

Dental Hygiene Practice Act Overview: Permitted Functions and Supervision Levels by State

Function	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	IL	IN	IA	KS
Prophylaxis	D	G/A	G/A	G/A	G/A	A	G/A	G	G	G/A	D/G	D/G	G	G	D/G	G/A	G/A
X-Rays	D	G/A	G/A	G	G/A	A	G/A	G	G	G		D/G	G	G	D/G	G/A	G
Local Anesthesia		G/A	D	D	D	G	D		D	D ³		D	G	D	D	D	D
Topical Anesthesia	D	G/A	G/A		G/A	A	G/A	G	G	G	D	D/G	G	G	D	G/A	G/A
Fluoride	D	G/A	G/A	G/A	G/A	A	G/A	G	G	G/A	D	D/G	G	G	D/G	G/A	G/A
Pit/Fissure Sealants	D	G/A	G/A	G/A	G/A	A	G/A	G	G	G/A	D	D/G	G	G	D	G/A	G
Root Planing	D	G/A	G	D	G/A	G	G/A	G	G	G	D	D/G	G	G	D	G/A	G
Soft Tissue Curettage	D	G	G	D	D	G		G	G	D	D	D/G		G			G
Administer N2O		D	D	D	D	D			D				ID	D		D	G
Study Cast Impressions	D	G	G	G	G/A	A	G/A	G	G	ID	D	D/G	G	G	D	G	G
Place Perio Dressings	D	G	D		G/A	G	G/A	G	D	G	D	D/G	G		D	G	G
Remove Perio Dressings	D	G	D		G/A	G	G/A	G	D	G	D	D/G	G	G	D	G	G
Place Sutures			D									D/G					
Remove Sutures	D	G	G		G/A	G	G/A	G	D	G	D	D/G	G	G	D	G	G
Dental Hygiene Diagnosis						A	G										
Treatment Planning					G/A	A										G	G/A
Dental Hygiene Assessment													G				
Prescriptive Authority																	

D Direct Supervision Levels; dentist needs to be present

P Personal Supervision: Dentist needs to authorize, be present and check prior to patient dismissal

ID Indirect Supervision Levels; dentist must authorize procedure and be in the dental office while the procedure is performed

G General Supervision Levels; dentist needs to authorize prior to services, but need not be present

CP Collaborative Practice: RDH may practice without supervision, pursuant to a collaborative agreement between the RDH and a licensed dentist

A Direct Access Supervision Levels; hygienists can provide services as s/he determines appropriate without specific authorization

Two letters denote separate supervision levels depending on setting (Private/Public)

1. Rules pending

2. Upon direct order

3. On patients 18 years and older

4. Public health supervision applies to fluoride varnish only

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Function	KY	LA	ME	MD	MA	MI	MN	MS	MO	MT	NE	NV	NH	NJ	NM	NY	NC
Prophylaxis	G/A	D/G	G/A	G	G/A	G/A	G/A	D	G/A	G/A	G/A	G/A	G/A	D/G	G/A	G/CP	D/G
X-Rays	G	D/G	G/A	G	G/A	G/A	G/A	D	G	G/A	G	G/A	G	D/G	G/A	G/CP	D/G
Local Anesthesia	D	D	D	D	D	D	G		ID	D	D	D/G	D	D	D/G	P	
Topical Anesthesia	D	D/G	G/A	G	G/A	G/A	G		ID	G/A	G	G/A	G	D	D	G/CP	D/G
Fluoride	G/A	D/G	G/A	G	G/A	G/A	G/A	D/G ⁴	G/A	G/A	G/A	G/A	G/A	D/G	G/A	G/CP	D/G
Pit/Fissure Sealants	G/A	D/G	G/A	G	G/A	G/A	G/A	D	G/A	G/A	G/A	G/A	G/A	D/G	G	G/CP	
Root Planing	G/A	D	G/A	G	G/A	G/A	G/A	D	G	G/A	G	G/A	G/A	D/G	G	G/CP	D/G
Soft Tissue Curettage			G/A	G		D	G	D	G	G/A	G	G/A			G		
Administer N2O	D	D				D	G	D	D			D/G	D	D		p	
Study Cast Impressions	G	D	G/A	G	G/A	G/A	G		G	G	G	G/A	G	D	G	G/CP	D/G
Place Perio Dressings	G	D	D	G	G/A	G/A	G		G	G	G	G/A		D		p	
Remove Perio Dressings	G	D	G/A	G	G/A	G/A	G		D	G	G	G/A	G	D	G	p	D/G
Place Sutures																	
Remove Sutures	G	D	G/A	G	G/A	G/A	G		G	G	G	G/A	G	D		p	D/G
Dental Hygiene Diagnosis																	
Treatment Planning												G/A				G/CP	
Dental Hygiene Assessment																G/CP	
Prescriptive Authority			A												G/A		

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 - CP** Collaborative Practice: RDH may practice without supervision, pursuant to a collaborative agreement between the RDH and a licensed dentist
 - A** Direct Access Supervision Levels; hygienists can provide services as s/he determines appropriate without specific authorization
- Two letters denote separate supervision levels depending on setting (Private/Public)*
1. Rules pending
 2. Upon direct order
 3. On patients 18 years and older
 4. Public health supervision applies to fluoride varnish only



This document is intended for informational purposes only and does not constitute a legal opinion regarding dental practice in any state. To verify any information, please contact your state's dental board.

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Function	ND	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY
Prophylaxis	G	G/A	G	G/A	G/A	G/A	G	G	G	G/A	G	G/A	G/A	G/A	G/A	G/A	G
X-Rays	G	G	G	G/A	G/A	G/A	G	G	G	G/A	G	G/A	G	G	G	G	G
Local Anesthesia	D	D	D	G	D	D	D	D	D		D	D	D	G	D	ID	D
Topical Anesthesia	G	G	G	G/A	G/G	G/A	D	G	G	G/A	G	G/A	G	G	G	G	G
Fluoride	G	G/A	G	G/A	G/G	G/A	G	G	G	G/A	G	G/A	G/A	G/A	A	G	G
Pit/Fissure Sealants	G	G/A	G	G/A	G/A	G/A	D/G	G	G	G/A	G	G/A	G/A	G/A	G	G/A	D
Root Planing	G ²	G	G	G/A	G/A	G/A	D/G	G	D	G/A	G	G/A	G	G/A	G	G/A	G
Soft Tissue Curettage	G ²	D	G	G/A				G	D		G			D/A			
Administer N2O		D	D	D		D		D	D		D		D ³	D		ID	D
Study Cast Impressions	G	G	G	G/A	D	D	D		D	G/A	G	G	G	G	G	G	G
Place Perio Dressings	G	G	G	G/A		D				G/A	G	G	G	D	D	D	D
Remove Perio Dressings	G	G	G	G/A		D	D		D	G/A	G	G	G	D	D	D	D
Place Sutures																	
Remove Sutures	G	D	G	G/A	D	D	D		D	G/A	G	G	G	D	D	D	G
Dental Hygiene Diagnosis				A													
Treatment Planning	G			A													
Dental Hygiene Assessment																	
Prescriptive Authority				G/A													

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