

Secretary of State
NOTICE OF PROPOSED RULEMAKING HEARING*
A Statement of Need and Fiscal Impact accompanies this form

Oregon Board of Dentistry	818
Agency and Division	Administrative Rules Chapter Number
Patrick D. Braatz	(971) 673-3200
Rules Coordinator	Telephone
Oregon Board of Dentistry, 1600 SW 4th Ave., Suite 770, Portland, OR 97201	
Address	

RULE CAPTION

Adopts, amends Agency Rules regarding Practice, Renewal, Anesthesia, Prohibited Acts, Orthodontic Assistants, Expanded Practice Permits

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

Hearing Date	Time	Location	Hearings Officer
5-31-12	07:00 PM	OHSU Center for Health & Healing, 3303 SW Bond Ave. Conference Room 4 - 3rd Floor, Portland, OR 97239	Board President

Auxiliary aids for persons with disabilities are available upon request.

RULEMAKING ACTION

Secure approval of rule numbers with the Administrative Rules Unit prior to filing

ADOPT:

818-035-0066

AMEND:

818-012-0005, 818-021-0085, 818-026-0030, 818-026-0055, 818-035-0065, 818-042-0020, 818-042-0040, 818-042-0100.

REPEAL:

RENUMBER: Secure approval of new rule numbers with the Administrative Rules Unit prior to filing.

AMEND AND RENUMBER: Secure approval of new rule numbers with the Administrative Rules Unit prior to filing.

Statutory Authority:

ORS 181, 183, 679 & 680

Other Authority:

SB 738 (Chapter 716 2011 Oregon Laws)

Statutes Implemented:

670.280, 679.020, 679.025, 679.060, 679.090, 679.115, 679.120, 679.140, 679.160, 679.250, 679.010, 679.170, 680.050, 680.072, 680.075, 680.082, 680.100, 680.200 & 680.205

RULE SUMMARY

The Board is adopting 818-035-0066 Additional Populations for Expanded Practice Dental Hygiene Permit Holders.

The Board is amending 818-012-0005 Scope of Practice to clarify the practice of dentistry.

The Board is amending 818-021-0085 Reinstatement of Expired License to clarify reinstatement and renewal of licenses.

The Board is amending 818-026-0030 Requirement for Anesthesia Permit, Standards and Qualifications of an Anesthesia Monitor to further clarify the requirements for permits.

The Board is amending 818-026-0055 Dental Hygiene and Dental Assistant Procedures Performed under Minimal Sedation to clarify the requirements for Nitrous Oxide.

The Board is amending 818-035-0065 Expanded Practice Dental Hygiene Permit to remove a phrase that was added in error.

The Board is amending 818-042-0020 Dentist and Dental Hygienist Responsibility to update the name of a permit due to recent legislative changes.

The Board is amending 818-042-0040 Prohibited Acts to remove a phrase that will help to clarify the standard of care in the community.

The Board is amending 818-042-0100 Expanded Function Orthodontic Assistant (EFODA) to clarify the standard of care for Orthodontic Assistants.

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

05-31-2012 4:00 p.m.	Patrick D. Braatz	Patrick.Braatz@state.or.us	4-10-12 2:59p.m.
Last Day (m/d/yyyy) and Time	Printed Name	Email Address	Date Filed
for public comment			

*The Oregon Bulletin is published on the 1st of each month and updates the rule text found in the Oregon Administrative Rules Compilation. Notice forms must be submitted to the Administrative Rules Unit, Oregon State Archives, 800 Summer Street NE, Salem, Oregon 97310 by 5:00 pm on the 15th day of the preceding month unless this deadline falls on a Saturday, Sunday or legal holiday when Notice forms are accepted until 5:00 pm on the preceding workday.

ARC 923-2003

Secretary of State
STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Board of Dentistry

818

Agency and Division

Administrative Rules Chapter Number

Adopts, amends Agency Rules regarding Practice, Renewal, Anesthesia, Prohibited Acts, Orthodontic Assistants, Expanded Practice Permits

Rule Caption (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of:

The adoption of OAR 818-035-0066; the amendment of OAR 818-012-0005, 818-021-0085, 818-026-0030, 818-026-0055, 818-035-0065, 818-042-0020, 818-042-0040 & 818-042-0100.

Statutory Authority:

ORS 181, 183, 679 & 680

Other Authority:

SB 738 (Chapter 716 2011 Oregon Laws)

Stats. Implemented:

670.280, 679.020, 679.025, 679.060, 679.090, 679.115, 679.120, 679.140, 679.160, 679.250, 679.010, 679.170, 680.050, 680.072, 680.075, 680.082, 680.100, 680.200 & 680.205

Need for the Rule(s):

The adoption of OAR 818-0035-066 Additional Populations for Expanded Practice Dental Hygiene Permit Holders allows for additional populations to be served by Dental Hygienists with an Expanded Practice Permit.

The amendments to OAR 818-012-0005 Scope of Practice are necessary to clarify the scope of the practice of dentistry.

The amendment to OAR 818-021-0085 Reinstatement of Expired License is necessary to clarify the differences between reinstatement and renewal of a license.

The amendments to OAR 818-026-0030 Requirement for Anesthesia Permit, Standards and Qualifications of an Anesthesia Monitor are necessary to further clarify the requirements for anesthesia permits.

The amendments to OAR 818-0026-0055 Dental Hygiene and Dental Assistant Procedures Performed under Minimal Sedation are necessary to clarify the use of Nitrous Oxide.

The amendment to OAR 818-035-0065 Expanded Practice Dental Hygiene Permit is necessary to remove a phrase that was added in error.

The amendment to OAR 818-042-0020 Dentist and Dental Hygienist Responsibility is necessary to update a permit name change due to recent legislation.

The amendment to OAR 818-042-0040 Prohibited Acts is necessary to remove a phrase that will help clarify the standard of care in the community.

The amendments to OAR 818-042-0100 Expanded Functions Orthodontic Assistant (EFODA) are necessary to clarify the standard of care that exists today.

Documents Relied Upon, and where they are available:

SB 738 (Chapter 716 2011 Oregon Laws)

Fiscal and Economic Impact:

None

Statement of Cost of Compliance:

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)):

The only impact on the Oregon Board of Dentistry will be the updating of forms and the Dental Practice Act.

2. Cost of compliance effect on small business (ORS 183.336):

a. Estimate the number of small business and types of businesses and industries with small businesses subject to the rule:

It is not possible to estimate the exact number of small businesses, as the majority of dental practices are considered "small businesses."

b. Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services:

None

c. Equipment, supplies, labor and increased administration required for compliance:

None

How were small businesses involved in the development of this rule?

If not, why?:

Dentists who are owners of dental practices assisted in the review and writing of the rules as members of the Oregon Board of Dentistry (OBD) Rules Oversight Committee. Professional association representatives are also members of the OBD Rules Oversight Committee and participated in the drafting of the proposed rules and amendments.

Administrative Rule Advisory Committee consulted?: Yes

<u>05-31-2012 4:00 p.m.</u>	<u>Patrick D. Braatz</u>	<u>Patrick.Braatz@state.or.us</u>	<u>4-10-12 2:59 PM</u>
Last Day (m/d/yyyy) and Time for public comment	Printed Name	Email Address	Date Filed

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310.

ARC 925-2007

ABOUT THE OHSU CENTER FOR HEALTH & HEALING

The OHSU Center for Health & Healing is located in Portland's South Waterfront neighborhood and at the foot of the Portland Aerial Tram. The main lobby includes the Casey Optical Studio, a pharmacy, the March Wellness spa and fitness center, parking elevators, elevators to access floors 1-16, the Daily Café and coffee stand. An information desk is available directly across from the parking elevators.

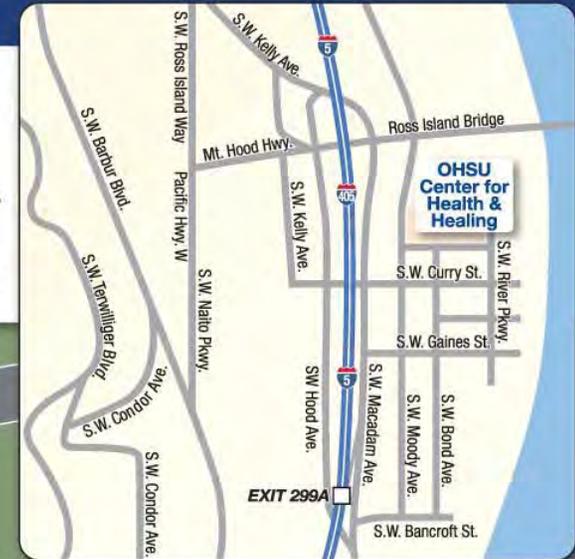
Portland's streetcar conveniently stops at the corner of S.W. Moody and S.W. Gibbs, which is across the street and just north of the OHSU Center

for Health & Healing. The streetcar accommodates bikes and wheelchairs. Schedules and fare information are available online at www.portlandstreetcar.org.

PARKING

Parking is available underneath the OHSU Center for Health & Healing. The entrance to the garage is on S.W. Whitaker, directly across the street from the center. Parking is free for patients. Once you park your car, take the parking elevators up to the main lobby and transfer to the building elevators to reach floors 1 through 16.

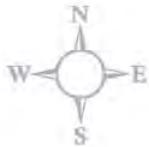
For more information and directions to the campus, please visit www.ohsuhealth.com/maps or call 503.494.8311.



As the only academic medical center in the state, Oregon Health & Science University has an extraordinary range of doctors, scientists, nurses, technicians and others who work together for the benefit of every patient, every day. OHSU is dedicated to providing personalized patient care, combined with the latest treatments and therapies, to deliver a quality of healthcare not available anywhere else in Oregon. The knowledge of all for the care of one.

We welcome you to visit our 100-acre Marquam Hill campus located in southwest Portland, overlooking downtown Portland.


 TriMet
 Lift Service
 Stop



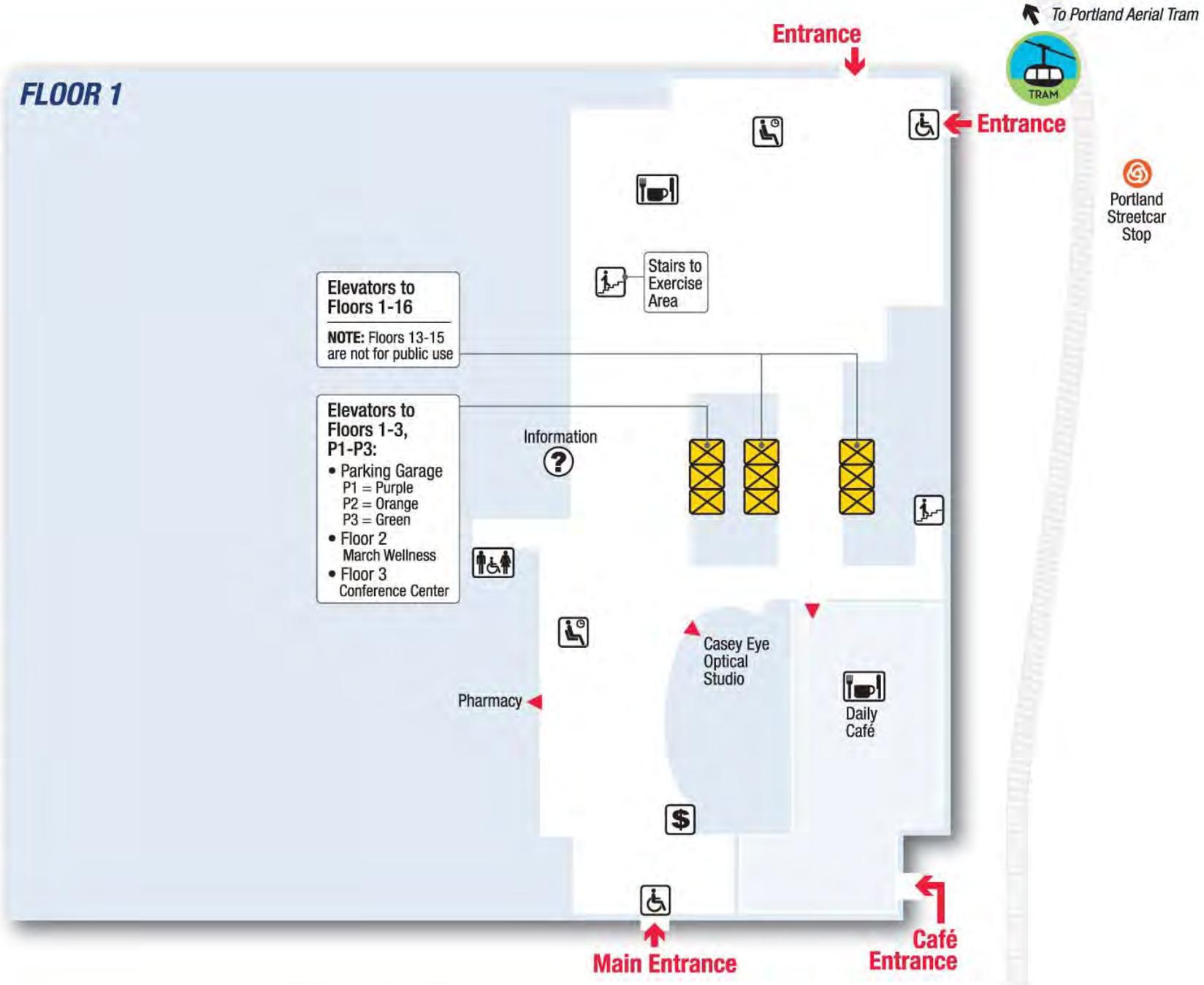
FLOOR 1

Legend	
Information	
Entrance	
Elevators	
Stairs	
Accessible Entrance	
Coffee/Dining	
Accessible Restroom	
Waiting Area	
Telephone	
ATM	
Parking	
TriMet	

Elevators to Floors 1-16
NOTE: Floors 13-15 are not for public use

Elevators to Floors 1-3, P1-P3:

- Parking Garage
 P1 = Purple
 P2 = Orange
 P3 = Green
- Floor 2
 March Wellness
- Floor 3
 Conference Center



 To Portland Aerial Tram
 Portland Streetcar Stop

 To Parking Garage

S.W. Whitaker Street

DIVISION 12
STANDARDS OF PRACTICE

818-012-0005

Scope of Practice

~~[(1) The Board determines that the practice of dentistry includes the following procedures which the Board finds are included in the curricula of dental schools accredited by the American Dental Association, Commission on Dental Accreditation, post-graduate training programs or continuing education courses:]~~

~~[(a) Rhinoplasty;]~~

~~[(b) Blepharoplasty;]~~

~~[(c) Rhytidectomy;]~~

~~[(e) Submental liposuction;]~~

~~[(f) Laser resurfacing;]~~

~~[(g) Browlift, either open or endoscopic technique;]~~

~~[(h) Platysmal muscle plication;]~~

~~[(i) Dermabrasion;]~~

~~[(j) Otoplasty;]~~

~~[(k) Lip augmentation;]~~

~~[(l) Hair transplantation, not as an isolated procedure for male pattern baldness; and]~~

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~~[(m) Harvesting bone extra orally for dental procedures, including oral and maxillofacial procedures.]~~

~~[(2) No licensee may perform any of the procedures listed in subsection (1) unless the licensee:]~~

~~[(a) Has successfully completed a residency in Oral and Maxillofacial Surgery accredited by the American Dental Association, Commission on Dental Accreditation (CODA); and]~~

~~[(b) Has successfully completed a clinical fellowship, of at least one continuous year in duration, in esthetic (cosmetic) surgery recognized by the American Association of Oral and Maxillofacial Surgeons or by the American Dental Association Commission on Dental Accreditation; or]~~

~~[(c) Holds privileges either:]~~

~~[(A) Issued by a credentialing committee of a hospital accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to perform these procedures in a hospital setting; or]~~

~~[(B) Issued by a credentialing committee for an ambulatory surgical center licensed by the State of Oregon and accredited by either the JCAHO or the American Association for Ambulatory Health Care (AAAHC).]~~

No licensee may perform any of the procedures listed in section (4) below unless the licensee:

(1) Has successfully completed a residency in Oral and Maxillofacial Surgery accredited by the American Dental Association, Commission on Dental Accreditation (CODA); and

63 **(2) Has successfully completed a clinical fellowship, of at least one continuous year in**
64 **duration, in esthetic (cosmetic) surgery recognized by the American Association of Oral**
65 **and Maxillofacial Surgeons or by the American Dental Association Commission on Dental**
66 **Accreditation; or**

67
68 **(3) Holds privileges either:**

69
70 **(a) Issued by a credentialing committee of a hospital accredited by the Joint Commission**
71 **on Accreditation of Healthcare Organizations (JCAHO) to perform these procedures in a**
72 **hospital setting; or**

73
74 **(b) Issued by a credentialing committee for an ambulatory surgical center licensed by the**
75 **State of Oregon and accredited by either the JCAHO or the American Association for**
76 **Ambulatory Health Care (AAAHC).**

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78 **(4) The procedures allowed are:**

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80 **(a) Rhinoplasty;**

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82 **(b) Blepharoplasty;**

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84 **(c) Rhydidectomy;**

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86 **(d) Submental liposuction;**

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88 **(e) Laser resurfacing;**

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90 **(f) Browlift, either open or endoscopic technique;**

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92 **(g) Platysmal muscle plication;**

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94 **(h) Dermabrasion;**

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96 **(i) Otoplasty;**

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98 **(j) Lip augmentation;**

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100 **(k) Hair transplantation, not as an isolated procedure for male pattern baldness;**

101

102 **(l) Harvesting bone extra orally for dental procedures, including oral and maxillofacial**
103 **procedures; and**

104

105 **(m) Administering Botulinum Toxin Type A or dermal fillers.**

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107 Stat. Auth.: ORS 679 & ORS 680

108 Stats. Implemented: ORS 679.010(2), ORS 679.140(1)(c), ORS 679.140(2), ORS 679.170(6) &

109 ORS 680.100

1 **DIVISION 21**
2 **EXAMINATION AND LICENSING**

3
4 **818-021-0085**

5 **Renewal or Reinstatement of Expired License**

6 Any person whose license to practice as a dentist or dental hygienist has expired, may apply for
7 reinstatement under the following circumstances:

8
9 (1) If the license has been expired 30 days or less, the applicant shall:

10
11 (a) Pay a penalty fee of \$50;

12
13 (b) Pay the biennial renewal fee; and

14
15 (c) Submit a completed renewal application and certification of having completed the Board's
16 continuing education requirements.

17
18 (2) If the license has been expired more than 30 days but less than 60 days, the applicant shall:

19
20 (a) Pay a penalty fee of \$100;

21
22 (b) Pay the biennial renewal fee; and

23
24 (c) Submit a completed renewal application and certification of having completed the continuing
25 education requirements.

26
27 (3) If the license has been expired more than 60 days, but less than one year, the applicant shall:

28
29 (a) Pay a penalty fee of \$150;

30
31 (b) Pay a fee equal to the renewal fees that would have been due during the period the license

32 was expired;

33

34 (c) Pay a reinstatement fee of \$500; and

35

36 (d) Submit a completed [~~renewal application and proof of having completed the continuing~~
37 ~~education requirements.~~] **application for reinstatement provided by the Board, including**
38 **certification of having completed continuing education credits as required by the Board**
39 **during the period the license was expired. The Board may request evidence of satisfactory**
40 **completion of continuing education courses.**

41

42 (4) If the license has been expired for more than one year but less than four years, the applicant
43 shall:

44

45 (a) Pay a penalty fee of \$250;

46

47 (b) Pay a fee of equal to the renewal fees that would have been due during the period the license
48 was expired;

49

50 (c) Pay a reinstatement fee of \$500;

51

52 (d) Pass the Board's Jurisprudence Examination;

53

54 (e) Pass any other qualifying examination as may be determined necessary by the Board after
55 assessing the applicant's professional background and credentials;

56

57 (f) Submit evidence of good standing from all states in which the applicant is currently licensed;
58 and

59

60 (g) Submit a completed application for reinstatement provided by the Board including
61 certification of having completed continuing education credits as required by the Board during

62 the period the license was expired. The Board may request evidence of satisfactory completion
63 of continuing education courses.

64

65 (5) If a dentist or dental hygienist fails to renew or reinstate his or her license within four years
66 from expiration, the dentist or dental hygienist must apply for licensure under the current statute
67 and rules of the Board.

68

69 Stat. Auth.: ORS 679 & 680

70 Stats. Implemented: ORS 679.090, 679.120, 680.072 & 680.075

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1 DIVISION 26
2 ANESTHESIA

3
4 **818-026-0030**

5 **Requirement for Anesthesia Permit, Standards and Qualifications of an Anesthesia**
6 **Monitor**

7 (1) A permit holder who administers sedation shall assure that drugs, drug dosages, and/or
8 techniques used to produce sedation shall carry a margin of safety wide enough to prevent
9 unintended deeper levels of sedation.

10
11 (2) No ~~[dentist or dental hygienist]~~ licensee shall induce central nervous system sedation or
12 general anesthesia without first having obtained a permit under these rules for the level of
13 anesthesia being induced.

14
15 (3) ~~[No dentist or dental hygienist]~~ A licensee may be granted a permit to administer sedation
16 or general anesthesia ~~[under these rules without]~~ with documentation of ~~[current]~~
17 training/education and/or competency in the permit category for which the licensee is applying~~[.]~~
18 ~~[The applicant may demonstrate current training/education or competency]~~ by any one the
19 following:

20
21 (a) ~~[Current training/education or competency shall be limited to completion of initial]~~
22 Initial training/education in the permit category for which the applicant is applying ~~[and]~~ shall
23 be completed no more than two years immediately prior to application for sedation or general
24 anesthesia permit; or

25
26 (b) If greater than two years but less than five years since completion ~~[Completion]~~ of initial
27 training/education, ~~[no greater than five years immediately prior to application for sedation~~
28 ~~or general anesthesia permit. Current competency must be documented by]~~ an applicant
29 must document completion of all continuing education that would have been required for that
30 anesthesia/permit category during that five year period following initial training; or

32 (c) **If greater than two years but less than five years since [Completion] completion** of initial
33 training/education, ~~[no greater than five years]~~ immediately prior to application for sedation or
34 general anesthesia permit [-] , ~~[Current]~~ **current** competency **or experience** must be
35 documented by completion of a comprehensive review course approved by the Board in the
36 permit category to which the applicant is applying and must consist of at least one-half (50%) of
37 the hours required by rule for Nitrous Oxide, Minimal Sedation, Moderate Sedation and General
38 Anesthesia Permits. Deep Sedation and General Anesthesia Permits will require at least 120
39 hours of general anesthesia training.

40
41 (d) An applicant for sedation or general anesthesia permit whose completion of initial
42 training/education is greater than five years immediately prior to application, may be granted a
43 sedation or general anesthesia permit by submitting documentation of the requested permit level
44 from another state or jurisdiction where the applicant is also licensed to practice dentistry or
45 dental hygiene, and provides documentation of the completion of at least 25 cases in the
46 requested level of sedation or general anesthesia in the 12 months immediately preceding
47 application; or

48
49 (e) Demonstration of current competency to the satisfaction of the Board that the applicant
50 possesses adequate sedation or general anesthesia skill to safely deliver sedation or general
51 anesthesia services to the public.

52
53 (4) Persons serving as anesthesia monitors in a dental office shall maintain current certification
54 in Health Care Provider Basic Life Support (BLS)/Cardio Pulmonary Resuscitation (CPR)
55 training, or its equivalent, shall be trained in monitoring patient vital signs, and be competent in
56 the use of monitoring and emergency equipment appropriate for the level of sedation utilized.
57 (The term "competent" as used in these rules means displaying special skill or knowledge
58 derived from training and experience.)

59
60 (5) ~~[No dentist or dental hygienist]~~ **A licensee** holding an anesthesia permit shall **at all times**
61 ~~[administer anesthesia unless they]~~ hold a current Health Care Provider BLS/CPR level
62 certificate or its equivalent, or ~~[holds]~~ a current Advanced Cardiac Life Support (ACLS)

63 Certificate or Pediatric Advanced Life Support (PALS) Certificate, whichever is appropriate for
64 the patient being sedated.

65

66 (6) When a dentist utilizes a single dose oral agent to achieve anxiolysis only, no anesthesia
67 permit is required.

68

69 (7) The applicant for an anesthesia permit must pay the appropriate permit fee, submit a
70 completed Board-approved application and consent to an office evaluation.

71

72 (8) Permits shall be issued to coincide with the applicant's licensing period.

73

74 Stat. Auth.: ORS 679 & 680

75 Stats. Implemented: ORS 679.250

76

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78 **818-026-0055**

79 **Dental Hygiene and Dental Assistant Procedures Performed Under Nitrous Oxide or**
80 **Minimal Sedation**

81 (1) Under indirect supervision, dental hygiene procedures may be performed for a patient who is
82 under **nitrous oxide or** minimal sedation under the following conditions:

83

84 (a) A **[dentist] licensee** holding a **Nitrous Oxide,** Minimal, Moderate, Deep Sedation or General
85 Anesthesia Permit administers the sedative agents;

86

87 (b) The **[dentist]** permit holder performs the appropriate pre- and post-operative evaluation and
88 discharges the patient in accordance with 818-026-0050(7) and (8); and

89

90 (c) An anesthesia monitor, in addition to the dental hygienist performing the authorized
91 procedures, is present with the patient at all times.

92

93 (2) Under direct supervision, a dental assistant may perform those procedures for which the
94 dental assistant holds the appropriate certification for a patient who is under **nitrous oxide or**
95 minimal sedation under the following conditions:

96

97 (a) A **[dentist] licensee** holding the **Nitrous Oxide**, Minimal, Moderate, Deep Sedation or
98 General Anesthesia Permit administers the sedative agents;

99

100 (b) The **[dentist]** permit holder, or an anesthesia monitor, monitors the patient; and

101

102 (c) The **[dentist]** permit holder performs the appropriate pre- and post-operative evaluation and
103 discharges the patient in accordance with 818-026-0050(7) and (8).

104

105 Stat. Auth.: ORS 679 & 680

106 Stats. Implemented: ORS 679.250(7) & 679.250(10)

DIVISION 35
DENTAL HYGIENE

818-035-0065

Expanded Practice Dental Hygiene Permit

The Board shall issue an Expanded Practice Permit to a Dental Hygienist who holds an unrestricted Oregon license, and completes an application approved by the Board, pays the permit fee, and

(1) Certifies on the application that the dental hygienist has completed at least 2,500 hours of supervised dental hygiene clinical practice, or clinical teaching hours, and also completes 40 hours of courses chosen by the applicant in clinical dental hygiene or public health sponsored by continuing education providers approved by the Board; or

(2) Certifies on the application that the dental hygienist has completed a course of study, before or after graduation from a dental hygiene program, that includes at least 500 hours of dental hygiene practice on patients described in ORS 680.205; and

(3) Provides the Board with a copy of the applicant's current professional liability policy or declaration page which will include, the policy number and expiration date of the policy.

(4) Notwithstanding OAR 818-035-0025(1), prior to performing any dental hygiene services an Expanded Practice Dental Hygienist shall examine the patient, gather data, interpret the data to determine the patient's dental hygiene treatment needs and formulate a patient care plan.

(5) An Expanded Practice Dental Hygienist may render the services described in paragraphs 6(a) to (d) of this rule to the patients described in ORS 680.205(1) if the Expanded Practice Dental Hygienist has entered into a written collaborative agreement in a format approved by the Board with a dentist licensed under ORS Chapter 679.

31 (6) The collaborative agreement must set forth the agreed upon scope of the dental hygienist's
32 practice with regard to:

33

34 (a) Administering local anesthesia;

35

36 (b) Administering temporary restorations without excavation;

37

38 (c) Prescribing prophylactic antibiotics and nonsteroidal anti-inflammatory drugs [~~specified in~~
39 ~~the agreement~~]; and

40

41 (d) Overall dental risk assessment and referral parameters.

42

43 (7) The collaborative agreement must comply with ORS 679.010 to 680.990.

44

45 (8) From the date this rule is effective, the Board has the authority to grant a Limited Access
46 Permit through December 31, 2011, pursuant to ORS 680.200.

47

48 Stat. Auth.: ORS 680

49 Stats. Implemented: ORS 680.200

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51

52 **818-035-0066**

53 **Additional Populations for Expanded Practice Dental Hygiene Permit Holders**

54

55 **A dental hygienist with an Expanded Practice Permit may practice without supervision at**
56 **locations and on persons as described in ORS 680.205 (1)(a) through (e) and on the**
57 **following additional populations:**

58

59 **(1) Migrant Farm Workers.**

60

61 **(2) Low-income persons, as defined by earning up to 200% of the Federal Poverty Level.**

62

63 **(3) Persons that are 25 or more miles away from a source of full time general dental care.**

64

65 **(4) Members of Federally Recognized Native American tribes.**

66

67 **(5) Other populations that the Oregon Board of Dentistry determines by policy are**
68 **underserved or lack access to dental hygiene services.**

69

70 **Stat. Auth: ORS 679 & 680**

71 **Stats. Implemented: 680.205 & 679.250(9)**

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1 **DIVISION 42**

2 **DENTAL ASSISTING**

3
4 **818-042-0020**

5 **Dentist and Dental Hygienist Responsibility**

6 (1) A dentist is responsible for assuring that a dental assistant has been properly trained, has
7 demonstrated proficiency, and is supervised in all the duties the assistant performs in the dental
8 office. Unless otherwise specified, dental assistants shall work under indirect supervision in the
9 dental office.

10
11 (2) A dental hygienist who works under general supervision may supervise a dental assistant in
12 the dental office if the dental assistant is rendering assistance to the dental hygienist in providing
13 dental hygiene services and the dentist is not in the office to provide indirect supervision. A
14 ~~[Limited Access Permit (LAP) dental hygienist]~~ **dental hygienist with an Expanded**
15 **Practice Permit** may hire and supervise a dental assistant who will render assistance to the
16 dental hygienist in providing dental hygiene services.

17
18 (3) The supervising dentist or dental hygienist is responsible for assuring that all required
19 licenses, permits or certificates are current and posted in a conspicuous place.

20
21 (4) Dental assistants who are in compliance with written training and screening protocols
22 adopted by the Board may perform oral health screenings under general supervision.

23
24 Stat. Auth.: ORS 679 & 680

25 Stats. Implemented: ORS 679.025(2)(j) & 679.250(7)

26
27
28 **818-042-0040**

29 **Prohibited Acts**

30 No licensee may authorize any dental assistant to perform the following acts:

31 (1) Diagnose or plan treatment.

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- (2) Cut hard or soft tissue.
- (3) Any Expanded Function duty (818-042-0070 and 818-042-0090) or Expanded Orthodontic Function duty (818-042-0100) without holding the appropriate certification.
- (4) Correct or attempt to correct the malposition or malocclusion of teeth [~~or take any action related to the movement of teeth~~] except as provided by OAR 818-042-0100.
- (5) Adjust or attempt to adjust any orthodontic wire, fixed or removable appliance or other structure while it is in the patient's mouth.
- (6) Administer or dispense any drug except fluoride, topical anesthetic, desensitizing agents or drugs administered pursuant to OAR 818-026-0060(11), 818-026-0065(11), 818-026-0070(11) and as provided in 818-042-0070 and 818-042-0115.
- (7) Prescribe any drug.
- (8) Place periodontal packs.
- (9) Start nitrous oxide.
- (10) Remove stains or deposits except as provided in OAR 818-042-0070.
- (11) Use ultrasonic equipment intra-orally except as provided in OAR 818-042-0100.
- (12) Use a high-speed handpiece or any device that is operated by a high-speed handpiece intra-orally.
- (13) Use lasers, except laser-curing lights.

- 63 (14) Use air abrasion or air polishing.
64
- 65 (15) Remove teeth or parts of tooth structure.
66
- 67 (16) Cement or bond any fixed prosthetic or orthodontic appliance including bands, brackets,
68 retainers, tooth moving devices, or orthopedic appliances except as provided in 818-042-0100.
69
- 70 (17) Condense and carve permanent restorative material except as provided in OAR 818-042-
71 0095.
72
- 73 (18) Place any type of cord subgingivally.
74
- 75 (19) Take jaw registrations or oral impressions for supplying artificial teeth as substitutes for
76 natural teeth, except diagnostic or opposing models or for the fabrication of temporary or
77 provisional restorations or appliances.
78
- 79 (20) Apply denture relines except as provided in OAR 818-042-0090(2).
80
- 81 (21) Expose radiographs without holding a current Certificate of Radiologic Proficiency issued
82 by the Board (818-042-0050 and 818-042-0060) except while taking a course of instruction
83 approved by the Oregon Health Authority, Oregon Public Health Division, Office of
84 Environmental Public Health, Radiation Protection Services, or the Oregon Board of Dentistry.
85
- 86 (22) Use the behavior management techniques known as Hand Over Mouth (HOM) or Hand
87 Over Mouth Airway Restriction (HOMAR) on any patient.
88
- 89 (23) Perform periodontal probing.
90
- 91 (24) Place or remove healing caps or healing abutments, except under direct supervision.
92
- 93 (25) Place implant impression copings, except under direct supervision.

94
95 (26) Any act in violation of Board statute or rules.

96
97 Stat. Auth.: ORS 679 & 680
98 Stats. Implemented: ORS 679.020, 679.025 & 679.250

99
100
101 **818-042-0100**

102 **Expanded Functions — Orthodontic Assistant (EFODA)**

103 ~~[(1) A dentist may authorize an expanded function orthodontic assistant to perform the~~
104 ~~following functions provided that the dentist checks the patient before and after the~~
105 ~~functions are performed:]~~

106
107 ~~[(a) Remove cement from cemented bands or brackets using an ultrasonic or hand scaler,~~
108 ~~or a slow speed hand piece; and]~~

109
110 ~~[(b) Recement loose orthodontic bands.]~~

111
112 ~~[(2) Under general supervision, an expanded function orthodontic assistant may remove~~
113 ~~any portion of an orthodontic appliance causing a patient discomfort and in the process~~
114 ~~may replace ligatures and/or separators if the dentist is not available providing that the~~
115 ~~patient is rescheduled for follow-up care by a licensed dentist as soon as is reasonably~~
116 ~~appropriate.]~~

117
118 ~~[(3) Under general supervision, an EFODA may recement orthodontic bands if the dentist~~
119 ~~is not available and the patient is in discomfort, providing that the patient is rescheduled~~
120 ~~for follow-up care by a licensed dentist as soon as is reasonably appropriate.]~~

121
122 **(1) An EFODA may perform the following duties while under the indirect supervision of a**
123 **licensed dentist:**

- 124
- 125 **(a) Remove orthodontic bands and brackets and attachments with removal of the bonding**
- 126 **material and cement. An ultrasonic scaler, hand scaler or slow speed handpiece may be used.**
- 127 **Use of a high speed handpiece is prohibited;**
- 128
- 129 **(b) Select or try for the fit of orthodontic bands;**
- 130
- 131 **(c) Recement loose orthodontic bands;**
- 132
- 133 **(d) Place and remove orthodontic separators;**
- 134
- 135 **(e) Prepare teeth for bonding or placement of orthodontic appliances and select, pre-position**
- 136 **and cure orthodontic brackets, attachments and/or retainers after their position has been**
- 137 **approved by the supervising licensed dentist;**
- 138
- 139 **(f) Fit and adjust headgear;**
- 140
- 141 **(g) Remove fixed orthodontic appliances;**
- 142
- 143 **(h) Remove and replace orthodontic wires. Place and ligate archwires. Place elastic ligatures or**
- 144 **chains as directed;**
- 145
- 146 **(i) Cut arch wires; and**
- 147
- 148 **(j)Take impressions for study models or temporary oral devices such as, but not limited to,**
- 149 **space maintainers, orthodontic retainers and occlusal guards.**
- 150
- 151 **(2) An EFODA may perform the following duties while under the general supervision of a**
- 152 **licensed dentist:**
- 153

154 **(a) An expanded function orthodontic assistant may remove any portion of an orthodontic**
155 **appliance causing a patient discomfort and in the process may replace ligatures and/or**
156 **separators if the dentist is not available, providing that the patient is rescheduled for follow-up**
157 **care by a licensed dentist as soon as is reasonably appropriate.**

158
159 **(b) An EFODA may recement orthodontic bands if the dentist is not available and the**
160 **patient is in discomfort, providing that the patient is rescheduled for follow-up care by a**
161 **licensed dentist as soon as is reasonably appropriate.**

162 Stat. Auth.: ORS 679

163 Stats. Implemented: ORS 679.025(2)(j) & ORS 679.250(7)