# ARTICLE 20-01
# GENERAL ADMINISTRATION

Chapter
20-01-01 Organization of Board
20-01-02 Definitions

## CHAPTER 20-01-02

**20-01-02-01. Definitions.** Unless specifically stated otherwise, the following definitions are applicable throughout this title:

1. "Advertising" means any public communication, made in any form or manner, about a licensee's professional service or qualifications, for the purpose of soliciting business.
2. "Anxiolysis" means diminution or elimination of anxiety.
3. "Basic full upper and lower denture" means replacement of all natural dentition with artificial teeth. This replacement includes satisfactory tissue adaptation, satisfactory function, and satisfactory aesthetics. Materials used in these replacements must be nonirritating in character and meet all the standards set by the national institute of health and the bureau of standards and testing agencies of the American dental association for materials to be used in or in contact with the human body.
4. "Board certified" means the dentist has been certified in a specialty area in which there is a certifying body approved by the commission on dental accreditation of the American dental association.
5. "Board eligible" means the dentist has successfully completed a duly accredited training program or in the case of a dentist in practice at the time of the adoption of these rules has experience equivalent to such a training program in an area of dental practice in which there is a certifying body approved by the commission on dental accreditation of the American dental association.
6. "Bona fide specialties" means the specialties of dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics.
7. "Cardiopulmonary resuscitation course" means the American heart association's health care provider course, the American red cross professional rescuer course, or an equivalent course.
8. "Certified dental assistant" means a dental assistant who meets the education or experience prerequisites, or both, established by the dental assisting national board and passes the dental assisting national board's certified dental assistant examination (including radiation health and safety, infection control, and general chairside components), is currently cardiopulmonary resuscitation certified, and continues to maintain the credential by meeting the dental assisting national board requirements.

9. "Code of ethics" means the ~~January 2009~~ April 2012 version of the American dental association's principles of ethics and code of professional conduct.
10. "Combination inhalation - enteral conscious sedation" (combined conscious sedation) means conscious sedation using inhalation and enteral agents. When the intent is anxiolysis only, and the appropriate dosage of agents is administered, then the definition of enteral or combined inhalation-enteral conscious sedation (combined conscious sedation), or both, does not apply. Nitrous oxide/oxygen when used in combination or with sedative agents may produce anxiolysis, conscious or deep sedation, or general anesthesia.
11. "Complete evaluation" means an examination, review of medical and dental history, the formulation of a diagnosis, and the establishment of a written treatment plan, documented in a written record to be maintained in the dentist's office or other treatment facility or institution.
12. "Conscious sedation" means depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and that is produced by a pharmacological or nonpharmacological method or a combination thereof. The drugs or technique, or both, should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of conscious sedation.
13. "Contiguous supervision" means that the supervising oral and maxillofacial surgeon whose patient is being treated and has personally authorized the procedures to be performed. The supervising oral surgeon is continuously on-site and physically present in the treatment facility while the procedures are performed by the dental anesthesia auxiliary and capable of responding immediately in the event of an emergency. The term does not require a supervising dentist to be physically present in the operatory.
14. "Coronal polishing" is the mechanical polishing of clinical crowns using a rubber cup or brush only and not to include any instrumentation. ~~Examination for calculus and instrumentation must be done by the dentist or hygienist.~~
~~14~~15. "Deep sedation" is an induced state of depressed consciousness accompanied by partial loss of protective reflexes, including the inability to continually maintain an airway independently or to respond purposefully to physical stimulation or verbal command, and is produced by pharmacological or nonpharmacological method, or combination thereof.
~~15~~16. "Dental technician" means any individual who offers or undertakes to perform the fabrication or repair of corrective or prosthetic dental devices according to the written instructions of a licensed dentist. A certified dental technician is an individual who is specifically qualified through education and experience and who has successfully completed the written and practical certification examinations administered by the national board for

certification, and who further maintains certification through compliance with continuing education requirements as stipulated by the national board for certification.

~~16~~17. "Direct supervision" means the dentist is in the dental office or treatment facility, personally diagnoses the condition to be treated, personally authorizes the procedures and remains in the dental office or treatment facility while the procedures are being performed by the dental hygienist or dental assistant, and before dismissal of the patient, evaluates the performance of the dental hygienist or dental assistant.

18. "Direct visual supervision" means supervision by an oral and maxillofacial surgeon by verbal command and under direct line of sight.

~~17.~~19. "Evaluation" means the act or process by a dentist of assessing and determining the significance, quality or work of something such as the patient's oral health status, the progress of dental therapy, or the performance of the dental hygienist or dental assistant.

~~18~~20. "General anesthesia" means an induced state of unconsciousness accompanied by a partial or complete loss of protective reflexes, including the inability to continually maintain an airway independently and respond purposefully to physical stimulation or verbal command, and is produced by a pharmacological or nonpharmacological method, or a combination thereof.

~~19~~21. "General supervision" means the dentist has authorized the procedures and they are carried out in accordance with the dentist's diagnosis, if necessary, and treatment plan. The dentist is not required to be in the treatment facility. Limitations are contained in North Dakota Century Code section 43-20-03.

~~20~~22. "Inactive status" means the licensee shall not engage in the practice of dentistry or dental hygiene in the state of North Dakota. The license that is placed on inactive status remains on that status until such time as the license is reinstated.

~~21~~23. "Indirect supervision" means that a dentist is in the dental office or treatment facility, has personally diagnosed the condition to be treated, authorizes the procedures, and remains in the dental office or treatment facility while the procedures are being performed by the dental hygienist or dental assistant.

~~22~~24. "Local anesthesia" means the elimination of sensations in one part of the body by regional injection of drugs without causing the loss of consciousness.

~~23.~~25. "Oral assessment" means the evaluation of data pertaining to the patient's condition to help identify dental problems leading to a professional treatment plan. The final diagnosis of disease or treatment plan is the sole responsibility of the supervising or collaborative dentist.

~~23~~26. "Oral hygiene treatment planning" ~~means the process of assessing and determining, by the dentist and the hygienist, the services the dental hygienist will perform, including preventative, educational, and instrumentation. This treatment plan is an organized sequence of events~~

~~that is a part of the dentist's total treatment plan. The total treatment plan and diagnosis are to be determined by the dentist~~ is a component of a comprehensive treatment plan developed by the hygienist or dentist to provide the hygienist a framework for addressing the preventative, educational, and clinical treatment needs of the patient.

~~24~~ 27. "Patient of record" means a patient who has undergone a complete dental evaluation performed by a licensed dentist.

~~25~~ 28. "Primary practice site" means the office location that is to be considered the main location of the dental practice. This office location would be listed first on the biennial registration.

~~26~~ 29. "Satellite office" means an office, building, or location used at any time by a dentist for the practice of dentistry other than the office listed on the dentist's biennial registration certificate.

30. "Supragingival scaling" means to remove hard deposits and accretions from the coronal surfaces of teeth or tooth replacements.

**History:** Effective September 1, 1980; amended effective February 1, 1992; October 1, 1993; May 1, 1996; August 1, 1998; April 1, 2000; June 1, 2002; July 1, 2004; April 1, 2006; October 1, 2007; January 1, 2011.
**General Authority:** NDCC 43-20-10; 43-28-06
**Law Implemented:** NDCC 43-20, 43-28

## ARTICLE 20-02
## DENTISTS

Chapter
20-02-01 General Requirements

## CHAPTER 20-02-01
## GENERAL REQUIREMENTS

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**20-02-01-01. Advertising.**

1. Advertising by dentists is permitted to disseminate information for the purpose of providing the public a sufficient basis upon which to make an informed selection of dentists. In the interest of protecting the public health, safety, and welfare, advertising which is false, deceptive, or misleading is prohibited.
2. All advertising must contain the legal name of the dentist, or a reasonable variation thereof. In the case of a partnership or corporation, the name used in the advertisement may be the true name of the partnership or corporation. The advertisement must also contain the location, or locations, of the dentist, partnership, or corporation.
3. A dentist engaged in general practice who wishes to announce the services available in the dentist's practice is permitted to announce the availability of those services as long as the dentist avoids using language that expresses or implies that the dentist is a specialist. If a dentist, other than a specialist, wishes to advertise a limitation of practice, such advertisement must state that the limited practice is being conducted by a general dentist. A dentist who is a specialist may announce the dentist's ~~specialization~~ bona fide specialty provided that the dentist has

successfully completed an educational program accredited by the commission on accreditation of dental and dental auxiliary educational programs, two or more years in length, as specified by the commission on dental accreditation of the American dental association or be a diplomate of a nationally recognized certifying board. Such a dentist may announce that the dentist's practice is limited to the special area of dental practice in which the dentist has or wishes to announce.

4. A dentist who advertises on radio or television must retain a recorded copy of such advertising for a period of one year following the termination of the use of such advertising, and is responsible to make recorded copies of such advertising available to the North Dakota state board of dental examiners within thirty days following a request from the board for such copies.
5. No dentist may advertise the dentist, the dentist's staff, the dentist's services, or the dentist's method or methods of delivery of dental services to be superior to those of any other licensed dentist, unless such claim or claims can be substantiated by the advertiser, upon whom rests the burden of proof.
6. No advertising by a dentist may contain representations or other information contrary to the provisions of North Dakota Century Code section 43-28-18 or North Dakota Administrative Code title 20.

**History:** Effective September 1, 1980; amended effective February 1, 1992; October 1, 1993.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-02. Office emergency.** Every dentist, dental hygienist, dental assistant, qualified dental assistant, or registered dental assistant practicing in North Dakota must have a current certificate of proficiency in cardiopulmonary resuscitation.

**History:** Effective February 1, 1992; amended effective October 1, 1993; May 1, 1996; August 1, 1998; January 1, 2011.
**General Authority:** NDCC 43-20-10, 43-28-06
**Law Implemented:** NDCC 43-20-01.2, 43-20-01.3, 43-20-10, 43-20-13.2, 43-28-06, 43-28-10.1, 43-28-15

**20-02-01-03. Nitrous oxide.** A duly licensed dentist may use nitrous oxide for treating patients only when the following conditions are met:

1. Documentation has been provided by the dentist to the board that verifies completion of fourteen hours of instruction or continuing professional education dealing specifically with the use of nitrous oxide. In the absence of documentation of classroom training, the dentist must provide proof acceptable to the board that demonstrates three years of practical experience in the use of nitrous oxide.

2. A dentist who induces a patient into a state of psychosedation or relative analgesia using nitrous oxide shall ensure that the patient will be continually and personally monitored by a dentist. A dentist may delegate the monitoring tasks to a licensed dental hygienist or a registered dental assistant utilizing ~~direct~~ indirect supervision only after the patient has been stabilized at the desired level of conscious sedation or relative analgesia by the action of the dentist. The licensed dental hygienist or registered dental assistant who is assigned the monitoring task shall remain in the treatment room with the patient at all times. A dental hygienist or a dental assistant may not initiate the administration of nitrous oxide to a patient. A dental hygienist or a registered dental assistant may terminate or reduce the amount of nitrous oxide previously administered by the dentist.
3. The dentist must provide and document training for the dental hygienist or registered dental assistant in the proper and safe operation of the analgesia machine being used prior to the registered dental hygienist or registered dental assistant monitoring the patient. Training shall include emergency procedures to be employed if required.

**History:** Effective February 1, 1992; amended effective May 1, 1996; April 1, 2000; October 1, 2007; January 1, 2011.
**General Authority:** NDCC 43-20-10, 43-28-06
**Law Implemented:** NDCC 43-20-03, 43-20-10, 43-20-12, 43-20-13, 43-28-06

**20-02-01-03.1. Additional requirements for licensure by examination.** The board may grant a license to practice dentistry to an applicant who has met the requirements of North Dakota Century Code section 43-28-10.1 and all the following requirements:

1. The applicant has passed the examination administered by the joint commission on national dental examinations ~~examiners~~ or the national dental examining board of Canada within five years of application.
2. The applicant has passed, within five years of application, a clinical competency examination. Required components shall include a patient-based periodontal component, a patient-based restorative component, an endodontic component, administered by one or more of the following:
   a. Central regional dental testing service.
   b. Council of interstate testing agencies.
   c. Northeast regional examining board ~~of dental examiners, except after December 31, 2009, the examination approved by the American board of dental examiners~~.
   d. Southern regional testing agency~~, except the applicant must pass the periodontal part of an examination administered by another approved regional dental testing service~~.
   e. Western regional examining board.
3. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.

4. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-10.1

**20-02-01-03.2. Additional requirements for licensure by credential review.** The board may grant a license to practice dentistry to an applicant who has met the requirements of North Dakota Century Code section 43-28-15 and all the following requirements:

1. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
2. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.
3. The applicant has completed thirty-two hours of continuing education in accordance with section 20-02-01-06 within two years of application.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-15

**20-02-01-03.3. Additional requirements for applications.** Applications must be completed within six months of filing. The board may require an interview with the applicant. In addition to the application requirements of North Dakota Century Code sections 43-28-11 and 43-28-17, the board may require an application to include:

1. Proof of identity, including any name change.
2. An official transcript sent by an accredited dental school directly to the board.
3. Evidence demonstrating the applicant passed the examination administered by the joint commission on national dental examinations within five years of application.
4. Evidence demonstrating the applicant passed a clinical competency examination, approved by the board, within five years of application.
5. ~~An interview by the board.~~
~~6.~~ Anything necessary for a criminal history record check pursuant to North Dakota Century Code section 43-28-11.2.
~~7.~~ 6. A certification, from the licensing board of every jurisdiction in which the applicant is licensed, that the applicant is licensed in good standing.
~~8.~~7. Certification that the applicant has completed a cardiopulmonary resuscitation course within two years of application.
~~9.~~ 8. Verification of physical health and visual acuity.
~~10.~~9. For applications for licensure by credential review, the law and rules stating the requirements for licensure, when the applicant was licensed, of the jurisdiction in which the applicant is licensed.

~~11.~~10. For applications for licensure by credential review and reinstatement from inactive status, proof of completion of thirty-two hours of continuing education in accordance with section 20-02-01-06 within two years of application.

~~12.~~11. Any information required by the application forms prescribed by the board.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-10.1, 43-28-11, 43-28-11.2, 43-28-15, 43-28-17

**20-02-01-03.4. Clinical competency examination retakes.** If an applicant taking the clinical competency examination in the integrated format is unsuccessful after having exhausted all allowable retake opportunities for the failed parts, one failure is recorded. The applicant must then retake all five parts of the examination in the traditional format. If the applicant is unsuccessful in one or more parts, a second failure is recorded. If the failed parts are retaken and failed again, a third failure will be recorded. A dental applicant may take a clinical examination three times before remedial training is required. After failing the examination for a third time, and prior to the fourth attempt of the examination, an applicant shall:

1. Submit to the board a detailed plan for remedial training by an accredited dental school. The board must approve the proposed remedial training.
2. Submit proof to the board of passing the remedial training within twenty-four months of its approval by the board. The board may grant or deny a fourth attempt of the clinical examination. A fourth attempt must occur within twelve months of the date of the board's decision. If an applicant fails any part of the examination after remedial training, the board must approve additional retakes.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06, 43-28-10.1, 43-28-17

**20-02-01-04. Temporary license to practice dentistry.** The board may grant a nonrenewable temporary license to practice dentistry in the state of North Dakota for a period not to exceed one year. ~~The temporary license will be issued only for special purposes that are unique and cannot be satisfied by the normal means to licensure.~~ Between meetings of the board, the executive director of the board may review the temporary license application and grant a provisional license if all requirements are met.

1. A temporary license to practice dentistry in North Dakota may be granted to a dentist when the dentist:
   a. Has applied to the board as prescribed in North Dakota Century Code section 43-28-11.
   b. Has paid the nonrefundable application and license fee that may be prescribed by the board.
   c. Holds an active dental license in another jurisdiction, has been a full-time student or resident of a dental program accredited by the

American dental association's commission on dental accreditation within the last six months, or has held a North Dakota dental license within the previous five years.

d. Has provided a statement from the licensing authority of all the states in which the dentist is licensed that the dentist's license is unencumbered, unrestricted, and that the dentist's professional record is free of blemish for professional misconduct, substandard care, or violations of the state's practice act.

e. Has certified that no disciplinary actions are pending in other states or jurisdictions.

f. Has authorized the board to seek information concerning the dentist's professional and personal background and agrees to hold harmless those individuals who may provide such information to the board.

2. The board may apply such restrictions as it deems appropriate to limit the scope of the practice of dentistry under the authority of the temporary license.

3. The board may restrict the licensee to engage in dental practice, as may be limited above, only at certain and specifically defined practice locations.

4. The board may require the North Dakota jurisprudence examination.

**History:** Effective February 1, 1992; amended effective October 1, 2007; January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-04.1. Restricted license to practice dentistry.** Repealed effective October 1, 2007.

**20-02-01-04.2. Volunteer license to practice dentistry.** A patient who is seen by a dentist who holds a volunteer license to practice dentistry shall not be considered a patient of record of the volunteer dentist. The dentist is not obligated to treat the patient outside of the volunteer practice setting. Between meetings of the board, the executive director of the board may review the volunteer license application and grant a provisional license if all the requirements are met. ~~The board may grant a~~ A volunteer license to practice dentistry in North Dakota, renewable annually by application to the board, may be granted when the following conditions are met:

1. The applicant was formerly licensed and actively practicing in the state of North Dakota or another jurisdiction for at least three of the five years immediately preceding application, where the requirements are at least substantially equivalent to those of this state; or

~~2.~~ a. the applicant is the resident of a board approved specialty program; or

~~3.~~ b. the board determines that the applicant is qualified and satisfies the

~~4.~~ criteria specified under 43-28-10.1. ~~and is in good standing with the board.~~

2. The applicant agrees to provide primary health services without remuneration in a board-approved setting.

3. The applicant holds a current cardiopulmonary resuscitation course certification.
4. The applicant has completed continuing education requirements of the board.
5. The applicant has made application for a volunteer dental license in a manner prescribed by the board.
6. The board may collect from the applicant ~~has paid~~ the nonrefundable application and license fee prescribed by the board.
7. The board may apply such restrictions as it deems appropriate to limit the scope of the practice of dentistry under the authority of the volunteer license.

**History:** Effective April 1, 2000; amended effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-04.3. Inactive status - License reinstatement.** A dentist may, upon payment of the fee determined by the board, place the dentist's license on inactive status. A dentist on inactive status shall be excused from the payment of renewal fees, except inactive status renewal fees, and continuing education. A dentist on inactive status shall not practice in North Dakota. To reinstate a license on inactive status, the dentist shall apply on the form a prescribed by the board, pay a reinstatement fee, and meet all of the following requirements:

1. The applicant has passed a clinical competency examination administered by a regional dental testing service, approved by the board in section 20-02-01-03.1, within five years application. The board may, within the board's discretion, waive this requirement.
2. The applicant passes a written examination on the laws and rules governing the practice of dentistry in this state administered by the board at a meeting.
3. The applicant has completed thirty-two hours of continuing education in accordance with section 20-02-01-06 within two years of application.
4. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
5. Grounds for denial of the application under North Dakota Century Code section 43-28-18 do not exist.

**History:** Effective April 1, 2006; amended effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-17

**20-02-01-05. Permit for anesthesia use.**

1. The rules in this chapter are adopted for the purpose of defining standards for the administration of anesthesia by dentists. The standards specified in this chapter shall apply equally to general anesthesia, deep sedation,

moderate (conscious) sedation, or a combination of any of these with inhalation, but do not apply to sedation administered through inhalation alone. A dentist licensed under North Dakota Century Code chapter 43-28 and practicing in North Dakota may not use any form of sedation if the intent is beyond anxiolysis on any patient unless such dentist has a permit, currently in effect, issued by the board, ~~initially for a period of twelve months~~ and renewable biennially thereafter, authorizing the use of such general anesthesia, deep sedation, moderate (conscious) sedation, or minimal sedation when used in combination with inhalation.

2. An applicant may not be issued a permit initially as required in subsection 1 unless:
   a. The board of dental examiners approves the applicant's facility and any other facility, clinic, or mobile dental clinic where anesthesia services are provided after an inspection conducted by an individual or individuals designated by the dental examiners;
   b. The board of dental examiners is satisfied that the applicant is in compliance with the American dental association's most recent policy statement: the use of sedation and general anesthesia by dentists;
   c. The initial application includes payment of a fee in the amount determined by the dental examiners; and
   d. If the application appears to be in order, the board may issue a temporary permit prior to the site evaluation. The temporary permit may be revoked if the applicant fails the site inspection or if the applicant fails to cooperate with the timely scheduling of the site inspection.
3. The board of dental examiners may renew such permit biennially, provided:
   a. Requirements of the permit application have been met;
   b. Application for renewal and renewal fee is received by the dental examiners before the date of expiration of such permit. If the renewal application and renewal fee have not been received by the expiration of the permit, late fees as determined by the board shall apply; and
   c. An onsite evaluation of the dentist's facility may be conducted by an individual designated by the board of dental examiners, and the board of dental examiners must approve the results of each such evaluation. Each facility where anesthesia is administered must be evaluated.
4. The board shall reevaluate the credentials, facilities, equipment, personnel, and procedures of a permit holder five years following a successful initial application.

**History:** Effective October 1, 1993; amended effective May 1, 1996; June 1, 2002; July 1, 2004; April 1, 2006; October 1, 2007; January 1, 2011.
**General Authority:** NDCC 43-28-06

**Law Implemented:** NDCC 43-28-06

**20-02-01-06. Continuing dental education for dentists.** Each dentist shall provide evidence on forms supplied by the board that the dentist has attended or participated in continuing dental education in accordance with the following conditions:

1. Continuing education activities include publications, seminars, symposiums, lectures, college courses, and online education.
2. The continuing dental education hours will accumulate on the basis of one hour of credit for each hour spent in education. Subject matter directly related to clinical dentistry will be accepted by the board without limit.
3. The minimum number of hours required within a two-year cycle for dentists is thirty-two. Of these hours, a dentist may earn no more than sixteen hours from publications and online education. The continuing education must include:
   a. Two hours of ethics or jurisprudence. Passing the laws and rules examination is the equivalent of two hours of ethics or jurisprudence.
   b. Two hours of infection control.
   c. A cardiopulmonary resuscitation course.
   d. For anesthesia permit holders, four hours related to sedation or anesthesia.
4. Mere registration at a dental convention without specific attendance at continuing education presentations will not be creditable toward the continuing dental education requirement.
5. All dentists must hold a current cardiopulmonary resuscitation certificate. Anesthesia permit holders are required to maintain current advanced cardiac life support certification or pediatric advanced life support as specified by permit.
6. The board may audit the continuing education credits of a dentist. Each licensee shall maintain certificates or records of continuing education activities from the previous renewal cycle. Upon receiving notice of an audit from the board, a licensee shall provide satisfactory documentation of attendance at, or participation in the continuing education activities listed on the licensee's continuing education form. Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the license.

**History:** Effective October 1, 1993; amended effective May 1, 1996; August 1, 1998; June 1, 2002; April 1, 2006; October 1, 2007; January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06, 43-28-16.2

**20-02-01-07. Removable dental prostheses owner identification.**

1. Every complete upper and lower denture or removable dental prosthesis fabricated by a dentist or fabricated pursuant to the dentist's work order must be marked with the name of the patient for whom the prosthesis is

intended. The markings must be done during the fabrication process and must be permanent, and cosmetically acceptable. The exact location of the markings and methods used to apply or implant them shall be determined by the dentist or dental laboratory fabricating the prosthesis. If in the professional judgment of the dentist or dental laboratory this identification is not practical, identification must be provided as follows:

a. The initials of the patient may be used if the entire name is not practical.

b. The identification marks may be omitted in their entirety if no form of identification is practical or clinically safe.

2. Failure of any dentist to comply with this section shall be deemed to be a violation of the rules of the board and the dentist may be liable to penalty as permitted under statute.

**History:** Effective October 1, 1993; amended effective April 1, 2006.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-08. Discontinuance of practice - Retirement - Discontinuance of treatment.** These rules are adopted for the purpose of avoiding practice abandonment. A licensed dentist shall maintain patient records in a manner consistent with the protection of the welfare of the patient. Upon request of the patient or patient's legal guardian, the dentist shall furnish the dental records or copies of the records, including dental radiographs or copies of the radiographs. The dentist may charge a nominal fee for duplication of records as provided by North Dakota Century Code section 23-12-14, but may not refuse to transfer records for nonpayment of any fees.

1. A licensee, upon retirement, or upon discontinuation of the practice of dentistry, or upon moving from a community, shall notify all active patients in writing and by publication once a week for three consecutive weeks in a newspaper of general circulation in the community that the licensee intends to discontinue the practice of dentistry. The licensee shall make reasonable arrangements with active patients for the transfer of patient records, or copies thereof, to the succeeding licensee. In the event of a transfer of patient records to another licensee assuming the practice, written notice must be furnished to all patients as hereinbefore specified. "Active patient" is defined as a person whom the licensee has examined, treated, cared for, or otherwise consulted with during the two-year period prior to the discontinuation of the practice of dentistry by the licensee. In the event of a nontransfer of records, a licensee shall have the ongoing obligation of not less than two years to afford the licensee's prior patients access to those records not previously provided to the patient.
2. In the event of termination of a dentist-patient relationship by a licensee, notice of the termination must be provided to the patient. A dentist-patient relationship exists if a dentist has provided treatment to a patient on at least one occasion within the preceding year. The dentist who is the owner or custodian of the patient's dental records shall mail notice of the

termination of the dentist's relationship to the patient, which shall provide the following:

a. The date that the termination becomes effective, and the date on which the dentist and patient relationship may resume, if applicable;
b. A location at which the patient may receive emergency dental care for at least thirty days following the termination of the dentist and patient relationship;
c. A statement of further dental treatment required, if any; and
d. ~~A means for the patient to obtain a copy of the patient's dental records.~~ The dentist shall respond to a written request to examine or copy a patient's record within ten working days after receipt. A dentist shall comply with section 23-12-14 for all patient record requests.

3. If a licensee dies or becomes unable to practice dentistry due to disability, for the purpose of selling or otherwise disposing of the deceased or disabled licensee's dental practice, a person who is not licensed to practice dentistry but who is the personal representative of the estate of a deceased dentist or the personal representative of a disabled dentist may contract with a dentist to manage the dental practice for a period not to exceed twenty-four months.
4. If a dentist agrees to provide dental care without remuneration to underserved patients in the absence of a public health setting, the patient may not be considered a patient of record of the dentist providing the donated dental service

**History:** Effective April 1, 2006.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-09. Retention of records.** A dentist shall retain a patient's dental record for a minimum of six years after the patient's last examination, prescription, or treatment. Records for minors shall be retained for a minimum of either one year after the patient reaches the age of eighteen or six years after the patient's last examination, prescription, or treatment, whichever is longer. Proper safeguards shall be maintained to ensure safety of records from destructive elements. The requirements of this rule apply to electronic records as well as to records kept by any other means.

**History:** Effective April 1, 2006; amended effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-06

**20-02-01-10. Authorization of laboratory services.** A dentist using the services of any person, not licensed to practice dentistry in this state, to construct, alter, repair, or duplicate any orthodontic or prosthetic device, must furnish the unlicensed person a written prescription which shall include all of the following:

1. The name and address of the unlicensed person.
2. The patient's name or patient number.
3. The date on which the prescription was written.
4. The description of the work to be done, with a diagram, if necessary.
5. A specification of the materials to be used if necessary.
6. The signature of the dentist and the number of the dentist's North Dakota license.

The dentist shall retain a duplicate copy of the prescription for inspection by the board or the board's agent for two years.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-28-06
**Law Implemented:** NDCC 43-28-02, 43-28-06, 43-28-18, 43-28-25

**20-02-05-11. Permit for the use of dermal fillers and botulinum toxin for dental use.**

1. The rules in this chapter are adopted for the purpose of defining standards for the administration of dermal fillers and botulinum toxin by a dentist if the use is limited to the practice of dentistry as defined in North Dakota Century Code section 43-28-01(7). Notwithstanding a dentist who specializes in oral and maxillofacial surgery, the board may issue a permit to a dentist who applies on forms prescribed by the board and pays the fee as required by section 20-05-01-01(1) to administer botulinum toxin or dermal fillers for the purpose of functional, therapeutic and aesthetic dental treatment purposes under the following conditions:
   a. The dentist provides evidence that demonstrates:
      1) The applicant has completed a course and received satisfactory training in a residency or other educational program accredited by the Commission on Dental Accreditation of the American Dental Association; or
      2) The applicant has successfully completed a board-approved continuing education course of instruction within the previous three months of application which includes neurophysiology, including facial tissues, parasympathetic, sympathetic and peripheral nervous systems relative to peri-oral tissue, and facial architecture, and:
         i) Patient assessment and consultation for Botox and dermal fillers;
         ii) Indications and contraindications for techniques;
         iii) Proper preparation and delivery techniques for desired outcomes;
         iv) Enhancing and finishing esthetic dentistry cases with dermal fillers;
         v) Botulinum neurotoxin treatment of temporomandibular joint syndrome and bruxism;
         vi) Knowledge of adverse reactions and management

and treatment of possible complications;

vii) Patient evaluation for best esthetic and therapeutic outcomes;

viii) Integrating botulinum neurotoxin and dermal filler therapy into dental therapeutic and esthetic treatment plans; and

ix) Live patient hands-on training including diagnosis, treatment planning, and proper dosing and delivery of Botox and dermal fillers.

## ARTICLE 20-03
## DENTAL ASSISTANTS

Chapter
20-03-01 Duties

## CHAPTER 20-03-01
## DUTIES

Section
20-03-01-01 Duties
20-03-01-02 Prohibited Services
20-03-01-03 Annual Registration of Dental Assistants Performing Expanded Duties [Repealed]
20-03-01-04 Criteria for Dental Assistants Placing Sealants [Repealed]
20-03-01-05 Registration of Registered and Qualified Dental Assistants
20-03-01-06 Continuing Dental Education for Qualified and Registered Dental Assistants

**20-03-01-01. Duties.** A dental assistant may perform the duties listed in subsections 1 through 5 under direct, indirect or general supervision of a dentist as follows: ~~. A qualified dental assistant may perform duties set forth in subsections 1 through 7 under direct supervision of a dentist. A registered dental assistant may perform the duties set forth in subsections 1 through 24 under indirect supervision of a dentist. A registered dental assistant may perform duties set forth in subsections 25 through 31 under direct supervision of a dentist. A registered dental assistant may perform duties set forth in subsections 32 and 33 under general supervision of a dentist.~~

~~1. Take and record pulse, blood pressure, and temperature.~~
~~2. Take and record preliminary dental and medical history for the interpretation by the dentist.~~
~~3. Apply topical medications and drugs to oral tissues, including topical anesthetic, but not including desensitizing or caustic agents or anticariogenic agents.~~
~~4. Receive removable dental prosthesis for cleaning or repair.~~
~~5. Take impressions for study casts.~~
~~6. Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base).~~
~~7. Take dental radiographs.~~
~~8. Apply anticariogenic agents topically.~~
~~9. Apply desensitizing solutions to the external surfaces of the teeth.~~
~~10. Dry root canal with paper points.~~
~~11. Place and remove rubber dams.~~
~~12. Take occlusal bite registration for study casts.~~
~~13. Place retraction cord in the gingival sulcus of a prepared tooth prior to the dentist taking an impression of the tooth.~~

~~14. Remove excess cement from inlays, crowns, bridges, and orthodontic appliances with hand instruments only.~~
~~15. Perform nonsurgical clinical and laboratory oral diagnosis tests, including pulp testing, for interpretation by the dentist.~~
~~16. Apply pit and fissure sealants if the registered dental assistant has provided documentation of a board-approved sealant course. Adjust sealants with slow-speed handpiece.~~
~~17. Polish the coronal surfaces of the teeth with a rubber cup or brush only after necessary scaling by a hygienist or dentist.~~
~~18. Polish restorations.~~
~~19. Place and remove periodontal dressings, dry socket medications, and packing.~~
~~20. Remove sutures.~~
~~21. Monitor a patient who has been inducted by a dentist into nitrous oxide relative analgesia.~~
~~22. Take impressions for fixed or removable orthodontic appliances, athletic mouth guards, bleaching trays, bite splints, flippers, and removable prosthetic repairs.~~
~~23. Preselect and prefit orthodontic bands.~~
~~24. Place, tie, and remove ligature wires and elastic ties, and place orthodontic separators.~~
~~25. Place and remove arch wires or appliances that have been activated by a dentist.~~
~~26. Acid-etch enamel surfaces prior to direct bonding of orthodontic brackets or composite restorations.~~
~~27. Place orthodontic brackets using an indirect bonding technique by seating the transfer tray loaded with brackets previously positioned in the dental laboratory by a licensed dentist.~~
~~28. Take face bow transfers.~~
~~29. Place and remove matrix bands and wedges.~~
~~30. Adjust permanent crowns outside of the mouth.~~
~~31. Orally transmit a prescription that has been authorized by the supervising dentist.~~
~~32. Fabricate, adjust, place, recement, or remove a temporary crown, bridge, or onlay or temporary restorative material. This applies only to dentitions actively under treatment for which a permanent restoration is being fabricated.~~
~~33. Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative treatment.~~

1. A dental assistant who is not registered with the board employed by a dentist may perform the following duties under direct supervision:
   a. Take and record pulse, blood pressure, and temperature.
   b. Take and record preliminary dental and medical history for the interpretation by the dentist.

c. Apply topical medications and drugs to oral tissues, including topical anesthetic, but not including desensitizing or caustic agents or anticariogenic agents.
d. Receive removable dental prosthesis for cleaning or repair.
e. Take impressions for study casts.
f. Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base).

2. A qualified dental assistant may perform the duties set forth in subsection 1 and take dental radiographs under the direct supervision of a dentist.

3. A registered dental assistant may perform the duties set forth in subsection 2 and the following duties under the direct supervision of a dentist:
a. Place and remove arch wires or appliances that have been activated by a dentist.
b. Acid etch enamel surfaces prior to direct bonding of orthodontic brackets or composite restorations.
c. Place orthodontic brackets using an indirect bonding technique by seating the transfer tray loaded with brackets previously positioned in the dental laboratory by a licensed dentist.
d. Take face bow transfers.
e. Place and remove matrix bands and wedges.
f. Adjust permanent crowns outside of the mouth.
g. Orally transmit a prescription that has been authorized by the supervising dentist.
h. Administer emergency medications to a patient in order to assist the dentist in an emergency.

4. A registered dental assistant may perform the following duties under the direct or indirect supervision of a dentist:
a. Apply anticariogenic agents topically.
b. Apply desensitizing solutions to the external surfaces of the teeth.
c. Dry root canal with paper points.
d. Place and remove rubber dams.
e. Take occlusal bite registration for study casts.
f. Place retraction cord in the gingival sulcus of a prepared tooth prior to the dentist taking an impression of the tooth.
g. Remove excess cement from inlays, crowns, bridges, and orthodontic appliances with hand instruments only.
h. Perform nonsurgical clinical and laboratory ~~oral~~ diagnosis tests, including pulp testing, for interpretation by the dentist.
i. Apply pit and fissure sealants if the registered dental assistant has provided documentation of a board approved sealant course. Adjust sealants with slow speed handpiece.
j. Polish the coronal surfaces of the teeth with a rubber cup or brush.
k. Polish restorations with a slow speed handpiece.
l. Place and remove periodontal dressings, dry socket medications, and packing.

m. Monitor a patient who has been inducted by a dentist into nitrous oxide relative analgesia.
n. Take impressions for fixed or removable orthodontic appliances, athletic mouth guards, bleaching trays, bite splints, flippers, and removable prosthetic repairs.
o. Preselect and prefit orthodontic bands.
p. Place, tie, and remove ligature wires and elastic ties, and place orthodontic separators.

5. A registered dental assistant may perform the following duties under the direct, indirect or general supervision of a dentist:
   a. Take and record pulse, blood pressure, and temperature.
   b. Take and record preliminary dental and medical history for the interpretation by the dentist.
   c. Apply topical medications and drugs to oral tissues, including topical anesthetic, but not including desensitizing or caustic agents or anticariogenic agents.
   d. Receive removable dental prosthesis for cleaning or repair.
   e. Take impressions or occlusal bite registrations for study casts.
   f. Fabricate, adjust, place, recement, or remove a temporary crown, bridge, or onlay or temporary restorative material. This applies only to dentitions actively under treatment for which a permanent restoration is being fabricated.
   g. Remove sutures.
   h. Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative treatment.
   i. Provide oral hygiene education and instruction.
   j. Provide an oral assessment for interpretation by the dentist.
   k. Repack dry socket medication and packing for palliative treatment.

**20-03-01-01.1 Expanded duties of registered dental assistants.** A registered dental assistant shall apply for a permit to perform the following duties:

1. A registered dental assistant under the direct supervision of a dentist may perform the following restorative functions:
   a. Place, carve and adjust class I and class V supragingival amalgam or glass ionomer restorations with hand instruments or a slow speed handpiece; and
   b. Adapt and cement stainless steel crowns;
   c. Place, contour, and adjust class I and class V supragingival composite restorations where the margins are entirely within the enamel with hand instruments or a slow speed handpiece.
2. A registered dental assistant authorized by permit and under the direct supervision of a dentist may perform supragingival scaling duties to a patient that is at least twelve years of age or less.

**Commented [RS1]:** 8/6/2014 Amended to include language "twelve years of age or less"

3. A registered dental assistant authorized by permit and under the contiguous supervision of an oral and maxillofacial surgeon may provide anesthesia duties as follows:

a. Initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation, or general anesthesia; and

b. Adjust the rate of intravenous fluids infusion only to maintain or keep the line patent or open.

4. A registered dental assistant authorized by permit and under the direct visual supervision of an oral and maxillofacial surgeon shall provide anesthesia duties as follows:

a. Draw up and prepare medications;

b. Follow instructions to deliver medication into an intravenous line upon verbal command;

c. Adjust the rate of intravenous fluids infusion beyond a keep open rate;

d. Adjust an electronic device to provide medications, such as an infusion pump.

**20-03-01-01.2. Registered dental assistant in a public health setting.** For the purposes of this section a public health setting shall include schools, nursing homes and long term care facilities, medical facilities, mobile dental health programs, Head Start programs and any other facilities or programs where Medicaid and other vulnerable populations are targeted. A registered dental assistant under the general supervision of a dentist and in a public health setting may perform the following duties:

1. Assist a dental hygienist who is performing services within the scope and supervision requirements as provided by 20-04-01.
2. Take and record pulse, blood pressure, and temperature.
3. Take and record preliminary dental and medical history for the interpretation by the dentist.
4. Apply topical medications and drugs to oral tissues, including topical anesthetic, but not including desensitizing or caustic agents or anticariogenic agents.
5. Receive removable dental prosthesis for cleaning or repair.
6. Take impressions for study casts.
7. Take occlusal bite registration for study casts.
8. Apply pit and fissure sealants if the registered dental assistant has provided documentation of a board approved sealant course. Adjust sealants with slow speed handpiece.
9. Polish the coronal surfaces of the teeth with a rubber cup or brush.
10. Polish restorations with a slow speed handpiece.
11. Place and remove periodontal dressings, dry socket medications, and packing.
12. Remove sutures.
13. Fabricate, adjust, place, recement, or remove a temporary crown, bridge, or onlay or temporary restorative material. This applies only to dentitions actively under treatment for which a permanent restoration is being fabricated.
14. Cut and remove arch wires or replace loose bands, loose brackets,

or other orthodontic appliances for palliative treatment.

15. Provide oral hygiene education and instruction.
16. Provide an oral assessment for interpretation by the dentist.
17. Repack dry socket medication and packing for palliative treatment.

**History:** Effective September 1, 1980; amended effective February 1, 1992; October 1, 1993; May 1, 1996; August 1, 1998; April 1, 2000; June 1, 2002; July 1, 2004; April 1, 2006; January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.1, 43-20-08, 43-20-10, 43-20-13

**20-03-01-02. Prohibited services.** A dental assistant, qualified dental assistant, or registered dental assistant may not perform the following services:

1. Diagnosis and treatment planning.
2. Surgery on hard or soft tissue.
3. Administer ~~or titrate~~ local anesthetics, sedation or general anesthesia drugs or titrate local anesthetics, sedation, or general anesthesia drugs without a board authorized permit.
4. Any irreversible dental procedure or procedures which require the professional judgment and skill of a licensed dentist.
5. ~~Placing a final restoration.~~
6. ~~Contouring a final restoration, excluding~~ Adjust a crown which has ~~not~~ been cemented by a dentist.
7. ~~7.~~ 6. Activate ~~Activating~~ any type of orthodontic appliance.
8. ~~8.~~ 7. Cement~~ing~~ or bond~~ing~~ orthodontic bands or brackets that have not been previously placed by a dentist.
9. ~~9.~~ 8. Place ~~Placing~~ bases or cavity liners.
10. ~~10.~~9. Subgingival scaling ~~Scaling~~, root planing, or gingival curettage.
11. ~~11.~~10. Measure ~~Measuring~~ the gingival sulcus with a periodontal probe.
11. Use a high speed hand piece inside the mouth.

**History:** Effective February 1, 1992; amended effective October 1, 1993; April 1, 2000; June 1, 2002; July 1, 2004; January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.1, 43-20-08, 43-20-10, 43-20-13

**20-03-01-05. Registration of registered and qualified dental assistants.** An individual seeking registration as a registered or qualified dental assistant shall apply on forms prescribed by the board. The application must be notarized and include the application fee.

1. The board may grant registration as a registered dental assistant to an applicant meeting all the following requirements:
   a. The applicant meets any of the following requirements:
      (1) The applicant successfully completed a dental assisting program, accredited by the commission on dental

accreditation of the American dental association or approved by the board, within one year of application.

(2) The applicant was certified by the dental assisting national board within one year of application.

(3) The applicant successfully completed a dental assisting program, accredited by the commission on dental accreditation of the American dental association or approved by the board, and completed, within two years before application, sixteen hours of continuing education in accordance with section 20-03-01-06.

(4) The applicant was certified by the dental assisting national board, and completed, within two years before application, sixteen hours of continuing education in accordance with section 20-03-01-06.

b. The applicant passed a written examination on the laws and rules governing the practice of dentistry in North Dakota within one year of application.

c. The applicant successfully completed a cardiopulmonary resuscitation course within two years of application.

d. Grounds for denial of the application under North Dakota Century Code section 43-20-05 do not exist.

2. The board may grant registration as a qualified dental assistant to an applicant meeting all the following requirements:

a. The applicant meets any of the following requirements:

(1) The applicant passed the infection control and radiation parts of the dental assisting national board examination within one year of application.

(2) The applicant passed the infection control and radiation parts of the dental assisting national board examination and completed, within two years before application, sixteen hours of continuing education in accordance with section 20-03-01-06.

b. The applicant completed six hundred fifty hours of dental assistance instruction, including on the job training.

c. The applicant passed a written examination on the laws and rules governing the practice of dentistry in North Dakota within one year of application.

d. The applicant successfully completed a cardiopulmonary resuscitation course within two years of application.

e. Grounds for denial of the application under North Dakota Century Code section 43-20-05 do not exist.

**20-03-01-05.1. Expanded duties of registered dental assistants.** The board may grant a permit to a registered dental assistant for the following:

**1.** The board may issue or renew a permit authorizing a registered dental assistant to provide anesthesia assistance under the supervision of a

dentist who specializes in oral and maxillofacial surgery, and meets the following requirements:

a. The applicant submits evidence on forms prescribed by the board that the applicant meets any of the following requirements:

(1) The applicant has completed a board approved dental anesthesia assistant education and training course within one year of application and has proof of current certification status from a board approved competency examination.

(2) The applicant has completed a board approved dental anesthesia assistant education and training course and has proof of current certification status from a board approved competency examination.

b. The applicant has successfully completed training in intravenous access or phlebotomy that includes experience starting and maintaining intravenous lines;

c. The applicant holds current and valid certification for health care provider basic life support, or advanced cardiac life support or pediatric advanced life support; and

d. The applicant provides a copy of a valid North Dakota general anesthesia permit of the oral and maxillofacial surgeon where the registered dental assistant will be performing anesthesia assistant services.

2. The board may issue or renew a permit on forms prescribed by the board authorizing a registered dental assistant under the direct supervision of a dentist to provide restorative functions under the following conditions:

a. The applicant meets any of the following requirements:

(1) The applicant has successfully completed a board approved curriculum from a program accredited by the commission on dental accreditation of the American dental association or other board approved course and successfully passed the western regional examining board's restorative examination or other equivalent examinations approved by the board within the last five years, and successfully completed the restorative function component of the dental assisting national board's certified restorative functions dental assistant certification exam, or

(2) The applicant has successfully passed the western regional examining board's restorative examination or other board approved examination over five years from the date of application and successfully completed the restorative function component of the dental assisting national board's certified restorative functions dental assistant certification exam and provide evidence from another state or jurisdiction where the applicant legally is or was authorized to perform restorative functions and certification from the supervising dentist of successful completion of at least 25 restorative

procedures within the immediate five years from the date of application.

b. A registered dental assistant may perform the placement and finishing of direct alloy or direct composite restorations, under the direct supervision of a licensed dentist, after the supervising dentist has prepared the dentition for restoration.

c. The restorative functions shall only be performed after the patient has given informed consent for the placement of the restoration by a restorative functions dental assistant.

d. Before the patient is released, the final restorations shall be checked and documented by the supervising dentist.

3. The board may issue or renew a permit on forms prescribed by the board authorizing a registered dental assistant under the direct supervision of a dentist to provide supragingival scaling under the following conditions:

a. The applicant meets any of the following requirements:

(1) The applicant has successfully completed a board approved supragingival didactic and clinical training course and successfully passed an examination approved by the board within one year of application. The board may require a competency examination.

(2) The applicant provides verification of successfully completed a supragingival scaling didactic and clinical training approved by the board and provides verification of continuous use in another jurisdiction during the past five years. The board may require a competency examination. Verification may consist of:

(a) A letter from the program with the school seal affixed. Photocopies will not be accepted.

(b) A notarized copy of the certificate of completion from the board approved course.

(c) A notarized letter stating that the registered dental assistant has performed supragingival scaling within the last five years.

(d) A notarized copy of the dental assisting program transcript with the supragingival course recorded.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-13.2

**20-03-01-06. Continuing dental education for qualified and registered dental assistants.** Each qualified or registered dental assistant shall provide evidence on forms supplied by the board that the qualified or registered dental assistant has

attended or participated in continuing dental education in accordance with the following conditions:

1. Continuing education activities include publications, seminars, symposiums, lectures, college courses, and online education.
2. The continuing dental education hours will accumulate on the basis of one hour of credit for each hour spent in education. Subject matter directly related to clinical dentistry will be accepted by the board without limit.
3. The minimum number of hours required within a two-year cycle is sixteen. Of these hours, a qualified or registered dental assistant may earn no more than eight hours from publications and online education. The continuing education must include:
   a. Two hours of ethics or jurisprudence. Passing the laws and rules examination is the equivalent of two hours of ethics or jurisprudence.
   b. Two hours of infection control.
   c. A cardiopulmonary resuscitation course.
   d. For registered dental anesthesia assistant permit holders, two hours related to sedation or anesthesia.
   e. For registered dental restorative assistant permit holders, two hours related to restorative dentistry.
4. Mere registration at a dental convention without specific attendance at continuing education presentations will not be creditable toward the continuing dental education requirement.
5. All qualified or registered dental assistants must hold a current cardiopulmonary resuscitation certificate.
6. The board may audit continuing education credits of a registered dental assistant. Proof of continuing education shall be maintained from the previous renewal cycle. Upon receiving notice of an audit from the board, a registered dental assistant shall provide satisfactory documentation of attendance at, or participation in, the continuing education activities listed on the licensee's continuing education form. Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the registration.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-13.1

## ARTICLE 20-04
## DENTAL HYGIENISTS

Chapter
20-04-01 Duties

## CHAPTER 20-04-01
## DUTIES

Section
20-04-01-01 Duties
20-04-01-02 Prohibited Services
20-04-01-03 Duties of Dental Hygienists
20-04-01-04 Additional Requirements for Licensure by Examination
20-04-01-05 Additional Requirements for Licensure by Credential Review
20-04-01-06 Additional Requirements for Applications
20-04-01-07 Inactive Status - License Reinstatement
20-04-01-08 Continuing Dental Education for Dental Hygienists

**20-04-01-01. Duties.** A dental hygienist may perform the following services under the general, direct, or indirect supervision of a dentist:

1. Complete prophylaxis to include removal of accumulated matter, deposits, accretions, or stains from the natural and restored surfaces of exposed teeth. The dental hygienist may also do root planing and soft tissue curettage upon direct order of the dentist.
2. Polish and smooth existing restorations <u>with a slow speed handpiece</u>.
3. Apply topical applications of drugs to the surface tissues of the mouth and to exposed surfaces of the teeth, including anticariogenic agents and desensitizing solutions.
4. Take impressions for study casts.
5. Take and record preliminary medical and dental histories for the interpretation by the dentist.
6. Take and record pulse, blood pressure, and temperature.
7. Provide oral hygiene treatment planning <u>after an oral assessment or dentist's diagnosis</u>.
8. Take dental radiographs.
9. Apply therapeutic agents subgingivally for the treatment of periodontal disease.
10. Hold impression trays in the mouth after placement by a dentist (e.g., reversible hydrocolloids, rubber base, etc.).
11. Receive removable dental prosthesis for cleaning and repair.
12. Dry root canal with paper points.
13. Place and remove rubber dams.
14. Place and remove matrix bands or wedges.
15. Take occlusal bite registration for study casts.

16. Place retraction cord in the gingival sulcus of a prepared tooth prior to the dentist taking an impression of the tooth.
17. Fabricate, adjust, place, recement, or remove a temporary crown, bridge, onlay, or temporary restorative material. This applies only to dentitions actively under treatment for which a permanent restoration is being fabricated.
18. Adjust permanent crowns outside of the mouth.
19. Perform nonsurgical clinical and laboratory ~~oral~~ diagnostic tests for interpretation by the dentist.
20. Apply pit and fissure sealants. Adjust sealants with slow speed handpiece.
21. Place and remove periodontal dressings, dry socket medications, and packing.
22. Remove sutures.
23. Monitor a patient who has been inducted by a dentist into nitrous oxide relative analgesia.
24. Take impressions for fixed or removable orthodontic appliances, athletic mouth guards, bleaching trays, bite splints, flippers, and removable prosthetic repairs.
25. Preselect and prefit orthodontic bands.
26. Place, tie, and remove ligature wires and elastic ties, and place orthodontic separators.
27. Place and remove arch wires or appliances that have been activated by a dentist.
28. Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative treatment.
29. Acid etch enamel surfaces prior to pit and fissure sealants, direct bonding of orthodontic brackets, or composite restorations.
30. Place orthodontic brackets using an indirect bonding technique by seating the transfer tray loaded with brackets previously positioned in the dental laboratory by a dentist.
31. Take face bow transfers.
32. Orally transmit a prescription that has been authorized by the supervising dentist.
33. Repack dry socket medication and packing for palliative treatment.
34. Administer emergency medications to a patient in order to assist the dentist.
35. A dental hygienist authorized by the board under contiguous supervision of an oral and maxillofacial surgeon may:
    a. Initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation, or general anesthesia; and
    b. Adjust the rate of intravenous fluids infusion only to maintain or keep the line patent or open.
36. A dental hygienist authorized by the board under direct visual supervision of an oral and maxillofacial surgeon may:
    a. Draw up and prepare medications;

b. Follow instructions to deliver medication into an intravenous line upon verbal command;
c. Adjust the rate of intravenous fluids infusion beyond a keep open rate;
d. Adjust an electronic device to provide medications, such as an infusion pump.

37. A dental hygienist under the direct supervision of a dentist may:
a. Place, carve and adjust class I and class V supragingival amalgam or glass ionomer restorations with hand instruments or a slow speed handpiece;
b. Adapt and cement stainless steel crowns; and
c. Place, contour, and adjust class I and class V supragingival composite restorations where the margins are entirely within the enamel with hand instruments or a slow speed handpiece.

**History:** Effective September 1, 1980; amended effective February 1, 1992; October 1, 1993; May 1, 1996; August 1, 1998; April 1, 2000; July 1, 2004; April 1, 2006; January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-03, 43-20-11, 43-20-12

**20-04-01-02. Prohibited services.** A dental hygienist may not perform the following services:

1. Diagnosis and treatment planning.
2. Surgery on hard or soft tissue.
3. Administer ~~or titrate~~ anesthetics, except topical and local anesthetic, as permitted under sections 20-04-01-01 and 20-04-01-03 or titrate local anesthetics, sedation, or general anesthesia drugs without a board authorized permit.
4. Any irreversible dental procedure or procedures which require the professional judgment and skill of a dentist.
5. ~~Placing a final restoration.~~
~~6. Contouring a final restoration, excluding~~ Adjust a crown which has ~~not~~ been cemented by a dentist.
~~7.~~ 6. Activate ~~Activating~~ any type of orthodontic appliance.
~~8.~~ 7. Cement~~ing~~ or bond~~ing~~ orthodontic bands or brackets that have not been previously placed by a dentist.
~~9.~~ 8. Place ~~Placing~~ bases or cavity liners.
9. Use a high speed handpiece inside the mouth.

**History:** Effective February 1, 1992; amended effective October 1, 1993; July 1, 2004; January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-03; 43-20-11, 43-20-12, 43-20-12.3

**20-04-01-03. Duties of dental hygienists.** A dental hygienist may perform the following services under the direct supervision of a dentist:

1. A licensed dental hygienist may apply for a permit to administer local anesthesia to a patient who is at least eighteen years old, under the direct supervision of a licensed dentist. To be considered for a permit, a hygienist must have successfully completed a didactic and clinical course in local anesthesia within the last twenty-four months sponsored by a dental or dental hygiene program accredited by the commission on dental accreditation of the American dental association resulting in the dental hygienist becoming clinically competent in the administration of local anesthesia.
2. A licensed dental hygienist applying for a local anesthesia permit who has been permitted to administer local anesthesia and who has continuously administered local anesthesia during the past three years must provide verification of the permit and continuous use to the North Dakota board of dental examiners. Verification may consist of:
    a. A letter from the accredited school with the school seal affixed. Photocopies will not be accepted.
    b. A notarized copy of the certification of the local anesthesia course completed.
    c. A notarized letter stating that the licensed dental hygienist has administered local anesthesia within the last three years.
    d. A notarized copy of the dental hygiene transcript with the local anesthesia course recorded.
3. A licensed dental hygienist requesting a permit to administer anesthesia who cannot provide verification as required in subsection 2 must retake and successfully pass a didactic and clinical course in local anesthesia sponsored by a dental or dental hygiene program accredited by the commission on dental accreditation of the American dental association.

**20-04-01-03.1 Duties of the dental hygienist requiring a permit.** The board may issue or renew a permit to a dental hygienist for the following:

1. The board may issue or renew a permit authorizing a dental hygienist to provide anesthesia assistance under the supervision of a dentist who specializes in oral and maxillofacial surgery, and meets the following requirements:
    a. The applicant submits evidence on forms prescribed by the board that the applicant meets any of the following requirements:
        (1) The applicant has completed a board approved dental anesthesia assistant education and training course within one year of application and has proof of current certification status from a board approved competency examination.
        (2) The applicant has completed a board approved dental anesthesia assistant education and training course and has proof of current certification status from a board approved competency examination.

b. The applicant has successfully completed training in intravenous access or phlebotomy that includes experience starting and maintaining intravenous lines;

c. The applicant holds current and valid certification for health care provider basic life support, or advanced cardiac life support or pediatric advanced life support; and

d. The applicant provides a copy of a valid North Dakota general anesthesia permit of the oral and maxillofacial surgeon where the registered dental hygienist will be performing anesthesia assistant services.

2. The board may issue or renew a permit on forms prescribed by the board to authorize a dental hygienist under the direct supervision of a dentist to provide restorative functions under the following conditions:

a. The applicant meets any of the following requirements:

(1) The applicant successfully completes a board approved curriculum from a program accredited by the Commission on Dental Accreditation of the American Dental Association or other board approved course and successfully passed the western regional examining board's restorative examination or other equivalent examinations approved by the board within the last five years, and was successfully completed the restorative function component of the dental assisting national board's certified restorative functions dental assistant certification exam, or

(2) Successfully passed the western regional examining board's restorative examination or other board approved examination over five years from the date of application and provides evidence from another state or jurisdiction where the applicant legally is or was authorized to perform restorative functions and certification from the supervising dentist of successful completion of at least 25 restorative procedures within the previous five years from the date of application.

b. A dental hygienist may perform the placement and finishing of direct alloy or direct composite restorations, under the direct supervision of a licensed dentist, after the supervising dentist has prepared the dentition for restoration.

c. The restorative functions shall only be performed after the patient has given informed consent for the placement of the restoration by a restorative functions dental hygienist.

d. Before the patient is released, the final restorations shall be checked and documented by the supervising dentist.

**History:** Effective July 1, 2004.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-03

**20-04-01-04. Additional requirements for licensure by examination.** The board may grant a license to practice dental hygiene to an applicant who has met the requirements of North Dakota Century Code section 43-20-01.2 and all the following requirements:

1. The applicant has passed the examination administered by the joint commission on national dental examinations or the dental hygiene certification board of Canada within two years of application.
2. The applicant has passed, within two years of application, a clinical competency examination administered by one of the following:
   a. Any regional dental testing service before September 17, 2009.
   b. Central regional dental testing service.
   c. Council of interstate testing agencies.
   d. Western regional examining board.
3. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
4. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.

**20-04-01-04.1. Clinical competency examination retakes.** A dental hygiene applicant may take a clinical examination three times before remedial training is required. After failing the examination for a third time, and prior to the fourth attempt of the examination, an applicant shall:

1. Submit to the board a detailed plan for remedial training by an accredited dental hygiene school. The board must approve the proposed remedial training.
2. Submit proof to the board of passing the remedial training within twenty-four months of its approval by the board. The board may grant or deny a fourth attempt of the clinical examination. A fourth attempt must occur within twelve months of the date of the board's decision. If an applicant fails any part of the examination after remedial training, the board must approve additional retakes.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.2

**20-04-01-05. Additional requirements for licensure by credential review.** The board may grant a license to practice dental hygiene to an applicant who has met the requirements of North Dakota Century Code section 43-20-01.3 and all the following requirements:

1. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
2. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.

3. The applicant has completed sixteen hours of continuing education in accordance with section 20-04-01-08 within two years of application.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.3

**20-04-01-06. Additional requirements for applications.** Applications must be completed within twelve months of filing. The board may require an interview with the applicant. In addition to the application requirements of North Dakota Century Code sections 43-20-01.2, 43-20-01.3, and 43-20-06, the board may require an application to include:

1. Proof of identity, including any name change.
2. An official transcript sent by an accredited dental school directly to the board.
3. Evidence demonstrating the applicant passed the examination administered by the joint commission on national dental examinations within two years of application.
4. Evidence demonstrating the applicant passed a clinical competency examination, approved by the board, within two years of application.
5. ~~An interview by the board.~~
~~6.~~ A certification, from the licensing board of every jurisdiction in which the applicant is licensed, that the applicant is licensed in good standing.
~~7.~~6. Certification that the applicant has completed a cardiopulmonary resuscitation course within two years of application.
~~8.~~7. Verification of physical health and visual acuity.
~~9.~~ 8. For applications for licensure by credential review, the law and rules stating the requirements for licensure, when the applicant was licensed, of the jurisdiction in which the applicant is licensed.
~~10.~~9. For applications for licensure by credential review and reinstatement from inactive status, proof of completion of sixteen hours of continuing education in accordance with section 20-04-01-08 within two years of application.
~~11.~~10 Any information required by the application forms prescribed by the board.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.2, 43-20-01.3, 43-20-06

**20-04-01-07. Inactive status - License reinstatement.** A dental hygienist may, upon payment of the fee determined by the board, place the dental hygienist's license on inactive status. A dental hygienist on inactive status shall be excused from the payment of renewal fees, except inactive status renewal fees, and continuing education. A dental hygienist on inactive status shall not practice in North Dakota. To reinstate a license on inactive status, the dental hygienist shall apply on a form prescribed by the board, pay a reinstatement fee, and meet all of the following requirements:

1. The applicant has passed a clinical competency examination administered by a regional dental testing service, approved by the board in section 20-04-01-04, within two years of application. The board may, within the board's discretion, waive this requirement.
2. The applicant passes a written examination on the laws and rules governing the practice of dentistry in this state administered by the board at a meeting.
3. The applicant has completed sixteen hours of continuing education in accordance with section 20-04-01-08 within two years of application.
4. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
5. Grounds for denial of the application under North Dakota Century Code section 43-20-05 do not exist.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-06

**20-04-01-08. Continuing dental education for dental hygienists.** Each dental hygienist shall provide evidence on forms supplied by the board that the dental hygienist has attended or participated in continuing dental education in accordance with the following conditions:

1. Continuing education activities include publications, seminars, symposiums, lectures, college courses, and online education.
2. The continuing dental education hours will accumulate on the basis of one hour of credit for each hour spent in education. Subject matter directly related to clinical dentistry will be accepted by the board without limit.
3. The minimum number of hours required within a two-year cycle is sixteen. Of these hours, a dental hygienist may earn no more than eight hours from publications and online education. The continuing education must include:
   a. Two hours of ethics or jurisprudence. Passing the laws and rules examination is the equivalent of two hours of ethics or jurisprudence.
   b. Two hours of infection control.
   c. A cardiopulmonary resuscitation course.
   d. For registered dental anesthesia hygienist permit holders, two hours related to sedation or anesthesia.
   e. For registered dental restorative hygienist permit holders, two hours related to restorative dentistry.
4. Mere registration at a dental convention without specific attendance at continuing education presentations will not be creditable toward the continuing dental education requirement.
5. All dental hygienists must hold a current cardiopulmonary resuscitation certificate.

**History:** Effective January 1, 2011.
**General Authority:** NDCC 43-20-10
**Law Implemented:** NDCC 43-20-01.4

## ARTICLE 20-05
## FEES

Chapter
20-05-01 Fees

## CHAPTER 20-05-01
## FEES

Section
20-05-01-01 Fees

**20-05-01-01. Fees.** The board shall charge the following nonrefundable fees:

1. For dentists:
   a. License by examination application fee $440.00
   b. License by credential review application fee $1,200.00
   c. Renewal fee $400.00
   d. Late fee $400.00
   e. Temporary license application and license fee $250.00
   f. Volunteer license application and license fee $65.00
   g. Inactive status application fee $35.00
   h. Inactive status renewal fee $35.00
   i. Inactive status reinstatement fee $400.00
   j. Dermal fillers and botulinum toxin permit $200
2. For dental hygienists:
   a. License by examination application fee $200.00
   b. License by credential review application fee $450.00
   c. Renewal fee $150.00
   d. Late fee $150.00
   e. Inactive status application fee $35.00
   f. Inactive status renewal fee $35.00
   g. Inactive status reinstatement fee $150.00
3. For registered and qualified dental assistants:
   a. Application fee $130.00
   b. Renewal fee $100.00
   c. Late fee $100.00
4. For anesthesia permits:
   a. Application fee $200.00
   b. Inspection fee actual cost
   c. Renewal fee $200.00
   d. Late fee $200.00
5. For a duplicate license, registration, or permit $45.00

**History:** Effective May 1, 1992; amended effective October 1, 1993; May 1, 1996; August 1, 1998; April 1, 2000; June 1, 2002; July 1, 2004; April 1, 2006; January 1, 2008; January 1, 2011.

**General Authority:** NDCC 43-20-10, 43-28-06
**Law Implemented:** NDCC 43-20-01.2, 43-20-01.3, 43-20-01.4, 43-20-06, 43-20-13.1, 43-20-13.2, 43-28-11, 43-28-16.2, 43-28-17, 43-28-24, 43-28-27

Adopted by the NDSBDE 4/12/2014