### How to Use the Following Charts

View which job designations are used in your state.

Be sure to follow the legal requirements to perform dental radiographic procedures.

See which tasks are not permitted by state law.

Review all the allowable tasks for each level of dental assisting as published in the state practice act.

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### 2019 Allowable and Prohibited Duties for Dental Assistants: New Hampshire

#### Job Title

<table>
<thead>
<tr>
<th>Dental Assistant Radiography</th>
<th>Dental Assistant Expanded Functions (EFDA)</th>
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</thead>
<tbody>
<tr>
<td><strong>Proposed</strong></td>
<td><strong>DANB</strong> (CDA)</td>
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<tr>
<td><strong>Standardized</strong></td>
<td><strong>DANB</strong> (CDA)</td>
</tr>
</tbody>
</table>

**New Hampshire**

- **Prohibited Duties for Dental Assistants**
  - 1. Collect specimens
  - 2. Prepare dental castings
  - 3. Mix and place impression material
  - 4. Mix and place temporary fillings
  - 5. Mix and place temporary restorations
  - 6. Mix and place permanent restorations
  - 7. Mix and place composite restorations
  - 8. Mix and place fixed orthodontic appliances
  - 9. Mix and place removable orthodontic appliances
  - 10. Mix and place orthopedic appliances
  - 11. Mix and place orthopedic equipment
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  - **Expanded Functions**
    - 71. Mix and place orthopedic equipment
    - 72. Mix and place orthopedic supplies
    - 73. Mix and place orthopedic instruments
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    - 98. Mix and place orthopedic equipment
    - 99. Mix and place orthopedic supplies
    - 100. Mix and place orthopedic instruments

**New Hampshire**

- **Compare your state’s job designations to those used as standardized job titles in the DANB/ADAA Core Competencies Study.**

- **If your state’s dental practice act specifically defines levels of supervision, the state-specific definition is noted below the chart. See Appendix B for more information about supervision.**

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These data are presented for informational purposes only and are not intended as a legal opinion regarding dental practice in any state. DANB confers with each state’s dental board at least annually regarding the accuracy and currency of this information. To verify, or if you have any questions, please contact your state’s dental board.

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To qualify to place, contour and adjust direct restorative materials within the oral cavity, one must register as an Expanded Function Dental Auxiliary (EFDA) with the New Hampshire Board of Dental Examiners (NHBDE). To register, one must:

- Be at least 18 years of age
- Be a registered dental hygienist
  - OR
  - Hold current DANB CDA certification (and be qualified to perform preliminary inspection of the oral cavity)
  - OR
  - Be a graduate of a CODA-accredited dental assisting program
- Have a minimum of 4,500 hours of dental clinical experience
- Obtain a recommendation for the EFDA course from a NH-licensed dentist
- Complete an EFDA course in dental restorations meeting requirements established by rule of the NHBDE
- Be currently certified in BLS-HCP
- Apply to the NHBDE for an EFDA permit

(Note: A dental auxiliary qualified in these restorative functions in another jurisdiction may qualify for endorsement by the Board by presenting written documentation of equivalent training and a letter from a supervising dentist attesting to experience with direct restorations within the previous two years.)

To perform any expanded duty in New Hampshire, with the exception of restorative duties restricted to EFDA's, a dental assistant must:

- Be at least 18 years of age
- Be a Graduate Dental Assistant* or DANB Certified Dental Assistant
  - OR
  - Pass an introduction to dental assisting course and qualify in infection control, as described on p. 86
- Meet specific course, certification, or experience requirements for each function, as described on p. 86

New Hampshire allows dental assistants who hold the national DANB Certified Dental Assistant (CDA) certification or are Graduate Dental Assistants* to perform specified duties.

*Dental assistants in New Hampshire can earn status as a Graduate Dental Assistant by graduating from a CODA-accredited program of dental assisting.

A traditional dental assistant in New Hampshire may perform basic supportive dental procedures specified by the state dental practice act under the direct or general supervision of a licensed dentist. There are no education or training requirements for this level of dental assisting. A traditional dental assistant is a dental assistant who is neither a Certified Dental Assistant nor a Graduate Dental Assistant.

To perform specified duties under public health supervision to assist a Certified Public Health Dental Hygienist (CPHDH), a dental assistant must qualify in infection control in the dental office as described on p. 86.
### Under Direct Supervision

85. 

*Direct Supervision:* A dentist with an active license is in the dental office, authorizes the procedures, remains in the dental office while the procedures are being performed and, before dismissal of the patient, evaluates the performance of the dental assistant.

**General Supervision:** A dentist with an active license has authorized the procedures; the procedures are being carried out in accordance with the dentist’s diagnosis and treatment plan; and the procedures will be personally evaluated and reviewed by the dentist with the patient at least once in a 12-month period.

**Public Health Supervision:** A dentist with an active license authorizes procedures which are to be carried out by: (1) A dental hygienist with an active license practicing in a school, hospital or other institution, or for a homebound person who shall be supervised by a CPHDH as set forth in Den 401.01 (d).
Graduate Dental Assistant requirements.

Traditional Dental Assistants to qualify to perform the expanded dental assistant functions permitted under New Hampshire regulations. See p. 84 for Graduate Dental Assistant requirements.

<table>
<thead>
<tr>
<th>Summary of Expanded Functions Requirements for Graduate Dental Assistants or for Holders of DANB CDA Certification</th>
<th>Summary of Expanded Functions Requirements for Traditional Dental Assistants</th>
</tr>
</thead>
</table>

**Introduction to Dental Assisting**

For more detailed information, see New Hampshire administrative rule Den 302.06(e)-(f).

- No further requirements beyond those to earn status as a Graduate Dental Assistant or to hold DANB’s CDA certification
- Successfully complete a course and exam in infection control meeting requirements established by rule of the NHBDE (Note: The DALE Foundation’s DANB ICE Review course meets this requirement. Successful performance on DANB’s Infection Control exam [ICE] also meets this requirement.)

**Function: Infection control in the dental office**

For more detailed information, see New Hampshire administrative rule Den 302.06(b).

- Successfully complete a course and exam in infection control meeting requirements established by rule of the NHBDE
- Qualify in infection control (see requirements above), AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Successfully complete a course and exam in infection control meeting requirements established by rule of the NHBDE

**Function: Provisional crown and bridge restorations**

For more detailed information, see New Hampshire administrative rule Den 302.06(k)-(m).

- Successfully complete a course and exam in provisional crown and bridge restorations meeting requirements established by rule of the NHBDE
- Have at least 200 hours of clinical dental assisting experience prior to course, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in provisional crown and bridge restorations meeting requirements established by rule of the NHBDE

**Function: Orthodontic duties**

For more detailed information, see New Hampshire administrative rule Den 302.06(n)-(p).

- Successfully complete a course and exam in orthodontic duties meeting requirements established by rule of the NHBDE
- Have at least 200 hours of clinical dental assisting experience prior to course, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in orthodontic duties meeting requirements established by rule of the NHBDE

**Function: Dental sealants**

For more detailed information, see New Hampshire administrative rule Den 302.06(q)-(r).

- Successfully complete a course and exam in dental sealants meeting requirements established by rule of the NHBDE
- Have at least 400 hours of clinical dental assisting experience prior to course, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in dental sealants meeting requirements established by rule of the NHBDE

**Function: Coronal polishing**

For more detailed information, see New Hampshire administrative rule Den 302.06(t)-(v).

- Successfully complete a course and exam in coronal polishing meeting requirements established by rule of the NHBDE
- Have at least 400 hours of clinical dental assisting experience, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in coronal polishing meeting requirements established by rule of the NHBDE

**Function: Monitoring nitrous oxide administration**

For more detailed information, see New Hampshire administrative rule Den 302.06(w)-(y).

- Successfully complete a course and exam in nitrous oxide meeting requirements established by rule of the NHBDE, AND
- Be currently certified in BLS-HCP
- Have at least 400 hours of clinical dental assisting experience prior to course, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in monitoring the administration of nitrous oxide anesthesia meeting requirements established by rule of the NHBDE, AND
- Be currently certified in BLS-HCP.

**Function: In-office tooth whitening**

For more detailed information, see New Hampshire administrative rule Den 302.06(z)-(ab).

- Successfully complete a course and exam in in-office tooth whitening meeting requirements established by rule of the NHBDE
- Have at least 400 hours of clinical dental assisting experience prior to course, AND
- Meet Introduction to Dental Assisting course requirements (see requirements above), AND
- Qualify in infection control (see requirements above), AND
- Successfully complete a course and exam in in-office tooth whitening meeting requirements established by rule of the NHBDE
Appendix A: Numbering System for Dental Assisting Functions

The following list of 70 dental assisting tasks was developed by the ADAA/DANB Alliance as part of a study of dental assisting core competencies conducted between 2002 and 2005. These selected tasks were determined to be representative of a broad range of dental assisting core competencies.

The numbered functions listed in the preceding state charts correspond to functions that were included in the DANB/ADAA core competencies study and use language directly from the state's dental practice act. The numbers are provided to facilitate comparison between and among states. Functions listed with bullets in the preceding charts are part of the state's practice act but are not specific matches to the functions that were included in the 2002-2005 study.

1. Perform mouth mirror inspection of the oral cavity
2. Chart existing restorations or conditions
3. Phone in prescriptions at the direction of the dentist
4. Receive and prepare patients for treatment, including seating, positioning chair, and placing napkin
5. Complete laboratory authorization forms
6. Place and remove retraction cord
7. Perform routine maintenance of dental equipment
8. Monitor and respond to postsurgical bleeding
9. Perform coronal polishing procedures
10. Apply effective communication techniques with a variety of patients
11. Transfer dental instruments
12. Place amalgam for condensation by the dentist
13. Remove sutures
14. Dry canals
15. Tie in archwires
16. Demonstrate knowledge of ethics/jurisprudence/patient confidentiality
17. Identify features of rotary instruments
18. Apply topical fluoride
19. Select and manipulate gypsums and waxes
20. Perform supragingival scaling
21. Mix dental materials
22. Expose radiographs
23. Evaluate radiographs for diagnostic quality
24. Provide patient preventive education and oral hygiene instruction
25. Perform sterilization and disinfection procedures
26. Provide pre- and post-operative instructions
27. Place and remove dental dam
28. Pour, trim, and evaluate the quality of diagnostic casts
29. Size and place orthodontic bands and brackets
30. Using the concepts of four-handed dentistry, assist with basic restorative procedures, including prosthodontics and restorative dentistry
31. Identify intraoral anatomy
32. Demonstrate understanding of the OSHA Hazard Communication Standard
33. Place, cure and finish composite resin restorations
34. Place liners and bases
35. Place periodontal dressings
36. Demonstrate understanding of the OSHA Bloodborne Pathogens Standard
37. Take and record vital signs
38. Monitor vital signs
39. Clean and polish removable appliances and prostheses
40. Apply pit and fissure sealants
41. Prepare procedural trays/armamentaria set-ups
42. Place orthodontic separators
43. Size and fit stainless steel crowns
44. Take preliminary impressions
45. Place and remove matrix bands
46. Take final impressions
47. Fabricate and place temporary crowns
48. Maintain field of operation during dental procedures through the use of retraction, suction, irrigation, drying, placing and removing cotton rolls, etc.
49. Perform vitality tests
50. Place temporary fillings
51. Carve amalgams
52. Process dental radiographs
53. Mount and label dental radiographs
54. Remove temporary crowns and cements
55. Remove temporary fillings
56. Apply topical anesthetic to the injection site
57. Demonstrate understanding of the Centers for Disease Control and Prevention Guidelines
58. Using the concepts of four-handed dentistry, assist with basic intraoral surgical procedures, including extractions, periodontics, endodontics, and implants
59. Monitor nitrous oxide/oxygen analgesia
60. Maintain emergency kit
61. Remove permanent cement from supragingival surfaces
62. Remove periodontal dressings
63. Place post-extraction dressings
64. Fabricate custom trays, to include impression and bleaching trays, and athletic mouthguards
65. Recognize basic medical emergencies
66. Recognize basic dental emergencies
67. Respond to basic medical emergencies
68. Respond to basic dental emergencies
69. Remove post-extraction dressings
70. Place stainless steel crown
An important consideration in the discussion of the delegation of tasks to dental assistants is that of supervision of dental assistants by their dentist-employers. The American Dental Association (ADA) has identified five levels of supervision for dental auxiliaries, including dental assistants, which it defines in its “Comprehensive Policy Statement on Allied Dental Personnel,” (2010: 505) which is part of its Current Policies, last updated in 2018. Note that “allied dental personnel” refers to dental assistants, dental hygienists, community dental health coordinators and dental laboratory technicians.

The five levels of supervision defined by the ADA are as follows:

**Personal supervision:** A type of supervision in which the dentist is personally operating on a patient and authorizes the allied dental personnel to aid treatment by concurrently performing a supportive procedure.

**Direct supervision:** A type of supervision in which a dentist is in the dental office or treatment facility, personally diagnoses and treatment plans 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 allied dental personnel and evaluates their performance before dismissal of the patient.

**Indirect supervision:** A type of supervision in which a dentist is in the dental office or treatment facility, personally diagnosed and treatment planned 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 allied dental personnel, and will evaluate the performance of the allied dental personnel.

**General supervision:** A type of supervision in which a dentist is not required to be in the dental office or treatment facility when procedures are provided, but has personally diagnosed and treatment planned the condition to be treated, has personally authorized the procedures, and will evaluate the performance of the allied dental personnel.

**Public Health Supervision:** A type of supervision in which a licensed dental hygienist may provide dental hygiene services, as specified by state law or regulations, when such services are provided as part of an organized community program in various public health settings, as designated by state law, and with general oversight of such programs by a licensed dentist designated by the state.

Furthermore, the ADA’s “Comprehensive Policy Statement on Allied Dental Personnel” stipulates that intraoral expanded functions should be performed by allied dental personnel “under the supervision of a dentist.”

Because the study of dental assisting core competencies undertaken by the ADAA/DANB Alliance did not address the question of supervision, the ADAA/DANB Alliance does not make any recommendations as to the levels of supervision that should be necessary for the delegation of the tasks included in the study to dental assistants. However, the ADAA/DANB Alliance believes it is important to call attention to the fact that, while the ADA has defined supervision levels in the aforementioned policy statement, which governs the ADA’s own activities and the activities of its members, these definitions have not been uniformly adopted by the dental boards of every U.S. state or district.

*For the purposes of the attached charts, if a state’s dental practice act specifically defines levels of supervision, the state-specific definition is noted in the footer of the second page of the state chart.*