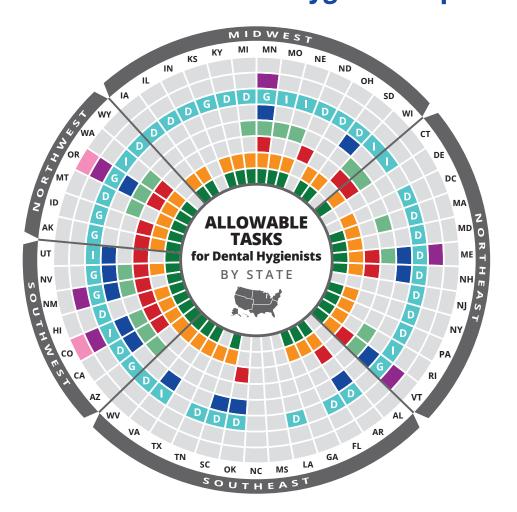
Variation in Dental Hygiene Scope of Practice by State



The purpose of this graphic is to help planners, policymakers, and others see differences in legal scope of practice across states, particularly in public health settings.

Research has shown that a broader scope of practice for dental hygienists is positively and significantly associated with improved oral health outcomes in a state's population.^{1,2}



Prescriptive Authority

Local Anesthesia

D Direct | I Indirect* G General

Supervision of Dental Assistants

Direct Medicaid Reimbursement

Dental Hygiene Treatment Planning

Provision of Sealants

Direct Access to Prophylaxis

Not Allowed / No Law

Dental Hygiene Diagnosis

The identication of oral conditions for which treatment falls within the dental hygiene scope of practice, as part of a dental hygiene treatment plan.

Prescriptive Authority

The ability to prescribe, administer, and dispense fluoride, topical medications, and chlorhexidine.

Local Anesthesia

The administration of local anesthesia.

LEVEL OF SUPERVISION

- **Direct:** The dentist is required to be physically present during the administration of local anesthesia by the dental hygienist.
- Indirect: The dentist is required to be on the premises during the administration of local anesthesia by the dental hygienist.*
- **General:** The dentist is required to authorize the administration of local anesthesia by the dental hygienist but is not required to be on the premises during the procedure.

Supervision of Dental Assistants

The ability to supervise dental assistants when performing tasks within the dental hygiene scope of practice.

Direct Medicaid Reimbursement

The direct Medicaid reimbursement of dental hygiene services to the dental hygienist.

Dental Hygiene Treatment Planning

The ability of a dental hygienist to assess oral conditions and formulate treatment plans for services within the dental hygiene scope of practice.

Provision of Sealants Without Prior Examination

The ability of a dental hygienist working in a public health setting to provide sealants without prior examination by a dentist.

Direct Access to Prophylaxis from a Dental Hygienist

The ability of a dental hygienist working in a public health setting to provide prophylaxis without prior examination by a dentist.



Sources: 1. Langelier M, Baker B, Continelli T. Development of a New Dental Hygiene Professional Practice Index by State, 2016. Rensselaer, NY: Oral Health Workforce Research Center, Center for Health Workforce Studies, School of Public Health, SUNY Albany; November 2016. 2. Langelier M, Continelli T, Moore J, Baker B, Surdu S. Expanded Scopes of Practice for Dental Hygienists Associated With Improved Oral Health Outcomes for Adults. Health Affairs. 2016;35(12):2207-2215.



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^{*} In Colorado, indirect supervision requires only preapproval, not the presence of a dentist.