that 79.5% of the respondents reported that their primary work setting was located in an urban area, and 20.1% reported that it was located in a rural area.

Table 5 and Figure 5 show that 32.2% of respondents reported working in a private dental practice with one dentist, while 27.8% reported working in a private dental practice with two or more dentists. Approximately 16.3% of the respondents reported that they worked in a specialty dental practice. In addition, approximately 13.8% of respondents reported that they worked in public health dentistry, a dental school clinic, or the military.

Table 6 and Figure 6 show that 70.1% of respondents reported that they worked in general dentistry, while 7.6% described their primary work setting as orthodontics, 6.4% as pedodontics, 2.6% as periodontics, 2.3% as oral surgery, 1.8% as endodontics, and 1.3% as prosthodontics.

Table 7 and Figure 7 show that 52.1% of respondents reported 1–3 RDAs working in their primary work setting, while 22.0% reported that they were the only RDA in their primary work setting, and 25.8% reported 4 or more RDAs.

Table 8 and Figure 8 show that 78.9% of respondents reported that their work setting did not include RDAEFs; 15.3% reported that their work setting included 1 RDAEF; 3.6% reported 2–3 RDAEFs; and 2.0% reported 4 or more RDAEFs.

Table 9 and Figure 9 show that 45.1% of respondents reported that their practice setting did not employ unlicensed dental assistants, while 46.8% reported that 1–3 unlicensed dental assistants worked in their primary work setting, and 7.9% reported 4 or more unlicensed dental assistants.

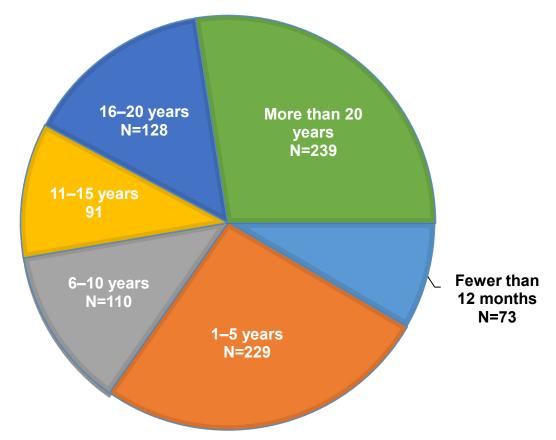
Table 10 shows the geographical regions where respondents perform most of their work. A breakdown of regional data organized by county is Appendix A.

Additional demographic information from respondents can be found in Tables 1–10 and Figures 1–9.

TABLE 1 – NUMBER OF YEARS LICENSED AS AN RDA

YEARS	NUMBER (N)	PERCENT
Fewer than 12 months	73	8.4
1 to 5 years	229	26.3
6 to 10 years	110	12.6
11 to 15 years	91	10.5
16 to 20 years	128	14.7
More than 20 years	239	27.5
Total	870	100

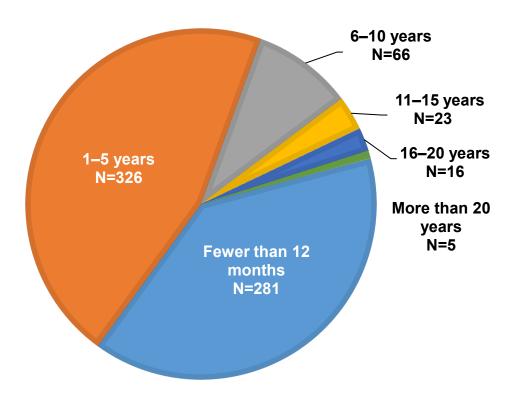
## FIGURE 1 - NUMBER OF YEARS LICENSED AS AN RDA



YEARS	NUMBER (N)	PERCENT
Not applicable (n/a)	153	17.6
Fewer than 12 months	281	32.3
1 to 5 years	326	37.5
6 to 10 years	66	7.6
11 to 15 years	23	2.6
16 to 20 years	16	1.8
More than 20 years	5	0.6
Total	870	100

# TABLE 2 – NUMBER OF YEARS WORKING AS A DENTAL ASSISTANT BEFORE OBTAINING RDA LICENSE

## FIGURE 2 – NUMBER OF YEARS WORKING AS A DENTAL ASSISTANT BEFORE OBTAINING RDA LICENSE



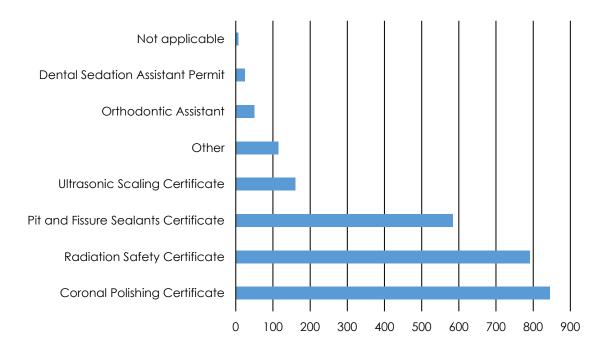
LICENSE/CERTIFICATE*	NUMBER (N)	PERCENT**
Not applicable	7	0.8
Coronal Polishing Certificate	846	97.2
Dental Sedation Assistant Permit	25	2.9
Orthodontic Assistant Permit	50	5.7
Pit and Fissure Sealants Certificate	584	67.1
Ultrasonic Scaling Certificate	160	18.4
Radiation Safety Certificate	792	91.0
Other	115	13.2

#### TABLE 3 – LICENSES AND CERTIFICATES HELD IN ADDITION TO RDA\*

\*NOTE: Respondents were asked to select all that apply.

\*\*NOTE: Percentages indicate the proportion in the sample of respondents.

## FIGURE 3 – LICENSES AND CERTIFICATIONS HELD IN ADDITION TO RDA\*



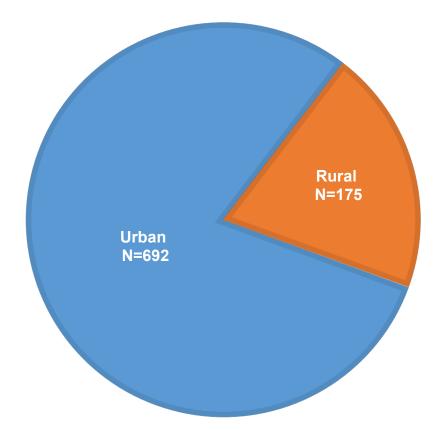
\*NOTE: Respondents were asked to select all that apply.

# TABLE 4 - LOCATION OF PRIMARY WORK SETTING

LOCATION	NUMBER (N)	PERCENT*
Urban (more than 50,000 people)	692	79.5
Rural (fewer than 50,000 people)	175	20.1
Total	867	100

\*NOTE: Percentages do not add to 100 due to rounding.

# FIGURE 4 - LOCATION OF PRIMARY WORK SETTING

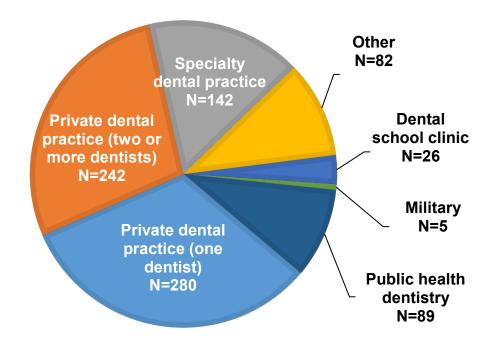


#### TABLE 5 – PRIMARY WORK SETTING DESCRIPTION

WORK SETTING	NUMBER (N)	PERCENT*
Private dental practice with one dentist	280	32.2
Private dental practice with two or more dentists	242	27.8
Specialty dental practice	142	16.3
Public health dentistry	89	10.2
Dental school clinic	26	3.0
Military	5	0.6
Other	82	9.4
Total	866	100

\*NOTE: Percentages do not add to 100 due to rounding.

#### FIGURE 5 – PRIMARY WORK SETTING DESCRIPTION



#### TABLE 6 – DENTAL PRACTICE DESCRIPTION

DENTAL PRACTICE	NUMBER (N)	PERCENT*
General dentistry	610	70.1
Orthodontic dentistry	66	7.6
Endodontic dentistry	16	1.8
Periodontic dentistry	23	2.6
Pedodontic dentistry	56	6.4
Prosthodontic dentistry	11	1.3
Oral surgery	20	2.3
Other	68	7.8
Total	870	100

\*NOTE: Percentages do not add to 100 due to rounding.

#### FIGURE 6 - DESCRIPTION OF DENTAL PRACTICE IN PRIMARY WORK SETTING

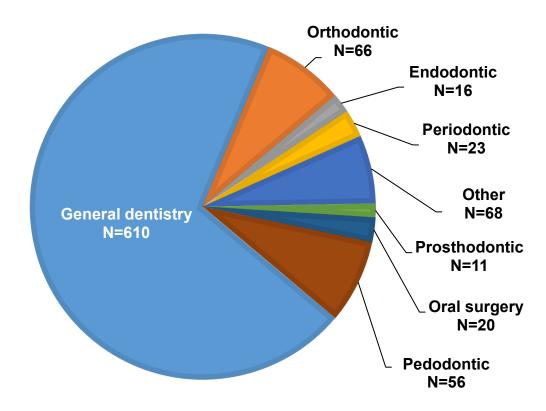
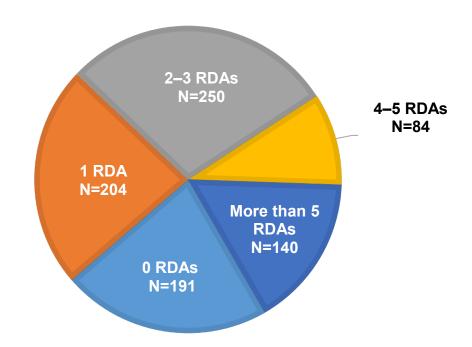


TABLE 7 – NUMBER OF LICENSED REGISTERED DENTAL ASSISTANTS IN PRIMARY
WORK SETTING (NOT INCLUDING YOURSELF)

REGISTERED DENTAL ASSISTANTS	NUMBER (N) PERCENT*	
0	191	22.0
1	204	23.4
2 to 3	250	28.7
4 to 5	84	9.7
More than 5	140	16.1
Total	869	100

\*NOTE: Percentages do not add to 100 due to rounding.

# FIGURE 7 – NUMBER OF LICENSED REGISTERED DENTAL ASSISTANTS IN PRIMARY WORK SETTING (NOT INCLUDING YOURSELF)

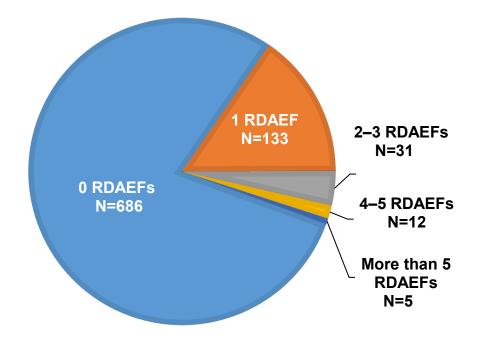


RDAEFs	NUMBER (N)	PERCENT*
0	686	78.9
1	133	15.3
2 to 3	31	3.6
4 to 5	12	1.4
More than 5	5	0.6
Total	867	100

TABLE 8 - NUMBER OF LICENSED RDAEFS IN PRIMARY WORK SETTING

\*NOTE: Percentages do not add to 100 due to rounding.

#### FIGURE 8 – NUMBER OF LICENSED RDAEFS IN PRIMARY WORK SETTING

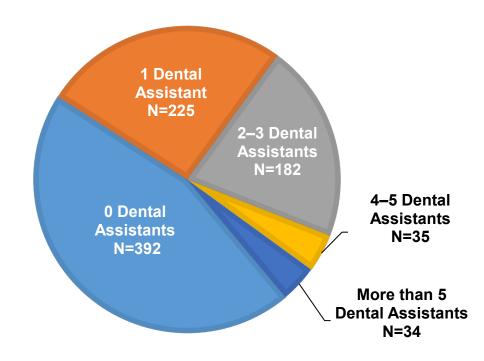


DENTAL ASSISTANTS	NUMBER (N)	PERCENT*
0	392	45.1
1	225	25.9
2 to 3	182	20.9
4 to 5	35	4.0
More than 5	34	3.9
Total	868	100

## TABLE 9 – NUMBER OF UNLICENSED DENTAL ASSISTANTS IN PRIMARY WORK SETTING

\*NOTE: Percentages do not add to 100 due to rounding.

## FIGURE 9 – NUMBER OF UNLICENSED DENTAL ASSISTANTS IN PRIMARY WORK SETTING



# TABLE 10 - RESPONDENTS BY REGION

REGION NAME	NUMBER (N)	PERCENT*
Los Angeles County and Vicinity	168	19.3
San Francisco Bay Area	192	22.1
San Joaquin Valley	124	14.3
Sacramento Valley	73	8.4
San Diego County and Vicinity	95	10.9
Shasta/Cascade	20	2.3
Riverside and Vicinity	85	9.8
Sierra Mountain Valley	30	3.4
North Coast	37	4.3
South Coast and Central Coast	43	4.9
Total	867	100

\*NOTE: Appendix A shows a more detailed breakdown of the frequencies by region.

# CHAPTER 4 | DATA ANALYSIS AND RESULTS

## RELIABILITY OF RATINGS

OPES evaluated the task and knowledge statement ratings obtained from the questionnaire respondents with a standard index of reliability, coefficient alpha (a), which ranges from 0 to 1. Coefficient alpha is an estimate of the internal consistency of the respondents' ratings of the tasks and knowledge statements. A higher coefficient value indicates more consistency between respondent ratings. Coefficients were calculated for all respondent ratings.

Table 11 displays the reliability coefficients for the task statement rating scale in each content area. The overall ratings of task frequency and task importance across content areas were highly reliable (Frequency a = .925; Importance a = .940). Table 12 displays the reliability coefficients for the knowledge statement rating scale in each content area. The overall ratings of knowledge importance across content areas were highly reliable (a = .985). These results indicate that the responding RDAs rated the tasks and knowledge statements consistently throughout the questionnaire.

CONTENT AREA	NUMBER OF TASKS	a FREQUENCY	a IMPORTANCE
1. Assessment and Diagnostic Records	7	.703	.695
2. Dental Procedures	29	.919	.944
3. Infection Control and Health and Safety	9	.834	.812
4. Laws and Regulations	6	.724	.775
Overall	51	.925	.940

# TABLE 11 - TASK SCALE RELIABILITY

## TABLE 12 - KNOWLEDGE SCALE RELIABILITY

CONTENT AREA	NUMBER OF KNOWLEDGE STATEMENTS	a IMPORTANCE
1. Assessment and Diagnostic Records	28	.949
2. Dental Procedures	76	.982
3. Infection Control and Health and Safety	24	.975
4. Laws and Regulations	10	.936
Overall	138	.985

# TASK CRITICALITY INDICES

To calculate the criticality indices of the task statements, OPES test specialists used the following formula. For each respondent, OPES first multiplied the frequency rating (Fi) and the importance rating (Ii) for each task. Next, OPES averaged the multiplication products across respondents as shown below.

Task criticality index = mean [(Fi) X (Ii)]

The tasks were grouped by content area and sorted in descending order by their criticality index. The tasks included in the questionnaire, their mean frequency and importance ratings, and their associated criticality indices are Appendix B.

OPES test specialists convened a workshop consisting of 4 SMEs in February 2023. The purpose of this workshop was to identify the essential tasks and knowledge required for safe and competent RDA practice. The SMEs reviewed the mean frequency and importance ratings for each task and its criticality index to determine whether to establish a cutoff value below which tasks should be eliminated. Based on their review of the relative importance of tasks to RDA practice, the SMEs determined that no cutoff value should be set and that all the tasks should be retained.

#### KNOWLEDGE IMPORTANCE RATINGS

To determine the importance of each knowledge statement, the mean importance (K Imp) rating for each knowledge statement was calculated. The knowledge statements included in the questionnaire, sorted in descending order by content area, and presented along with their mean importance ratings, are Appendix C.

The SMEs who participated in the February 2023 workshop also reviewed the knowledge statement mean importance ratings. After reviewing the mean importance ratings and considering their relative importance to RDA practice, the SMEs determined that no cutoff value should be set, and that all knowledge statements should be retained.

#### TASK-KNOWLEDGE LINKAGE

The SMEs who participated in the February 2023 workshop then confirmed the final linkage of tasks and knowledge statements. The SMEs worked individually to verify that the knowledge statements linked to each task were critical to competent performance of that task.

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# CHAPTER 5 | EXAMINATION OUTLINE

# CONTENT AREAS AND WEIGHTS

The SMEs who participated in the February 2023 workshop were also asked to finalize the weights of the content areas that would form the Registered Dental Assistant Written Examination outline. OPES test specialists presented the SMEs with preliminary weights that had been calculated by dividing the sum of the criticality indices for the tasks in each content area by the overall sum of the criticality indices for all tasks, as shown below.

Sum of Criticality Indices for Tasks in Content Area	= Percent Weight of
Sum of Criticality Indices for All Tasks	Content Area

The SMEs evaluated the preliminary content area weights in terms of how well they reflected the relative importance of each content area to entry level RDA practice in California. Through discussion, the SMEs determined that adjustments to the preliminary weights were necessary to more accurately reflect the relative importance of each area to RDA practice. The content area weight for "Dental Procedures" increased, and the content area weight for "Laws and Regulations" decreased; the content area weights for "Assessment and Diagnostic Records" and "Infection Control and Health and Safety" remained the same. A summary of the preliminary and final content area weights for the RDA Written Examination outline is presented in Table 13.

CONTENT AREA	PRELIMINARY	FINAL
CONTENT AREA	WEIGHTS	WEIGHTS
1. Assessment and Diagnostic Records	15%	15%
2. Dental Procedures	45%	50%
3. Infection Control and Health and Safety	25%	25%
4. Laws and Regulations	15%	10%
Total	100%	100%

#### TABLE 13 – CONTENT AREA WEIGHTS

The SMEs reviewed the content areas and wrote descriptions for each content area. They organized the tasks and knowledge statements into subareas within each content area and distributed the content area weight across the subareas. The content areas, subareas, and associated weights were then finalized and provide the basis for the California Registered Dental Assistant Examination outline. The final examination outline is presented in Table 14.

#### TABLE 14 - REGISTERED DENTAL ASSISTANT WRITTEN EXAMINATION OUTLINE

Content Area 1. ASSESSMENT AND DIAGNOSTIC RECORDS (15%). This area assesses the candidate's knowledge of reviewing information about a patient's history and oral conditions as they relate to dental treatment. This area also assesses the candidate's knowledge of assisting with diagnostic records and chart information related to dental treatment. These activities are performed under the supervision of a dentist.

Section	Tasks	Associated Knowledge Statements
1A. Patient Information and Assessment (8%)	T1. Review patient medical and dental history to identify conditions that may affect dental treatment.	<ul> <li>K1. Knowledge of common medical conditions and medications that may affect treatment Knowledge of dental conditions that affect treatment.</li> <li>K2. Knowledge of types of oral health conditions that may affect treatment.</li> <li>K3. Knowledge of types of medical conditions that may require premedication for dental treatment.</li> <li>K4. Knowledge of the relationship between allergic reactions or sensitivities and dental materials.</li> <li>K5. Knowledge of methods for gathering information regarding patient medical and dental history.</li> </ul>
	T2. Obtain patient's blood pressure and vital signs to determine current status.	<ul> <li>K6. Knowledge of standards regarding blood pressure ranges based on patient age.</li> <li>K7. Knowledge of signs of elevated or dangerous blood pressure readings.</li> <li>K8. Knowledge of vital signs that should be obtained before treatment.</li> <li>K9. Knowledge of techniques for taking patient blood pressure and vitals.</li> </ul>
	T3. Perform mouth mirror inspection of oral cavit to identify obvious lesions, existing restorations, and missing teeth.	<ul> <li>K10. Knowledge of types of basic oral structures and dental anatomy.</li> <li>K11. Knowledge of types of occlusions and malocclusions.</li> <li>K12. Knowledge of signs of plaque, calculus, and stain formations in the oral cavity.</li> <li>K13. Knowledge of the effects of dietary habits on oral health.</li> <li>K14. Knowledge of effects of substance use on oral health.</li> <li>K15. Knowledge of the effects of smoking or tobacco use on oral health.</li> <li>K16. Knowledge of methods for performing mouth mirror inspections.</li> </ul>

Content Area 1. ASSESSMENT AND DIAGNOSTIC RECORDS (15%), continued. This area assesses the candidate's knowledge of reviewing information about a patient's history and oral conditions as they relate to dental treatment. This area also assesses the candidate's knowledge of assisting with diagnostic records and chart information related to dental treatment. These activities are performed under the supervision of a dentist.

	Section	Tasks		Associated Knowledge Statements
1B.	Diagnostic Tests and Records (7%)	T4.	Use caries detection materials and devices to gather information for dentist.	<ul><li>K17. Knowledge of types of devices and materials for detecting caries.</li><li>K18. Knowledge of procedures for using caries detection devices and materials.</li></ul>
		T5.	Obtain intraoral images of patient's mouth and dentition to be assist with milling of computer- aided design (CAD) restorations.	<ul> <li>K19. Knowledge of techniques for taking intraoral diagnostic imaging.</li> <li>K20. Knowledge of techniques for patient management during imaging.</li> <li>K21. Knowledge of factors that impact digital imaging and quality.</li> </ul>
		T6.	Prepare patient for radiographs or cone-beam computed tomography (CBCT) to assist the dentist in determining oral conditions.	<ul> <li>K22. Knowledge of types of radiographic imaging (i.e., panoramic, bitewing, FMX).</li> <li>K23. Knowledge of procedures for taking digital or conventional radiographs.</li> <li>K24. Knowledge of methods for patient management during radiograph procedures.</li> <li>K25. Knowledge of factors that impact radiographic imaging and quality.</li> </ul>
		T7.	Chart evaluation information to document oral conditions related to treatment.	<ul> <li>K26. Knowledge of types of dental terminology and morphology.</li> <li>K27. Knowledge of universal numbering and Palmer quadrant notation systems.</li> <li>K28. Knowledge of methods for charting oral conditions.</li> </ul>

	Section		Tasks	Knowledge Statements
2A.	Treatment Preparation (15%)	T8.	Identify types and stages of treatment to prepare for dental procedures.	<ul> <li>K29. Knowledge of types and stages of dental treatment.</li> <li>K30. Knowledge of methods for preparing tray and equipment set-up for dental procedures.</li> <li>K31. Knowledge of types of materials used in dental procedures.</li> </ul>
		T9.	Prepare instruments to facilitate use in dental treatment.	<ul><li>K32. Knowledge of types of dental instruments and their associated uses.</li><li>K33. Knowledge of methods for preparing, handling, and storing dental instruments.</li></ul>
		T10.	Select components and materials to be used in dental treatment.	<ul> <li>K34. Knowledge of types of dental components and their functions.</li> <li>K35. Knowledge of types of materials used in dental treatment and their functions.</li> <li>K36. Knowledge of methods for selecting dental components and materials.</li> </ul>
			Isolate oral cavity to preserve integrity of restorative area.	K37. Knowledge of types of materials used to isolate restorative area. K38. Knowledge of types of techniques for isolating restorative area. K39. Knowledge of methods for isolating tooth or cavity preparations.
		T12.	Place bases and liners to reduce irritation and microleakage.	K40. Knowledge of types of base and liner materials and their uses. K41. Knowledge of procedures for applying or placing bases and liners.
		T13.	Place matrices and wedges to create a seal and form contacts during restorative procedures.	<ul> <li>K42. Knowledge of types of wedges and their uses.</li> <li>K43. Knowledge of techniques for placing wedges during restorative procedures.</li> <li>K44. Knowledge of types of matrix bands and their uses.</li> <li>K45. Knowledge of techniques for placing matrix bands during restorative procedures.</li> </ul>

	Section	Tasks	Knowledge Statements
Ind Res	Direct and Indirect Restorations (10%)	T14. Place temporary filling material to protect tooth during transitional treatment.	<ul> <li>K46. Knowledge of types of temporary filling materials and their uses.</li> <li>K47. Knowledge of techniques to mix, place, and contour temporary filing material.</li> </ul>
		T15. Apply etchant to prepare tooth surface for direct and indirect restorations.	<ul> <li>K48. Knowledge of types of etchants and their uses.</li> <li>K49. Knowledge of indications and contraindications for the use of etching agents.</li> <li>K50. Knowledge of techniques for applying etchants.</li> </ul>
		T16. Place bonding agent to prepare tooth surface for restoration.	<ul> <li>K51. Knowledge of types of bonding agents and their use.</li> <li>K52. Knowledge of indications and contraindications for the use of bonding agents.</li> <li>K53. Knowledge of techniques for applying bonding agents.</li> </ul>
		T17. Fabricate indirect provisional restorations to protect tooth during restoration processes	<ul><li>K54. Knowledge of types of materials used for indirect provisional restorations.</li><li>K55. Knowledge of techniques for fabricating indirect provisional restorations.</li></ul>
		T18. Adjust indirect provisional restorations to ensure proper fit.	<ul> <li>K56. Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of indirect provisional restorations.</li> <li>K57. Knowledge of techniques for adjusting indirect provisional restorations.</li> </ul>
		T19. Cement indirect provisional restorations to provide coverage of tooth preparation.	<ul> <li>K58. Knowledge of types of cements and their use.</li> <li>K59. Knowledge of techniques for placing and removing indirect provisional restorations.</li> <li>K60. Knowledge of techniques for mixing provisional materials.</li> </ul>
		T20. Place and adjust direct provisional restorations to ensure proper fit.	<ul> <li>K61. Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of direct provisional restorations.</li> <li>K62. Knowledge of techniques for adjusting direct provisional restorations</li> </ul>
		T21. Finish direct provisional restorations to provide a smooth surface or prevent irritation.	<ul><li>K63. Knowledge of techniques for finishing direct provisional restorations.</li><li>K64. Knowledge of the effects of improper or incomplete finishing of direct restorations.</li></ul>

T22. Remove excess cement from surfaces of teeth to prevent irritation.	<ul> <li>K65. Knowledge of instruments used to remove cement from teeth surfaces.</li> <li>K66. Knowledge of signs of irritation associated with residual cement.</li> </ul>
T23. Assist in the administration of nitrous oxide and oxygen to provide analgesia or sedation when ordered by a dentist.	<ul><li>K67. Knowledge of procedures for the use and care of equipment used to administer oxygen and nitrous oxide and oxygen.</li><li>K68. Knowledge of signs of medical emergencies associated with the use of nitrous oxide.</li></ul>

Section		Tasks		Knowledge Statements	
2C.	Preventative and Aesthetic Procedures (10%)	T24.	Perform coronal polishing to remove plaque and extrinsic stains from surfaces of teeth.	<ul> <li>K69. Knowledge of techniques for performing coronal polishing.</li> <li>K70. Knowledge of indications and contraindications for performing coronal polishing.</li> </ul>	
		T25.	Apply pit and fissure sealants to prevent dental caries.	<ul> <li>K71. Knowledge of types of pit and fissure sealants and their uses.</li> <li>K72. Knowledge of factors that impact retention of pit and fissure sealants.</li> <li>K73. Knowledge of indications and contraindications for using pit and fissure sealants.</li> <li>K74. Knowledge of techniques for applying pit and fissure sealants.</li> </ul>	
		T26.	Perform in-office bleaching to whiten teeth.	<ul><li>K75. Knowledge of types of bleaching agents and their use.</li><li>K76. Knowledge of indications and contraindications for using bleaching agents.</li><li>K77. Knowledge of techniques for applying bleaching agents.</li></ul>	

Sec	ction	Tasks	Knowledge Statements
2D. Patie Educ (10%	ucation	Educate patients about oral hygiene to promote dental health.	<ul><li>K78. Knowledge of the effects of poor oral hygiene and care related to dental health.</li><li>K79. Knowledge of methods for educating patients about oral hygiene.</li></ul>
	T28	. Provide patients with pre- and post- treatment instructions to promote patient compliance.	<ul> <li>K80. Knowledge of symptoms patients may encounter after treatment.</li> <li>K81. Knowledge of techniques for pain management after treatment.</li> <li>K82. Knowledge of methods for educating patients about pre- and post-treatment instructions.</li> </ul>
	T29	. Educate patients about dietary recommendations to promote oral health.	K83. Knowledge of the effects of foods and beverages on oral health. K84. Knowledge of methods for educating patients about dietary recommendations related to oral health and dental treatment.

	Section		Tasks	Knowledge Statements
2E.	Specialty Procedures	T30.	Test pulp vitality to identify baseline pulp health or level of pain.	K85. Knowledge of the relationship between pain responses and pulp vitality.
	(5%)			K86. Knowledge of methods for testing pulp vitality.
		T31.	Dry canals with absorbent points to assist with endodontic treatment.	K87. Knowledge of techniques for using absorbent points to dry canals.
		T32.	Place periodontal dressings to protect extraction and periodontal surgical sites.	<ul> <li>K88. Knowledge of types of periodontal dressings and their use.</li> <li>K89. Knowledge of the relationship between dressing medicaments and post-surgical healing.</li> <li>K90. Knowledge of signs of dry socket that require the attention of a</li> </ul>
				<ul> <li>K90. Knowledge of signs of any socker indirequire the difference of a dentist.</li> <li>K91. Knowledge of signs of infection or irritation associated with periodontal and surgical dressings.</li> <li>K92. Knowledge of techniques for applying dressings to surgical sites.</li> </ul>
		T33.	Place archwires to move teeth to dentist's prescribed position.	<ul> <li>K92. Knowledge of the types of archwires and their functions.</li> <li>K94. Knowledge of methods for placing archwires.</li> <li>K95. Knowledge of types of instruments used to place orthodontic archwires.</li> </ul>
		T34.	Place ligatures to connect archwires to orthodontic brackets.	<ul> <li>K96. Knowledge of types of ligatures and their functions.</li> <li>K97. Knowledge of techniques for placing ligatures based on dentist's instructions.</li> <li>K98. Knowledge of types of instruments used to place orthodontic ligatures.</li> </ul>
		T35.	Remove post-extraction and post-surgical sutures as directed by dentist.	K99. Knowledge of techniques for removing post-surgical sutures.
		T36.	Adjust removable prosthetic appliances extraorally to verify fit or retention.	<ul><li>K100. Knowledge of types of removable prosthetic appliances and their functions.</li><li>K101. Knowledge of methods for verifying removable prosthetic</li></ul>
				appliance fit or retention. K102. Knowledge of techniques for adjusting prosthetic appliances extraorally.

Content Area 3. INFECTION CONTROL AND HEALTH AND SAFETY (25%). This area assesses the candidate's knowledge of maintaining a safe and sanitary work environment and to adhere to infection control protocols and standard precautions.

Section		Tasks			Associated Knowledge Statements
3A.	<ul> <li>Patient Safety and Prevention of Disease Transmission (15%)</li> </ul>	T37.	Provide patient with safety precautions to ensure protection during dental treatment.	K104.	Knowledge of methods for using safety precautions with patients. Knowledge of types of safety equipment for protecting patients. Knowledge of techniques for protecting patients during diagnostic tests and imaging.
		T38.	Use pre-procedural barriers, air evacuation systems, and rinse techniques to prevent the spread of disease through aerosol, droplets, and splatter.		Knowledge of equipment for providing protective barriers and air evacuation systems. Knowledge of techniques for using barriers, air evacuation systems, and rinses. Knowledge of types of infectious diseases and their modes of transmission.
		T39.	Sanitize hands according to protocols to prevent the transmission of diseases.		Knowledge of techniques for sanitizing hands during dental treatments. Knowledge of types of infectious diseases and their modes of transmission.
		T40.	Wear personal protective equipment to prevent contamination.		Knowledge of techniques for using personal protective equipment. Knowledge of types of infectious diseases and their modes of transmission.
		T41.	Adhere to infectious disease prevention protocols to reduce risk of disease transmission.	K112.	Knowledge of techniques for preventing the spread of infectious diseases. Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious diseases. Knowledge of types of infectious diseases and their modes of transmission.
		T42.	Identify signs of medical emergencies to address situations that require immediate intervention.	K114. K115. c K116.	Knowledge of signs of allergic reaction or anaphylactic shock. Knowledge of signs of medical crisis or emergency. Knowledge of methods for obtaining emergency medical issistance. Knowledge of methods for administering emergency first aid and CPR.

Content Area 3. INFECTION CONTROL AND HEALTH AND SAFETY (25%), continued. This area assesses the candidate's knowledge of maintaining a safe and sanitary work environment and to adhere to infection control protocols and standard precautions.

	Section		Tasks	Associated Knowledge Statements
3B.	Equipment Disinfection and Cross- Contamination Prevention (10%)	Τ43.	Disinfect treatment area and equipment to prepare for or complete dental treatment.	<ul> <li>K117. Knowledge of methods for disinfecting treatment areas and equipment.</li> <li>K118. Knowledge of barrier techniques for protecting treatment areas and equipment.</li> <li>K119. Knowledge of methods for monitoring dental waterlines and water quality.</li> <li>K120. Knowledge of methods for disinfecting evacuation lines.</li> <li>K121. Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious diseases.</li> </ul>
		T44.	Sterilize instruments to prevent patient-to- patient disease transmission.	<ul> <li>K122. Knowledge of types of sterilization processes and related equipment.</li> <li>K123. Knowledge of procedures for sterilizing instruments.</li> <li>K124. Knowledge of techniques for storing instruments before and after sterilization.</li> </ul>
		T45.	Adhere to disposal safety protocols to discard of contaminated materials or sharps.	<ul><li>K125. Knowledge of techniques for the safe disposal of contaminated materials.</li><li>K126. Knowledge of techniques for the safe disposal of sharps.</li></ul>

Content Area 4. LAWS AND REGULATIONS (10%). This area assesses the candidate's knowledge of laws and regulations regarding licensing requirements, scope of practice, professional conduct, and professional responsibilities.

	Tasks	Associated Knowledge Statements
T4	46. Comply with laws regarding consent to respect patients' right to make informed treatment decisions.	K127. Knowledge of laws regarding patient consent.
Ţ⊿	47. Comply with Health Insurance Portability and Accountability Act (HIPAA) laws to respect patient right to privacy in dental health care delivery.	K128.Knowledge of laws related to the Health Insurance Portability and Accountability Act (HIPAA).
T4	<ol> <li>Report instances of suspected abuse, neglect, and exploitation to protect vulnerable populations.</li> </ol>	K129.Knowledge of signs of child abuse or neglect. K130.Knowledge of signs of dependent adult abuse, neglect, or exploitation. K131.Knowledge of signs of elder adult abuse, neglect, or exploitation. K132.Knowledge of methods for reporting child, elder, or dependent adult abuse.
T4	<ol> <li>Comply with laws about record-keeping to document, store, and dispose of patient charts or records.</li> </ol>	<ul><li>K133.Knowledge of legal standards for patient record-keeping and documentation.</li><li>K134.Knowledge of laws regarding the storage and disposal of patient charts or records.</li></ul>
T.	50. Comply with laws about professional conduct to maintain professional integrity.	K135.Knowledge of laws regarding professional conduct.
T.	51. Comply with laws about scope of practice to maintain professional boundaries.	K136.Knowledge of laws regarding scope of practice.

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## CHAPTER 6 | CONCLUSION

The OA of the RDA profession described in this report provides a comprehensive description of current practice in California. The procedures employed to perform the OA were based upon a content validation strategy to ensure that the results accurately represent RDA practice. Results of this OA provide information regarding current practice that can be used to develop valid and legally defensible examinations and to make job-related decisions regarding occupational licensure.

Use of the California Registered Dental Assistant Written Examination outline contained in this report ensures that the Board is compliant with BPC § 139.

This report provides all documentation necessary to verify that the analysis has been completed in accordance with legal, professional, and technical standards. This page intentionally left blank for reproduction purposes.

APPENDIX A | RESPONDENTS BY REGION

### LOS ANGELES COUNTY AND VICINITY

County of Practice	Frequency
Los Angeles	115
Orange	53
TOTAL	168

#### NORTH COAST

Frequency	
2	
6	
4	
25	
37	
	2 6 4 25

#### RIVERSIDE AND VICINITY

County of Practice	Frequency	
Riverside	53	
San Bernardino	32	
TOTAL	85	

#### SACRAMENTO VALLEY

County of Practice	Frequency	
Butte	15	
Colusa	0	
Glenn	0	
Lake	1	
Sacramento	46	
Sutter	2	
Yolo	7	
Yuba	2	
TOTAL	73	

### SAN DIEGO COUNTY AND VICINITY

County of Practice	Frequency	
Imperial	2	
San Diego	93	
TOTAL	95	

### SAN FRANCISCO BAY AREA

County of Practice	Frequency	
Alameda	36	
Contra Costa	21	
Marin	9	
Napa	8	
San Francisco	37	
San Mateo	18	
Santa Clara	48	
Santa Cruz	8	
Solano	7	
TOTAL	192	

### SAN JOAQUIN VALLEY

County of Practice	Frequency	
Fresno	38	
Kern	17	
Kings	4	
Madera	3	
Merced	7	
San Joaquin	28	
Stanislaus	14	
Tulare	13	
TOTAL	124	

### SHASTA-CASCADE

	_	<u> </u>
County of Practice	Frequency	
Lassen	3	
Plumas	1	
Shasta	11	
Siskiyou	2	
Tehama	3	
Trinity	0	
TOTAL	20	

#### SIERRA MOUNTAIN VALLEY

County of Practice	Frequency	
Alpine	0	
Amador	1	
Calaveras	1	
El Dorado	8	
Inyo	0	
Mariposa	0	
Nevada	4	
Placer	11	
Sierra	0	
Tuolumne	5	
TOTAL	30	

#### SOUTH COAST AND CENTRAL COAST

County of Practice	Frequency	
Monterey	7	
San Benito	0	
San Luis Obispo	5	
Santa Barbara	16	
Ventura	15	
TOTAL	43	

APPENDIX B | CRITICALITY INDICES FOR ALL TASKS BY CONTENT AREA

Content Area	I: Assessment	and Diagnostic	Records
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Task Number	Tasks	Mean Frequency	Mean Importance	Task Criticality Index
T1.	Review patient medical and dental history to identify conditions that may affect dental treatment.	5.29	5.54	30.14
T6.	Prepare patient for radiographs or cone-beam computed tomography (CBCT) to assist the dentist in determining oral conditions.	5.19	5.34	29.41
Τ7.	Chart evaluation information to document oral conditions related to treatment.	5.19	5.38	29.20
T3.	Perform mouth-mirror inspection of oral cavity to identify obvious lesions, existing restorations, and missing teeth.	4.32	4.73	22.41
T2.	Obtain patient's blood pressure and vital signs to determine current status.	4.26	4.71	22.30
T5.	Obtain intraoral images of patient's mouth and dentition to assist with milling of computer-aided design (CAD) restorations.	3.69	3.99	18.95
T4.	Use caries detection materials and devices to gather information for dentist.	2.81	3.39	12.52

Content Area 2: Dental Procedures

Task Number	Tasks	Mean Importance	Mean Frequency	Task Criticality Index
Т9.	Prepare instruments to facilitate use in dental treatment.	5.66	5.64	32.20
T28.	Provide patients with pre- and post-treatment instructions to promote patient compliance.	5.38	5.44	29.95
T10.	Select components and materials to be used in dental treatment.	5.31	5.39	29.54
T27.	Educate patients about oral hygiene to promote dental health.	5.23	5.38	29.00
T8.	Identify types and stages of treatment to prepare for dental procedures.	5.07	5.17	27.48
T29.	Educate patients about dietary recommendations to promote oral health.	4.45	4.84	23.39
T11.	Isolate oral cavity to preserve integrity of restorative area.	4.27	4.83	23.27
T24.	Perform coronal polishing to remove plaque and extrinsic stains from surfaces of teeth.	4.42	4.76	23.12
T22.	Remove excess cement from surfaces of teeth to prevent irritation.	4.02	4.74	22.14
T17.	Fabricate indirect provisional restorations to protect tooth during restoration processes.	3.56	4.33	19.14
T19.	Cement indirect provisional restorations to provide coverage of tooth preparation.	3.52	4.32	18.92
T18.	Adjust indirect provisional restorations to ensure proper fit.	3.45	4.29	18.49
T15.	Apply etchant to prepare tooth surface for direct and indirect restorations.	3.17	4.16	16.58

# Content Area 2: Dental Procedures (continued)

Task Number	Tasks	Mean Importance	Mean Frequency	Task Criticality Index
T25.	Apply pit and fissure sealants to prevent dental caries.	3.15	4.09	16.32
T20.	Place and adjust direct provisional restorations to ensure proper fit.	2.99	3.97	15.68
T13.	Place matrices and wedges to create a seal and form contacts during restorative procedures.	2.94	4.10	15.38
T21.	Finish direct provisional restorations to provide a smooth surface and prevent irritation.	2.92	3.92	15.35
T16.	Place bonding agent to prepare tooth surface for restoration	2.88	4.01	15.26
T14.	Place temporary filling material to protect tooth during transitional treatment.	2.99	3.94	14.58
T12.	Place bases and liners to reduce irritation and micro-leakage.	2.67	3.83	13.34
T23.	Assist in the administration of nitrous oxide and oxygen to provide analgesia or sedation when ordered by a dentist.	2.68	3.79	13.33
T35.	Remove post-extraction and post-surgical sutures as directed by dentist.	2.44	3.57	11.42
T36.	Adjust removable prosthetic appliances extraorally to verify fit or retention.	2.37	3.58	11.48
T30.	Test pulp vitality to identify baseline pulp health or level of pain.	2.06	3.35	9.29
T26.	Perform in-office bleaching to whiten teeth.	2.27	2.84	9.02

T33.	Place archwires to move teeth to dentist's prescribed position.	1.94	2.89	8.65
T34.	Place ligatures to connect archwires to orthodontic brackets.	1.93	2.86	8.64
T31.	Dry canals with absorbent points to assist with endodontic treatment.	1.86	3.25	8.38
T32.	Place periodontal dressings to protect extraction and periodontal surgical sites.	1.80	3.04	7.70

Task Number	Tasks	Mean Importance	Mean Frequency	Task Criticality Index
T40.	Wear personal protective equipment to prevent contamination.	5.84	5.89	34.52
T44.	Sterilize instruments to prevent patient-to- patient disease transmission.	5.78	5.93	34.42
T43.	Disinfect treatment area and equipment to prepare for or complete dental treatment.	5.82	5.89	34.38
T39.	Sanitize hands according to protocols to prevent the transmission of diseases.	5.83	5.87	34.35
T41.	Adhere to infectious disease prevention protocols to reduce risk of disease transmission.	5.80	5.86	34.29
T45.	Adhere to disposal safety protocols to discard of contaminated materials or sharps.	5.79	5.89	34.25
T38.	Use pre-procedural barriers, air evacuation systems, and rinse techniques to prevent the spread of disease through aerosol, droplets, and splatter.	5.63	5.70	32.59
T37.	Provide patient with safety precautions to ensure protection during dental treatment.	5.36	5.50	30.20
T42.	Identify signs of medical emergencies to address situations that require immediate intervention.	4.80	5.62	27.85

Content Area 4: Laws and Regulations

Task Number	Task Statement	Mean Importance	Mean Frequency	Task Criticality Index
T47.	Comply with Health Insurance Portability and Accountability Act (HIPAA) regulations to provide services that protects patients' private health information.	5.64	5.73	32.82
T46.	Comply with laws about consent to respect patients' right to make informed treatment decisions.	5.62	5.70	32.54
T50.	Comply with laws about professional conduct to maintain professional integrity.	5.60	5.69	32.24
T51.	Comply with laws about scope of practice to maintain professional boundaries.	5.59	5.68	32.08
T49.	Comply with laws about record-keeping to document, store, and dispose of patient charts and records.	5.29	5.57	30.55
T48.	Report instances of suspected abuse, neglect, and exploitation to protect vulnerable populations.	3.26	5.40	18.59

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# **APPENDIX C** | KNOWLEDGE STATEMENT MEAN IMPORTANCE RATINGS BY CONTENT AREA

Content Area 1: A	Assessment and	Diagnostic Records
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Knowledge Number	Knowledge Statement	Importance
КЗ.	Knowledge of types of medical conditions that may require premedication for dental treatment.	4.5403
K4.	Knowledge of the relationship between allergic reactions or sensitivities and dental materials.	4.5368
K5.	Knowledge of methods for gathering information about patient medical and dental history.	4.4598
K23.	Knowledge of procedures for taking digital or conventional radiographs.	4.4217
K1.	Knowledge of common medical conditions and medications that may affect treatment.	4.3521
K25.	Knowledge of factors that impact radiographic imaging and quality.	4.3383
K24.	Knowledge of methods for patient management during radiograph procedures.	4.3379
K10.	Knowledge of types of basic oral structures and dental anatomy.	4.3303
K22.	Knowledge of types of radiographic imaging.	4.326
К2.	Knowledge of types of oral health conditions that may affect treatment.	4.3149
K28.	Knowledge of methods for charting oral conditions.	4.2995
K26.	Knowledge of types of dental terminology and morphology.	4.2846
K7.	Knowledge of signs of elevated or dangerous blood pressure readings.	4.2454
K19.	Knowledge of techniques for taking intraoral diagnostic imaging.	4.2287
К20.	Knowledge of techniques for patient management during imaging.	4.2258
K21.	Knowledge of factors that impact digital imaging and quality.	4.2206

Knowledge Number	Knowledge Statement	Importance
K12.	Knowledge of signs of plaque, calculus, and stain formations in the oral cavity.	4.1325
K27.	Knowledge of universal numbering and Palmer quadrant notation systems.	4.105
К9.	Knowledge of techniques for taking patient blood pressure and vitals.	4.0403
K6.	Knowledge of standards regarding blood pressure ranges based on patient age.	4.0345
K8.	Knowledge of vital signs that should be collected before treatment.	4.0126
K14.	Knowledge of the effects of substance use on oral health.	3.9586
K16.	Knowledge of methods for performing mouth-mirror inspections.	3.947
K13.	Knowledge of the effects of dietary habits on oral health.	3.9251
K15.	Knowledge of the effects of smoking or tobacco use on oral health.	3.9138
K11.	Knowledge of types of occlusions and malocclusions.	3.7724
K17.	Knowledge of types of materials and devices for detecting caries.	3.4044
K18.	Knowledge of procedures for using caries detection materials and devices.	3.2673

# Content Area 1: Assessment and Diagnostic Records (continued)

Content Area 2: Dental Procedures

Knowledge Number	Knowledge Statement	Importance
K105.	Knowledge of methods for using safety precautions with patients.	4.6813
K33.	Knowledge of methods for preparing, handling, and storing dental instruments.	4.5322
К30.	Knowledge of methods for preparing tray and equipment set-up for dental procedures.	4.4511
K32.	Knowledge of types of dental instruments and their associated uses.	4.4388
K31.	Knowledge of types of materials used in dental procedures.	4.432
K84.	Knowledge of methods for educating patients about pre- and post-treatment instructions.	4.4069
K82.	Knowledge of symptoms patients may encounter after treatment.	4.3661
K35.	Knowledge of types of materials used in dental treatment and their functions.	4.3475
K80.	Knowledge of the effects of poor oral hygiene and care related to dental health.	4.3383
K81.	Knowledge of methods for educating patients about oral hygiene.	4.3383
K34.	Knowledge of types of dental components and their functions.	4.3184
K83.	Knowledge of techniques for pain management after treatment.	4.2839
K29.	Knowledge of types and stages of dental treatment.	4.2184
КЗ6.	Knowledge of methods for selecting dental components and materials.	4.2106
K71.	Knowledge of techniques for performing coronal polishing.	4.1371
K85.	Knowledge of the effects of foods and beverages on oral health.	4.107
K70.	Knowledge of risks associated with improper coronal polishing.	4.1001

# Content Area 2: Dental Procedures (continued)

Knowledge Number	Knowledge Statement	Importance
K72.	Knowledge of indications and contraindications for performing coronal polishing.	4.0995
K37.	Knowledge of types of materials used to isolate restorative area.	4.0242
K67.	Knowledge of signs of irritation associated with residual cement.	4.0185
K66.	Knowledge of instruments used to remove cement from teeth surfaces.	4.0173
K86.	Knowledge of methods for educating patients about dietary recommendations related to oral health and dental treatment.	4.0104
K58.	Knowledge of types of cements and their use.	3.9966
K38.	Knowledge of types of techniques for isolating restorative area.	3.9724
K65.	Knowledge of techniques for removing cement from teeth surfaces and gingiva.	3.9596
K48.	Knowledge of types of etchants and their uses.	3.9563
K51.	Knowledge of types of bonding agents and their uses.	3.9551
K49.	Knowledge of indications and contraindications for the use of etching agents.	3.947
K39.	Knowledge of methods for isolating tooth or cavity preparations.	3.9412
K50.	Knowledge of techniques for applying etchants.	3.923
K52.	Knowledge of indications and contraindications for the use of bonding agents.	3.8917
K60.	Knowledge of techniques for mixing provisional materials.	3.8902
K53.	Knowledge of techniques for applying bonding agents.	3.8194
K56.	Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of indirect provisional restorations.	3.7154
K40.	Knowledge of types of base and liner materials and their uses.	3.7085
K44.	Knowledge of types of matrix bands and their uses.	3.6843

## Content Area 2: Dental Procedures (continued)

Knowledge Number	Knowledge Statement	Importance
K74.	Knowledge of factors that impact retention of pit and fissure sealants.	3.6644
K46.	Knowledge of types of temporary filling materials and their uses.	3.6459
K76.	Knowledge of techniques for applying pit and fissure sealants.	3.6417
K75.	Knowledge of indications and contraindications for using pit and fissure sealants.	3.6394
K69.	Knowledge of signs of medical emergencies associated with the use of nitrous oxide.	3.6382
K47.	Knowledge of techniques to mix, place, and contour temporary filing material.	3.6374
K55.	Knowledge of techniques for fabricating indirect provisional restorations.	3.6282
K59.	Knowledge of techniques for placing and removing indirect provisional restorations.	3.6189
K73.	Knowledge of types of pit and fissure sealants and their uses.	3.6132
K57.	Knowledge of techniques for adjusting indirect provisional restorations.	3.609
K54.	Knowledge of types of materials used for indirect provisional restorations.	
K61.	Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of direct provisional restorations	3.591
K42.	Knowledge of types of wedges and their uses.	3.5899
К92.	Knowledge of signs of dry socket that require the attention of a dentist.	3.5823
K41.	Knowledge of procedures for applying or placing bases and liners.	3.5449
K45.	Knowledge of techniques for placing matrix bands during restorative procedures.	3.5346
K68.	Knowledge of procedures for the use and care of equipment used to administer oxygen and nitrous oxide.	3.5219
K87.	Knowledge of the relationship between pain responses and pulp vitality.	3.5218

K64.	Knowledge of the effects of improper or incomplete finishing of direct restorations.	3.4867
K43.	Knowledge of techniques for placing wedges during restorative procedures.	3.4689
Content Are	a 2: Dental Procedures (continued)	
Knowledge Number	Knowledge Statement	Importance
K62.	Knowledge of techniques for adjusting direct provisional restorations.	3.4025
K78.	Knowledge of indications and contraindications for using bleaching agents.	3.3779
K63.	Knowledge of techniques for finishing direct provisional restorations.	3.3702
K102.	Knowledge of types of removable prosthetic appliances and their functions.	3.3537
K79.	Knowledge of techniques for applying bleaching agents.	3.3449
K77.	Knowledge of types of bleaching agents and their uses.	3.3102
K103.	Knowledge of methods for verifying removable prosthetic appliance fit or retention.	3.2111
K88.	Knowledge of methods for testing pulp vitality.	3.1905
К93.	Knowledge of signs of infection or irritation associated with periodontal and surgical dressings.	3.1038
K101.	Knowledge of techniques for removing post-surgical sutures.	3.0634
K104.	Knowledge of techniques for adjusting prosthetic appliances extraorally.	3.0473
К91.	Knowledge of the relationship between dressing medicaments and post-surgical healing.	2.8857
K89.	Knowledge of techniques for using absorbent points to dry canals.	2.8422
К94.	Knowledge of techniques for applying dressings to surgical sites.	2.8397
К90.	Knowledge of types of periodontal dressings and their uses.	2.6178
К95.	Knowledge of the types of archwires and their functions.	2.4412
К96.	Knowledge of methods for placing archwires.	2.4129

K97.	Knowledge of types of instruments used to place orthodontic archwires.	2.4046
K99.	Knowledge of techniques for placing ligatures based on dentist's instructions.	2.4007
K100.	Knowledge of types of instruments used to place orthodontic ligatures.	2.3956
K98.	Knowledge of types of ligatures and their functions.	2.391

## Content Area 3: Infection Control and Health and Safety

Knowledge Number	Knowledge Statement	Importance
K113.	Knowledge of techniques for preventing the spread of infectious diseases.	4.8062
K114.	Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious diseases.	4.7829
K118.	Knowledge of methods for administering emergency first aid and CPR.	4.7829
K125.	Knowledge of procedures for sterilizing instruments.	4.7783
K128.	Knowledge of techniques for the safe disposal of sharps.	4.7746
K119.	Knowledge of methods for disinfecting treatment areas and equipment.	4.7699
K123.	Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious diseases.	4.7564
K112.	Knowledge of techniques for using personal protective equipment.	4.7514
K127.	Knowledge of techniques for the safe disposal of contaminated materials.	4.7503
K117.	Knowledge of methods for obtaining emergency medical assistance.	4.739
K124.	Knowledge of types of sterilization processes and related equipment.	4.7344
K111.	Knowledge of techniques for sanitizing hands during dental treatments.	4.7249
K116.	Knowledge of signs of medical crisis or emergency.	4.7232
K126.	Knowledge of techniques for storing instruments before and after sterilization.	4.7225
K120.	Knowledge of barrier techniques for protecting treatment areas and equipment.	4.7171

# Content Area 3: Infection Control and Health and Safety (continued)

Knowledge Number	Knowledge Statement	Importance
K110.	Knowledge of types of infectious diseases and their modes of transmission.	4.6933
K115.	Knowledge of signs of allergic reaction or anaphylactic shock.	4.6848
K106.	Knowledge of types of safety equipment for protecting patients.	4.6724
K122.	Knowledge of methods for disinfecting evacuation lines.	4.6713
K121.	Knowledge of methods for monitoring dental waterlines and water quality.	4.6362
K107.	Knowledge of techniques for protecting patients during diagnostic tests and imaging.	4.6286
K109.	Knowledge of techniques for using barriers, air evacuation systems, and rinses.	4.6062
K108.	Knowledge of equipment for providing protective barriers and air evacuation systems.	4.5965
K129.	Knowledge of laws regarding patient consent.	4.5294

Content Area 4: Laws and Regulations

Knowledge Number	Knowledge Statement	Importance
K137.	Knowledge of laws regarding professional conduct.	4.5517
K138.	Knowledge of laws regarding scope of practice.	4.5218
K130.	Knowledge of laws related to the Health Insurance Portability and Accountability Act (HIPAA).	4.5184
K135.	Knowledge of legal standards for patient record-keeping and documentation.	4.5138
K131.	Knowledge of signs of child abuse or neglect.	4.4407
K134.	Knowledge of methods for reporting child, elder, or dependent adult abuse.	4.4299
K132.	Knowledge of signs of dependent adult abuse, neglect, or exploitation.	4.3786
К136.	Knowledge of laws about the storage and disposal of patient charts and records.	4.3713
K133.	Knowledge of signs of elder adult abuse, neglect, or exploitation.	4.3191

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APPENDIX D | EMAIL INVITATION TO PRACTITIONERS

Dear Registered Dental Assistants:

Thank you for opening this online survey. You have been selected to participate in a study of the RDA profession by the Dental Board of California (DBC). The DBC is collecting information on the tasks performed by RDAs in California, the importance of the tasks, and the knowledge needed to perform the tasks safely and effectively. We will use this information to ensure that RDA licensing examinations reflect current practice in California.

We worked with a group of RDAs to develop a survey to capture this information. The survey should take less than an hour to complete.

For your convenience, you do not have to complete the survey in a single session. You can resume where you stopped as long as you reopen the survey from the same computer and use the same web browser. Before you exit, complete the page that you are on. The program will save responses only on completed pages. The weblink is available 24 hours a day, 7 days a week.

Your responses will be kept confidential. They will not be tied to your license or personal information. Individual responses will be combined with responses from other RDAs, and only group data will be analyzed.

If you have any questions or need assistance with the survey, please contact Professional Examination Services at with the Office of

To begin the survey, click "Next". Please submit the completed survey by Friday, January 20, 2023.

We welcome your feedback and appreciate your time!

Thank you!

Dental Board of California



Please do not forward this email as its survey link is unique to you.
<u>Privacy</u> | <u>Unsubscribe</u>

APPENDIX E | QUESTIONNAIRE



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY - GAVIN NEWSOM, GOVERNOR DENTAL BOARD OF CALIFORNIA 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815 P (916) 263-2300 F (916) 263-2140 | www.dbc.ca.gov



#### Dear RDA:

We are conducting an occupational analysis (OA) of the Registered Dental Assistant (RDA) profession in California. An OA is a comprehensive study of a profession. Using this survey, the Board will identify the tasks currently performed by licensed professionals, the importance of those tasks, and the knowledge required to perform them safely and competently.

With your help, the Board is surveying licensed RDA professionals who collectively represent the profession based on their geographic location, years of experience, and practice specialty.

The results of the OA will be used to update the description of practice that provides the basis for the California Registered Dental Assistant Written Examination.

The survey was developed by test specialists from the Office of Professional Examination Services (OPES) with the participation of licensed RDA professionals serving as subject matter experts (SMEs).

This survey does not need to be completed in a single session. You can exit the survey at any time and return to it later without losing your responses as long as you access the survey from the same computer using the same browser. The survey will save responses only from fully completed pages; responses to items on partially completed pages will not be saved.

We understand that your time is valuable. The survey is available online 24/7 and you can complete it at any time before the deadline of **January 20, 2023**.

If you need assistance, please contact at a @dca.ca.gov.

We value your contribution and appreciate your time!

Respectfully,

Tracy Monte

Tracy Montez, Ph.D. Executive Officer



#### 2. Part I - Personal Data

### Complete this survey only if you currently hold a license and are working as a Registered Dental Assistant (RDA) in California.

The DBC recognizes that every RDA may not perform all of the tasks and use all of the knowledge contained in this survey. However, your participation is essential to the success of this study, and your contributions will help establish standards for safe and effective RDA practice in the State of California.

The information you provide here is voluntary and confidential. It will be treated as personal information subject to the Information Practices Act (Civil Code section 1798 et seq.) and will be used only for the purpose of analyzing the data from this survey to generate a demographic profile of RDAs practicing in California.

\* 1. Are you currently licensed and practicing as a Registered Dental Assistant (RDA) in California?

-	
	Voc
	res
_	

No



#### 3. Part I - Personal Data

#### 2. How long have you held an RDA license in California?

- Fewer than 12 months
- 1-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- O More than 20 years

# 3. How long did you work as an unlicensed dental assistant before obtaining your RDA license?

- Not applicable (N/A)
- Fewer than 12 months
- 1-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- More than 20 years

# 4. Which of the following licenses or certificates do you possess in addition to your RDA license? (Select all that apply.)

Not applicable (N/A)
 Coronal Polishing Certificate
 Dental Sedation Assistant Permit
 Orthodontic Assistant Permit
 Pit and Fissure Sealants Certificate
 Ultrasonic Scaling Certificate
 Radiation Safety Certificate

#### Other (please specify)

#### 5. How would you describe your primary work setting?

- Private dental practice with one dentist
- Private dental practice with two or more dentists
- Specialty dental practice (i.e., oral surgery, orthodontics, endodontics)
- Public health dentistry
- Dental school clinic
- Military

>

Other (please specify)

#### 6. How would you describe the dental practice in your primary work setting?

- General dentistry
- Orthodontic Dentistry
- C Endodontic dentistry
- O Periodontic dentistry
- O Pedodontic dentistry
- O Prosthodontic dentistry
- Oral surgery
- >
  - Other (please specify)



4. Part I - Personal Data

7. How many	unlicensed denta	l assistants v	work in your	primary work s	etting?
0					

- 1 ○ 2-3 ○ 4-5
- More than 5

8. How many other licensed RDAs work in your primary work setting (not including yourself)?

- 0 🔾
- 01
- 0 2-3
- 0 4-5
- More than 5

9. How many licensed RDAEFs work in your primary work setting?

- 0
- 01
- 0 2-3
- 0 4-5
- O More than 5

10. What is the population of the location of your primary work setting?

- Urban (more than 50,000)
- Rural (fewer than 50,000)



5. Part I - Personal Data

#### 11. In what California county do you perform the majority of your work?

🔵 Alameda	🔘 Marin		🔵 San Mateo
Alpine	O Maripo	osa	🔵 Santa Barbara
Amador	O Mendo	ocino	🔵 Santa Clara
O Butte	O Merce	d	🔵 Santa Cruz
Calaveras	O Modoc	:	🔾 Shasta
🔿 Colusa	O Mono		🔵 Sierra
🔿 Contra Costa	O Monte	rey	🔵 Siskiyou
O Del Norte	🔿 Napa		🔵 Solano
C El Dorado	O Nevad	a	🔵 Sonoma
O Fresno	Orang	e	◯ Stanislaus
Glenn	O Placer		◯ Sutter
⊖ Humboldt	O Pluma:	S	🔵 Tehama
O Imperial	O Riversi	ide	Trinity
🔿 Inyo	🔿 Sacrar	mento	<ul> <li>Tulare</li> </ul>
◯ Kern	🔵 San Be	enito	Tuolumne
◯ Kings	🔵 San Be	ernardino	◯ Ventura
🔵 Lake	🔵 San Di	ego	
CLassen	🔵 San Fr	ancisco	🔵 Yuba
O Los Angeles	🔵 San Jo	aquin	
O Madera	🔵 San Lu	uis Obispo	



#### 6. Part II - Task Ratings

#### INSTRUCTIONS FOR RATING TASK STATEMENTS

In this part of the questionnaire you will be presented with 51 task statements. Please rate each task as it relates to your <u>current practice</u> as an RDA using the

**Frequency** and **Importance** scales displayed below. Your frequency and importance ratings should be separate and independent ratings. Therefore, the ratings you assign using one rating scale should not influence the ratings that you assign using the other rating scale.

If the task is NOT a part of your current practice, rate the task as "0" (zero) frequency and "0" (zero) importance.

The boxes for rating the frequency and importance of each task have drop-down lists. Click on the "down" arrow for each list to see the rating, and then select the value based on your current practice.

#### FREQUENCY RATING SCALE

HOW OFTEN are these tasks performed in your current practice? Use the following scale to make your ratings.

0 - DOES NOT APPLY. I do not perform this task in my current practice.

 RARELY. This task is one of the tasks I perform least often in my current practice relative to other tasks I perform.

2 - SELDOM. I perform this task less often than most to other tasks I perform in my current practice.

3 - REGULARLY. I perform this task as often as other tasks I perform in my current practice.

4 - OFTEN. I perform this task more often than most other tasks I perform in my current practice.

5 - VERY OFTEN. This task is one of the tasks I perform most often in my current practice relative to other tasks I perform.

#### IMPORTANCE RATING SCALE

### HOW IMPORTANT are these tasks for effective performance of your current practice? Use the following scale to make your ratings.

0 - NOT IMPORTANT; DOES NOT APPLY TO MY PRACTICE. This task is not important to my current practice; I do not perform this task in my current practice.

 OF MINOR IMPORTANCE. This task is of minor importance relative to other tasks; it has the lowest priority of all the tasks I perform in my current practice.

2 - FAIRLY IMPORTANT. This task is fairly important for effective performance relative to other tasks; however, it does not have the priority of most other tasks I perform in my current practice.

3 - MODERATELY IMPORTANT. This task is moderately important for effective performance relative to other tasks; it has average priority of all the tasks I perform in my current practice.

4 - VERY IMPORTANT. This task is very important for effective performance relative to other tasks; it has a higher degree of priority than most other tasks I perform in my current practice.

5 - CRITICALLY IMPORTANT. This task is one of the most critical tasks I perform relative to other tasks; it has the highest degree of priority of all the tasks I perform in my current practice.



#### 7. Part II - Task Ratings

12. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your current practice (Importance).

#### Content Area 1. Assessment and Diagnostic Records

	Frequency	Importance
T1. Review patient medical and dental history to identify conditions that may affect dental treatment.	•	\$
T2. Obtain patient's blood pressure and vital signs to determine current status.	\$	\$
T3. Perform mouth-mirror inspection of oral cavity to identify obvious lesions, existing restorations, and missing teeth.	÷	\$
T4. Use caries detection materials and devices to gather information for dentist.	\$	\$
T5. Obtain intraoral images of patient's mouth and dentition to assist with milling of computer-aided design (CAD) restorations.		\$
T6. Prepare patient for radiographs or cone-beam computed tomography (CBCT) to assist the dentist in determining oral conditions.	\$	\$
T7. Chart evaluation information to document oral conditions related to treatment.	•	\$



#### 8. Part II - Task Ratings

# 13. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your current practice (Importance).

#### Content Area 2. Dental Procedures

	Frequency	Importance
<ol> <li>Identify types and stages of treatment to prepare for dental procedures.</li> </ol>	•	\$
T9. Prepare instruments to facilitate use in dental treatment.	\$	\$
T10. Select components and materials to be used in dental treatment.	•	\$
T11. Isolate oral cavity to preserve integrity of restorative area.	•	\$
T12. Place bases and liners to reduce irritation and micro-leakage.	•	\$
T13. Place matrices and wedges to create a seal and form contacts during restorative procedures.	•	\$
T14. Place temporary filling material to protect tooth during transitional treatment.	•	\$
T15. Apply etchant to prepare tooth surface for direct and indirect restorations.	\$	\$
T16. Place bonding agent to prepare tooth surface for restoration.		\$
T17. Fabricate indirect provisional restorations to protect tooth during restoration processes.	\$	\$
T18. Adjust indirect provisional restorations to ensure proper fit.		\$
T19. Cement indirect provisional restorations to provide coverage of tooth preparation.	\$	\$
T20. Place and adjust direct provisional restorations to ensure proper fit.	•	\$
T21. Finish direct provisional restorations to provide a smooth surface and prevent irritation.	•	\$
T22. Remove excess cement from surfaces of teeth to prevent irritation.	•	\$

T23. Assist in the administration of nitrous oxide and oxygen to provide analgesia or sedation when ordered by a dentist.	٠	\$
T24. Perform coronal polishing to remove plaque and extrinsic stains from surfaces of teeth.	•	\$
T25. Apply pit and fissure sealants to prevent dental caries.	•	\$
T26. Perform in-office bleaching to whiten teeth.	•	\$
T27. Educate patients about oral hygiene to promote dental health.	<b>\$</b>	\$
T28. Provide patients with pre- and post-treatment instructions to promote patient compliance.	\$	\$
T29. Educate patients about dietary recommendations to promote oral health.	•	\$
T30. Test pulp vitality to identify baseline pulp health or level of pain.	¢	\$
T31. Dry canals with absorbent points to assist with endodontic treatment.	•	\$
T32. Place periodontal dressings to protect extraction and periodontal surgical sites.	•	\$
T33. Place archwires to move teeth to dentist's prescribed position.	•	\$
T34. Place ligatures to connect archwires to orthodontic brackets.	\$	\$
T35. Remove post-extraction and post-surgical sutures as directed by dentist.	•	\$
T36. Adjust removable prosthetic appliances extraorally to verify fit or retention.	\$	\$



9. Part II - Task Ratings

14. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your current practice (Importance).

#### Content Area 3. Infection Control and Health and Safety

	Frequency	Importance
T37. Provide patient with safety precautions to ensure protection during dental treatment.	•	\$
T38. Use pre-procedural barriers, air evacuation systems, and rinse techniques to prevent the spread of disease through aerosol, droplets, and splatter.	•	\$
T39. Sanitize hands according to protocols to prevent the transmission of diseases.	\$	\$
T40. Wear personal protective equipment to prevent contamination.	<b>•</b>	\$
T41. Adhere to infectious disease prevention protocols to reduce risk of disease transmission.	•	\$
T42. Identify signs of medical emergencies to address situations that require immediate intervention.	•	\$
T43. Disinfect treatment area and equipment to prepare for or complete dental treatment.	•	\$
T44. Sterilize instruments to prevent patient-to-patient disease transmission.	\$	\$
T45. Adhere to disposal safety protocols to discard contaminated materials or sharps.	\$	\$



10. Part II - Task Ratings

15. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your current practice (Importance).

#### Content Area 4. Laws and Regulations

	Frequency	Importance
T46. Comply with laws about consent to respect patients' right to make informed treatment decisions.	\$	\$
T47. Comply with Health Insurance Portability and Accountability Act (HIPAA) regulations to provide services that protects patients' private health information.	\$	\$
T48. Report instances of suspected abuse, neglect, and exploitation to protect vulnerable populations.	\$	\$
T49. Comply with laws about record-keeping to document, store, and dispose of patient charts and records.	•	\$
T50. Comply with laws about professional conduct to maintain professional integrity.	\$	\$
T51. Comply with laws about scope of practice to maintain professional boundaries.	\$	\$



#### 11. Part III - Knowledge Ratings

#### INSTRUCTIONS FOR RATING KNOWLEDGE STATEMENTS

In this part of the questionnaire, you will be presented with 138 knowledge statements. Please rate each knowledge statement based on how important you believe that knowledge is to the effective performance of tasks in your current practice as an RDA.

If the knowledge does **NOT** apply to your current practice, rate the statement as "0" (zero) importance and go on to the next statement.

Please use the following importance scale to rate the knowledge statements:

#### IMPORTANCE SCALE

HOW IMPORTANT is this knowledge for effective performance of tasks in your current practice?

0 - NOT IMPORTANT; NOT REQUIRED. This knowledge does not apply to my current practice; it is not required for effective performance.

**1** - OF MINOR IMPORTANCE. This knowledge is of minor importance for effective performance; it is useful for some relatively minor parts of my current practice.

2 - FAIRLY IMPORTANT. This knowledge is fairly important for effective performance in some relatively major parts of my current practice.

3 - MODERATELY IMPORTANT. This knowledge is moderately important for effective performance in some relatively major parts of my current practice.

4 - VERY IMPORTANT. This knowledge is very important for effective performance of tasks in my current practice.

5 - CRITICALLY IMPORTANT. This knowledge is critically important for effective performance of tasks in my current practice.



12. Part III - Knowledge Ratings

### 16. How important is this knowledge for effective performance of tasks in your current practice?

Not

#### Content Area 1. Assessment and Diagnostic Records

	Not important; not required	Of minor	Fairly important	Moderately important		Critically important
K1. Knowledge of common medical conditions and medications that may affect treatment.	0	0	0	0	0	0
K2. Knowledge of types of oral health conditions that may affect treatment.	$\bigcirc$	0	0	0	0	0
K3. Knowledge of types of medical conditions that may require premedication for dental treatment.	0	0	0	0	0	0
K4. Knowledge of the relationship between allergic reactions or sensitivities and dental materials.	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	0	0
K5. Knowledge of methods for gathering information about patient medical and dental history.	0	0	0	0	0	0
K6. Knowledge of standards regarding blood pressure ranges based on patient age.	0	$\bigcirc$	0	$\circ$	0	0
K7. Knowledge of signs of elevated or dangerous blood pressure readings.	0	0	0	0	0	0
K8. Knowledge of vital signs that should be collected before treatment.	$\bigcirc$	0	$\bigcirc$	0	0	0
K9. Knowledge of techniques for taking patient blood pressure and vitals.	0	0	0	0	0	0
K10. Knowledge of types of basic oral structures and dental anatomy.	0	0	0	0	0	0
K11. Knowledge of types of occlusions and malocclusions.	0	$\bigcirc$	0	0	0	0

K12. Knowledge of signs of plaque, calculus, and stain formations in the oral cavity.	0	0	0	0	0	0
K13. Knowledge of the effects of dietary habits on oral health.	0	0	0	0	0	0
K14. Knowledge of the effects of substance use on oral health.	0	0	0	0	0	0
K15. Knowledge of the effects of smoking or tobacco use on oral health.	0	0	0	0	0	0
K16. Knowledge of methods for performing mouth-mirror inspections.	0	0	0	0	0	0
K17. Knowledge of types of materials and devices for detecting caries.	0	0	0	0	0	0
K18. Knowledge of procedures for using caries detection materials and devices.	0	0	0	0	0	0
K19. Knowledge of techniques for taking intraoral diagnostic imaging.	0	0	0	0	0	0
K20. Knowledge of techniques for patient management during imaging.	0	0	0	0	$\bigcirc$	0
K21. Knowledge of factors that impact digital imaging and quality.	0	0	0	0	0	0
K22. Knowledge of types of radiographic imaging.	0	0	0	0	0	0
K23. Knowledge of procedures for taking digital or conventional radiographs.	0	0	0	0	0	0
K24. Knowledge of methods for patient management during radiograph procedures.	0	0	0	0	0	0
K25. Knowledge of factors that impact radiographic imaging and quality.	0	0	0	0	0	0
K26. Knowledge of types of dental terminology and morphology.	0	0	0	0	0	0
K27. Knowledge of universal numbering and Palmer quadrant notation systems.	0	0	0	0	0	0
K28. Knowledge of methods for charting oral conditions.	0	0	0	0	0	0



13. Part III - Knowledge Ratings

### 17. How important is this knowledge for effective performance of tasks in your current practice?

#### Content Area 2. Dental Procedures

	Not important; not required	Of minor importance	Fairly important	Moderately important		Critically
K29. Knowledge of types and stages of dental treatment.	0	$\odot$	0	0	0	0
K30. Knowledge of methods for preparing tray and equipment set-up for dental procedures.	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\circ$	$\circ$
K31. Knowledge of types of materials used in dental procedures.	0	$\bigcirc$	0	0	0	0
K32. Knowledge of types of dental instruments and their associated uses.	0	$\bigcirc$	0	0	$\bigcirc$	$\bigcirc$
K33. Knowledge of methods for preparing, handling, and storing dental instruments.	0	$^{\circ}$	$^{\circ}$	0	0	0
K34. Knowledge of types of dental components and their functions.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\circ$	$\bigcirc$	$\bigcirc$
K35. Knowledge of types of materials used in dental treatment and their functions.	0	$\bigcirc$	0	$\odot$	0	0
K36. Knowledge of methods for selecting dental components and materials.	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
K37. Knowledge of types of materials used to isolate restorative area.	$\odot$	$\odot$	0	0	$\odot$	$\bigcirc$
K38. Knowledge of types of techniques for isolating restorative area.	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	0	0
K39. Knowledge of methods for isolating tooth or cavity preparations.	0	0	0	0	0	0

K40. Knowledge of types of base and liner materials and their uses.	0	0	0	0	0	0
K41. Knowledge of procedures for applying or placing bases and liners.	0	0	0	0	0	0
K42. Knowledge of types of wedges and their uses.	0	0	0	0	0	0
K43. Knowledge of techniques for placing wedges during restorative procedures.	0	0	0	0	0	0
K44. Knowledge of types of matrix bands and their uses.	0	0	0	0	0	0
K45. Knowledge of techniques for placing matrix bands during restorative procedures.	0	0	0	0	0	0
K46. Knowledge of types of temporary filling materials and their uses.	0	0	0	0	0	0
K47. Knowledge of techniques to mix, place, and contour temporary filing material.	0	0	0	0	0	0
K48. Knowledge of types of etchants and their uses.	0	0	0	0	0	0
K49. Knowledge of indications and contraindications for the use of etching agents.	0	0	0	0	0	0
K50. Knowledge of techniques for applying etchants.	0	0	0	0	0	0
K51. Knowledge of types of bonding agents and their use.	0	0	0	0	0	0
K52. Knowledge of indications and contraindications for the use of bonding agents.	0	0	0	0	0	0
K53. Knowledge of techniques for applying bonding agents.	0	0	0	0	0	0
K54. Knowledge of types of materials used for indirect provisional restorations.	0	0	0	0	0	0
K55. Knowledge of techniques for fabricating indirect provisional restorations.	0	0	0	0	0	0
K56. Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of indirect provisional restorations.	0	0	0	0	0	0
K57. Knowledge of techniques for adjusting indirect provisional restorations.	0	0	0	0	0	0
K58. Knowledge of types of cements	0	0	0	0	0	0

and their use.						
K59. Knowledge of techniques for placing and removing indirect provisional restorations.	0	0	0	0	0	0
K60. Knowledge of techniques for mixing provisional materials.	0	0	0	0	0	0
K61. Knowledge of methods for evaluating occlusion, margins, and contact discrepancies of direct provisional restorations	0	0	0	0	0	0
K62. Knowledge of techniques for adjusting direct provisional restorations.	0	0	0	0	0	0
K63. Knowledge of techniques for finishing direct provisional restorations.	0	0	0	0	0	0
K64. Knowledge of the effects of improper or incomplete finishing of direct restorations.	0	0	0	0	0	0
K65. Knowledge of techniques for removing cement from teeth surfaces and gingiva.	0	0	0	0	0	0
K66. Knowledge of instruments used to remove cement from teeth surfaces.	0	0	0	0	0	0
K67. Knowledge of signs of irritation associated with residual cement.	0	0	0	0	0	0
K68. Knowledge of procedures for the use and care of equipment used to administer oxygen and nitrous oxide and oxygen.	0	0	0	0	0	0
K69. Knowledge of signs of medical emergencies associated with the use of nitrous oxide.	0	0	0	0	0	0
K70. Knowledge of risks associated with improper coronal polishing.	0	0	0	0	0	0
K71. Knowledge of techniques for performing coronal polishing.	0	0	0	0	0	0
K72. Knowledge of indications and contraindications for performing coronal polishing.	0	0	0	0	0	0
K73. Knowledge of types of pit and fissure sealants and their uses.	0	0	0	0	0	0
K74. Knowledge of factors that impact retention of pit and fissure sealants.	0	0	0	0	0	$\bigcirc$
K75. Knowledge of indications and contraindications for using pit and fissure sealants.	0	0	0	0	0	0
K76. Knowledge of techniques for	0	0	0	0	0	0

applying pit and fissure sealants.						
K77. Knowledge of types of bleaching agents and their use.	0	0	0	0	0	0
K78. Knowledge of indications and contraindications for using bleaching agents.	0	0	0	0	0	0
K79. Knowledge of techniques for applying bleaching agents.	0	0	0	0	0	0
K80. Knowledge of the effects of poor oral hygiene and care related to dental health.	0	0	0	0	0	0
K81. Knowledge of methods for educating patients about oral hygiene.	0	0	0	0	0	0
K82. Knowledge of symptoms patients may encounter after treatment.	0	0	0	0	0	0
K83. Knowledge of techniques for pain management after treatment.	0	0	0	0	0	0
K84. Knowledge of methods for educating patients about pre- and post-treatment instructions.	0	0	0	0	0	0
K85. Knowledge of the effects of foods and beverages on oral health.	0	0	0	0	0	0
K86. Knowledge of methods for educating patients about dietary recommendations related to oral health and dental treatment.	0	0	0	0	0	0
K87. Knowledge of the relationship between pain responses and pulp vitality.	0	0	0	0	0	0
K88. Knowledge of methods for testing pulp vitality.	0	0	0	0	0	0
K89. Knowledge of techniques for using absorbent points to dry canals.	0	0	0	0	0	0
K90. Knowledge of types of periodontal dressings and their use.	0	0	0	0	0	0
K91. Knowledge of the relationship between dressing medicaments and post-surgical healing.	0	0	0	0	0	0
K92. Knowledge of signs of dry socket that require the attention of a dentist.	0	0	0	0	0	0
K93. Knowledge of signs of infection or irritation associated with periodontal and surgical dressings.	0	0	0	0	0	0
K94. Knowledge of techniques for applying dressings to surgical sites.	0	0	0	0	0	0
K95. Knowledge of the types of archwires and their functions.	0	0	0	0	0	0

K96. Knowledge of methods for placing archwires.	0	0	0	0	0	0
K97. Knowledge of types of instruments used to place orthodontic archwires.	0	0	0	0	0	0
K98. Knowledge of types of ligatures and their functions.	0	0	0	0	0	0
K99. Knowledge of techniques for placing ligatures based on dentist's instructions.	0	0	0	0	0	0
K100. Knowledge of types of instruments used to place orthodontic ligatures.	0	0	0	0	0	0
K101. Knowledge of techniques for removing post-surgical sutures.	0	0	0	0	0	0
K102. Knowledge of types of removable prosthetic appliances and their functions.	0	0	0	0	0	0
K103. Knowledge of methods for verifying removable prosthetic appliance fit or retention.	0	0	0	0	0	0
K104. Knowledge of techniques for adjusting prosthetic appliances extraorally.	0	0	0	0	0	0



14. Part III - Knowledge Ratings

### 18. How important is this knowledge for effective performance of tasks in your current practice?

#### Content Area 3. Infection Control and Health and Safety

	Not important; not required	Of minor importance	Fairly important	Moderately important	Very important	Critically important
K105. Knowledge of methods for using safety precautions with patients.	0	0	0	0	0	0
K106. Knowledge of types of safety equipment for protecting patients.	$\bigcirc$	0	$\bigcirc$	$\circ$	$\bigcirc$	$\circ$
K107. Knowledge of techniques for protecting patients during diagnostic tests and imaging.	0	$\odot$	$^{\circ}$	$^{\circ}$	$^{\circ}$	0
K108. Knowledge of equipment for providing protective barriers and air evacuation systems.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
K109. Knowledge of techniques for using barriers, air evacuation systems, and rinses.	0	0	0	0	0	0
K110. Knowledge of types of infectious diseases and their modes of transmission.	0	0	0	0	$\circ$	0
K111. Knowledge of techniques for sanitizing hands during dental treatments.	0	0	0	0	$^{\circ}$	0
K112. Knowledge of techniques for using personal protective equipment.	0	0	0	0	0	0
K113. Knowledge of techniques for preventing the spread of infectious diseases.	$^{\circ}$	$^{\circ}$	0	$^{\circ}$	$\bigcirc$	0
K114. Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious	0	$\bigcirc$	0	0	0	0

diseases.						
K115. Knowledge of signs of allergic reaction or anaphylactic shock.	0	0	0	0	0	0
K116. Knowledge of signs of medical crisis or emergency.	0	0	0	0	$\odot$	0
K117. Knowledge of methods for obtaining emergency medical assistance.	0	0	0	0	0	0
K118. Knowledge of methods for administering emergency first aid and CPR.	0	0	0	0	0	0
K119. Knowledge of methods for disinfecting treatment areas and equipment.	0	0	0	0	0	0
K120. Knowledge of barrier techniques for protecting treatment areas and equipment.	0	0	0	0	0	0
K121. Knowledge of methods for monitoring dental waterlines and water quality.	0	0	0	0	0	0
K122. Knowledge of methods for disinfecting evacuation lines.	0	0	0	0	0	0
K123. Knowledge of types of disinfecting and sterilizing agents used to prevent the spread of infectious diseases.	0	0	0	0	0	0
K124. Knowledge of types of sterilization processes and related equipment.	0	0	0	0	0	0
K125. Knowledge of procedures for sterilizing instruments.	0	0	0	0	0	0
K126. Knowledge of techniques for storing instruments before and after sterilization.	0	0	0	0	0	0
K127. Knowledge of techniques for the safe disposal of contaminated materials.	0	0	0	$\odot$	0	0
K128. Knowledge of techniques for the safe disposal of sharps.	0	0	0	0	0	0



#### 15. Part III - Knowledge Ratings

### 19. How important is this knowledge for effective performance of tasks in your current practice?

#### Content Area 4. Laws and Regulations

	Not important; not required	Of minor	Fairly important	Moderately important		Critically important
K129. Knowledge of laws regarding patient consent.	0	$\bigcirc$	0	0	0	0
K130. Knowledge of laws related to the Health Insurance Portability and Accountability Act (HIPAA).	0	$\bigcirc$	0	0	0	$\bigcirc$
K131. Knowledge of signs of child abuse or neglect.	0	$\bigcirc$	0	0	$\odot$	0
K132. Knowledge of signs of dependent adult abuse, neglect, or exploitation.	0	$\bigcirc$	$\bigcirc$	$\circ$	$\bigcirc$	0
K133. Knowledge of signs of elder adult abuse, neglect, or exploitation.	0	$\bigcirc$	0	$\odot$	$\odot$	0
K134. Knowledge of methods for reporting child, elder, or dependent adult abuse.	$\bigcirc$	$\bigcirc$	0	0	0	0
K135. Knowledge of legal standards for patient record-keeping and documentation.	$^{\circ}$	$\bigcirc$	0	0	$^{\circ}$	$\odot$
K136. Knowledge of laws about the storage and disposal of patient charts and records.	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	$\bigcirc$	$\bigcirc$
K137. Knowledge of laws regarding professional conduct.	$\odot$	$\bigcirc$	0	$\bigcirc$	$\bigcirc$	0
K138. Knowledge of laws regarding scope of practice.	0	$\bigcirc$	$\bigcirc$	0	0	0



#### 16. Thank you!

Thank you for taking the time to complete this survey. The Dental Board of California (DBC) values your contribution to this study.