ARTICLE 20-03 DENTAL ASSISTANTS

Chapter

20-03-01 Duties

CHAPTER 20-03-01 DUTIES

Section 20-03-01-01	Duties
20-03-01-01.1	Expanded Duties of Dental Assistants
20-03-01-01.2	Requirements of Permit for Expanded 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20-03-01-03	Annual Registration of Dental Assistants Performing Expanded Duties [Repealed]
20-03-01-04	Criteria for Dental Assistants Placing Sealants [Repealed]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 Dental Assistants
20-03-01-05.1	Additional Expanded Duties of Registered Dental Assistants [Repealed]
20-03-01-06	Continuing Dental Education for Dental Assistants

20-03-01-01. Duties.

Duties are delegated to dental assistants under prescribed levels of supervision as follows:

- 1. A dental assistant who is not registered with the board and who is employed by a dentist may:
 - Perform the following duties under direct supervision:
 - (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, topical fluoride, fluoride varnish, and desensitizing agents, but not including caustic agents.
 - (4) Receive removable dental prosthesis for cleaning or repair.
 - (5) Take impressions for study casts, bleaching trays or orthodontic retainers.
 - (6) Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base).
 - (7) Retract patient's cheek, tongue, or other tissue parts during a dental procedure.
 - (8) Remove such debris as is normally created in the course of treatment during or after dental procedures by vacuum devices, compressed air, mouthwashes, and water.
 - (9) Isolate the operative field, not to include rubber dams.
 - (10) Hold a curing light for any dental procedure. Curing lights may not include a laser capable of cutting, burning, or damaging hard or soft tissue or for electrosurgery for tissue retraction.
 - (11) Produce on a patient of record, a final scan by digital capture for review and inspection by the authorizing dentist for a prescriptive fixed or removable appliance.

Commented [DS1]: Suggestion to allow Unregistered DAs to take radiographs after trained.

Board explored this possibility in 2024. But we were told we can't because other statutes outside of the dental statutes require anyone in ND to be regulated by the government before taking x-rays. If we don't regulate them under our exception to those laws, the individual would have to get a license from the Medical Imaging Board in order to take radiographs. Board declined to make this change at 8/1 mtg.

Commented [DS2]: This change added by Board at 8/1/2025 mtg.

Commented [DS3]: At 8/1/2025 mtg, the Board declined to expand rules to allow assistants to utilize lasers. Patient safety.

- (12) Monitor of a patient who has been induced into nitrous oxide analgesia if the dentist has provided sufficient training to the dental assistant completed after January 1, 2024. The dentist shall maintain documentation of the training for the duration of the delegation and shall provide documentation of the training to the board upon request.
- b. Perform the following duties under general supervision:
 - (1) Provide oral hygiene instructions and education.
 - (2) Remove periodontal dressings.
- c. An unregistered dental assistant enrolled in a board-approved qualified dental assistant program and working under the direct supervision of a dentist may perform the duties of a qualified dental assistant.
- 2. A qualified dental assistant may:
 - a. Perform the following duties under the direct supervision of a dentist:
 - (1) Duties set forth in subsection 1.
 - (2) Acid etch enamel surfaces as directed by the dentist.
 - (3) Dry root canal with paper points.
 - (4) Apply resin infiltration.
 - (5) Orally transmit a prescription that has been authorized by the supervising dentist.
 - (6) Remove band and bracket adhesives with a slow-speed handpiece.
 - (7) Place and remove matrix bands and wedges.
 - b. Perform the following duties under the indirect supervision of a dentist:

Commented [DS4]: Added 9/19 to clarify that QDA duties can also be carried out by an unregistered assistant if they meet certain criteria—hours of training while they earn their 300 OJT hours

Commented [DS5]: Per 8/1/2025 Meeting, to be consistent we changed the alphabetical order of General and Indirect, so Indirect is now b and General is now c.

- (1) Polish coronal surfaces of teeth with a rubber cup or brush after the dentist provides the dental assistant with sufficient training. The dentist shall maintain documentation of the training completion for the duration of the delegation and provide it to the board upon request.
- (2) 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.

b.c. Perform the following duties under the general supervision of a dentist:

- (1) Produce on a patient of record, a final scan by digital capture for review and inspection by the authorizing dentist for a prescriptive fixed or removable appliance.
- (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 and anticariogenic agents, and desensitizing agents.
- (5) Place and remove arch wires or appliances that have been activated by the dentist.
- (6) Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative care.
- (7) Remove sutures.
- (8) Place, tie, and remove ligature wires and elastic ties, and select and place orthodontic separators.
- (9) Preselect and prefit orthodontic bands.
- (10) Repack dry socket medication and packing for palliative care.
- (11) Take dental radiographs.

e.d. Perform the following duties under the indirect supervision of a dentist:

Commented [DS6]: 8/1/25 meeting the Board declined to approve QDA for air polishing; training/safety reasons

- (1) Polish coronal surfaces of teeth with a rubber cup or brush after the dentist provides the dental assistant with sufficient training. The dentist shall maintain documentation of the training completion for the duration of the delegation and provide it to the board upon request.
- (2) 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.
- 3. A qualified dental assistant-limited radiology registrant may perform the duties listed in subsection 1, and may take dental radiographs under the general supervision of a dentist.
- A registered dental assistant may perform the duties set forth in subsection 2 and the following duties under the direct supervision of a dentist:
 - Acid etch enamel surfaces prior to direct bonding of orthodontic brackets or composite restorations.
 - b. Take face bow transfers.
 - c. Adjust permanent crowns outside of the mouth.
 - Administer emergency medications to a patient in order to assist the dentist in an emergency.
 - e. Hold impression trays in the mouth (e.g., reversible hydrocolloids, rubber base).
- A registered dental assistant may perform the following duties on a patient of record under the indirect supervision of a dentist:
 - a. Place and remove rubber dams.
 - Place retraction cord in the gingival sulcus of a prepared tooth prior to the dentist taking an impression of the tooth.
 - c. Remove excess cement from inlays, crowns, bridges, and orthodontic appliances with hand instruments or a slow-speed handpiece.
 - d. Place and remove periodontal dressings.
 - Monitor a patient who has been inducted by a dentist into nitrous oxide inhalation analgesia.
 - Apply bleaching solution, activate light source, and monitor and remove bleaching materials.
 - g. 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.
- 6. A registered dental assistant may perform the following duties under the 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.

Commented [DS7]: 8/1/25 meeting the Board declined to approve perio probing by RDA; patient safety and training.

Commented [DS8]: 8/1/25 meeting the Board declined to approve allowing RDA to do blood draws; only 1 state does it; what else would the applicant do with the blood; seems like the dentist may be advised to hire medical professionals/phlebotomists who can do tasks like this with their other training; other boards regulate this issue and it is not a smooth process to regulate something other boards already are.

Commented [DS9]: 8/1/25 meeting the Board declined to approve due to statutory restriction.

Allowing RDAs to adminster local.

AAG Input: We can't add a rule allowing Assistants to administer Local (even if we remove this prohibition) because we have a statute that regulates Local Anesthetic. It only allows dentists to delegate the administration of Local to RDH's. See NDCC 43-20-12.3. The legislature just modified the statute to expand the duty, but still only allows the delegation to RDHs. The statute doesn't allow it to delegate it to assistants.

Commented [DS10]: Board change suggested during 8/1/2025 meeting

- c. Apply topical medications and drugs to oral tissues, including topical anesthetic, topical fluoride, fluoride varnish, silver diamine fluoride, hemostatic agents, and desensitizing 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.
- Remove sutures.
- h. Cut and remove arch wires or replace loose bands, loose brackets, or other orthodontic appliances for palliative treatment.
- i. Place, tie, and remove ligature wires and elastic ties, and place orthodontic separators.
- j. Provide oral hygiene education and instruction.
- k. Provide an oral assessment for interpretation by the dentist.
- I. Repack dry socket medication and packing for palliative treatment.
- m. Apply pit and fissure sealants if the registered dental assistant has provided documentation of a board-approved sealant course or training that includes hand skills, and has received an endorsement from the board. Adjust sealants with slow-speed handpiece.
- n. Polish the coronal surfaces of the teeth with a rubber cup or brush, or by use of air polishing.
- o. Polish and smooth existing restorations with a slow-speed handpiece.
- p. Take dental radiographs.
- q. Take <u>final</u> impressions for fixed or removable <u>orthodontic</u> appliances, <u>athletic mouth</u> guards, <u>bleaching trays</u>, <u>bite splints</u>, <u>flippers</u>, <u>and removable prosthetic repairs</u>. <u>Impressions must be reviewed and approved by the dentist before being used for fabrication</u>.
- r. Preselect and prefit orthodontic bands.
- s. Perform nonsurgical clinical and laboratory diagnosis tests, including pulp testing, for interpretation by the dentist.
- t. Place and remove arch wires or appliances that have been activated by a dentist.
- u. Provide screenings as defined by subsection 44 of section 20-01-02-01.
- Adjust a temporary dentures or partials that have previously been fitted by the dentist. for dentitions actively under treatment for which permanent dentures or partial dentures are being fabricated.

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; April 1, 2015; July 1, 2017; July 1, 2022; October 1, 2024.

General Authority: NDCC 43-20-10

Law Implemented: NDCC 43-20-01.1, 43-20-08, 43-20-10, 43-20-13

Commented [DS11]: Board agreed to allow RDA to perform Air polishing under general supervision at 8/1/25 meeting.

Commented [DS12]: Per 8/1/2025 meeting and Bev 8/28 clarification, we're rewording this so it's the same wording as the RDH rule on the same duty. And we keep this slow speed handpiece duty as is—but the Baord agreed that high speed handpieces can be used by a restorative permit holder under 20-03-01-01.1.

Commented [DS13]: Per 8/1/2025 meeting, Board agreed and revised this rule to allow more scope for assistant duty with regard to impressions.

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Commented [DS14]: Per 8/1/2025 meeting, allowing RDA under general to adjust dentures that the dentist has previously fitted.

20-03-01-01.1. Expanded duties of dental assistants.

A registered dental assistant shall apply for a permit to perform the following duties:

- 1. A registered dental assistant authorized by permit and under the direct supervision of a dentist may perform the following restorative functions:
 - Place, <u>contour</u>, carve, and adjust amalgam, glass ionomer, or composite restorations where the margins are entirely within the enamel with hand instruments or a slow-speed handpieces;
 - b. Adapt and cement stainless steel crowns; and
 - c. Place, contour, and adjust composite restorations where the margins are entirely within the enamel with hand instruments or a slow-speed handpiece c. Place a temporary sedative filling.
- A dental anesthesia assistant authorized by a class I permit and under the contiguous supervision of a dentist authorized by permit to provide moderate sedation, deep sedation, or general anesthesia may:.
 - Initiate and discontinue an intravenous line for a patient being prepared to receive intravenous medications, sedation or general anesthesia;
 - b. Adjust the rate of intravenous fluids infusion only to maintain or keep the line patent or open:
 - c. Prepare and monitor anesthesia equipment and perform patient monitoring; and
 - d. Perform patient monitoring including vial signs, adverse events, and patient positioning, and
 - d.e. Assist with emergency treatment and protocols, including the use of section, automated defibrillators, and crash cart equipment.
- 3. A dental anesthesia assistant authorized by a class II permit and under the direct visual supervision of a dentist authorized by permit to provide moderate sedation, deep sedation, or general anesthesia may carry out all duties of a Class I permit holder and:
 - a. Draw up, label, and prepare, or waste medications;
 - b. Follow instructions to deliver medication into an intravenous line upon verbal command of the supervising dentist;
 - Adjust the rate of intravenous fluids infusion beyond a keep-open rate upon verbal command of the supervising dentist; and
 - Adjust an electronic device to provide medications, such as an infusion pump upon verbal command of the supervising dentist.
- 4. A registered dental assistant authorized by permit and under the indirect supervision of a dentist may administer nitrous oxide analgesia to a patient who has not taken sedative medications before treatment in accordance with subsection 2 of section 20-0302-01-05.

History: Effective April 1, 2015; amended effective July 1, 2017; July 1, 2022; October 1, 2024, MONTH,

General Authority: NDCC 43-20-10

Law Implemented: NDCC 43-20-01.1, 43-20-08, 43-20-10, 43-20-13

20-03-01-01.2. Requirements of permit for expanded duties.

Commented [DS15]: Per 8/1/2025, meeting, the Board agreed with the comment and to revise 1a and c as shown.

Commented [DS16]: 8/1/2025 meeting the Board agreed to allow use of high speed handpieces and to revise this EFDA rule as to fillings.

Commented [DS17]: 8/1/25 meeting, the Board declined to eliminate this rule and role. Surgeons do not do their own anesthesia because they cannot also monitor vitals, anesthesia, patient, and be focused on the treatment—for good reason. Dentist needs to rely on other staff too. Too much for one person to monitor with no help.

Commented [DS18]: 9/19/2025 accepted Dr. Tanabe input to better explain what the main duties are—key to which is IV-related functions and monitoring/assistance related functions.

Commented [DS19]: 81/2025 meeting; Board agreed.

Input. Per Dr. Tanabe, this can already occur so the change isn't legally necessary—because all wasting must be done in accordance with DEA guidelines and the board can't change/regulate that. But if there are questions about this, the change here could make this reality more clear.

Commented [DS20]: Fixing an incorrect citation.

The board may grant a permit to a registered dental assistant or any other individual who meets the criteria listed below. Individuals authorized by other North Dakota licensing boards and whose scope of practice encompasses the duties of a dental anesthesia assistant are not required to obtain the respective anesthesia permit from the board to carry out the duties listed in this section.

- 1. A class I dental anesthesia permit holder is authorized to provide anesthesia assistance under the supervision of a dentist who is authorized by permit to provide moderate sedation, or deep sedation or general anesthesia. The board may issue or renew a class I dental anesthesia assistant permit authorizing a registered dental assistant or any other individual to provide anesthesia assistance under the supervision of a dentist authorized by permit to provide general anesthesia, deep sedation, or moderate sedation, upon successful completion of meeting the following criteria:
 - a. The applicant submits evidence of completing a board-approved hands-on training in intravenous access or phlebotomy that includes live experience starting and maintaining intravenous lines, and infection control;

 - b. The applicant submits proof of current certification status from the American association of oral and maxillofacial surgeon's dental anesthesia assistant national certification or a board-approved competency examination.
 - The applicant holds current and valid certification for health care provider basic life support, advanced cardiac life support, or pediatric advanced life support; and
 - d. The applicant provides a copy of a valid North Dakota general anesthesia, deep sedation, or moderate sedation permit of the dentist where the registered dental assistant will be performing anesthesia assistant services.
- 2. A class II dental anesthesia permit holder is authorized to provide anesthesia assistance under the supervision of a dentist who is authorized by permit to provide moderate sedation, or deep sedation or general anesthesia. The board may issue or renew a class II dental anesthesia assistant permit authorizing a registered dental assistant or any other individual to provide anesthesia assistance under the supervision of a dentist authorized by permit to provide general anesthesia, deep sedation, or moderate sedation, upon successful completion of meeting the following criteria:
 - a. The applicant submits evidence of <u>completing the dental anesthesia assistant national course or an equivalent a</u>-board-approved <u>pharmacology dental anesthesia assistant education and training-course.</u>
 - The applicant submits <u>either</u> proof of current dental anesthesia assistant national certification <u>or an equivalent pharmacology certification</u>, <u>er-or proof of passage of a board-approved competency examination within two years of application</u>;
 - The applicant has-submits evidence of successfully completing a board-approved handson training in intravenous access or phlebotomy that includes live experience starting and maintaining intravenous lines;
 - The applicant holds current and valid certification for health care provider basic life support, advanced cardiac life support, or pediatric advanced life support; and
 - e. The applicant provides a copy of a valid North Dakota general anesthesia, deep sedation, or moderate sedation permit of the dentist where the registered or qualified dental assistant will be performing anesthesia assistant services.
- 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 restorative functions under the following conditions:

Commented [DS21]: Board discussions about allowing RNs to become DAAs without going through the training listed in this section.

At 9/19/2025 meeting discussed not adding "RN" specifically as an approvable individual. Instead, we can board-approve their training, just like any other individual's training. It creates complications to start listing the certain professions that likely would be approved.

Commented [DS22]: 8/1/25 meeting, the Board declined to eliminate the duties of the Class I, above. So that means it will also decline to eliminate the position itself. Patient safety reasons. Surgeons do not do their own anesthesia because they cannot also monitor vitals, anesthesia, patient, and be focused on the treatment—for good reason. Dentist needs to rely on other staff for assistance.

Commented [DS23]: 9/10/2025 Dr. Tanabe: 1(a) and 1(b) clarify that a Class I need to be trained on (a) IVs and (b) patient/equipment monitoring

Commented [DS24]: Board discussions about allowing RNs to become DAAs without going through the training listed in this section.

At 9/19/2025 meeting discussed not adding "RN" specifically as an approvable individual. Instead, we can board-approve their training, just like any other individual's training. It creates complications to start listing the certain professions that likely would be approved.

Commented [DS25]: 9/10/2025 Dr. Tanabe: 2(a) and 1(b) clarify that a Class II needs DAANC training or its pharmacological equivalent, and (b) either DAANC or other certification, and if not we need to see passage of a pharmacological exam in last 2 years.

- 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 a dental testing agency examination approved by the board, within the last five years. The course must include a clinical and written examination. The board may require successful completion of the restorative function component of the dental assisting national board's certified restorative functions dental assistant certification examination; or
 - (2) The applicant has successfully passed a board-approved dental testing agency examination over five years from the date of application, and successfully completed the restorative function component of the dental assisting national

Commented [DS26]: The U of M course requires a clinical exam and a written exam that we accept. They might not be a 'testing agency', so revising this to clear up any ambiguity.

board's certified restorative functions dental assistant certification examination or other board-approved examination 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 twenty-five 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 only may 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 must be checked and documented by the supervising dentist.

History: Effective July 1, 2022; amended effective October 1, 2024, MONTH, DATE, 2026.

General Authority: NDCC 43-20-10 **Law Implemented:** NDCC 43-20-13.2

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 local anesthetics, sedation or general anesthesia drugs or titrate local anesthetics, sedation or general anesthesia drugs without a board authorized permit.
- Any irreversible dental procedure or procedures which require the professional judgment and skill of a licensed dentist.
- Adjust a crown which has been cemented by a dentist.
- Activate any type of orthodontic appliance or fabricate orthodontic impressions for an individual who is not a patient of record.
- 7. Cement or bond orthodontic bands or brackets that have not been previously placed by a dentist.
- 8. Place bases or cavity liners.
- 9. Scaling, root planing, or gingival curettage.
- 10. Measure the gingival sulcus with a periodontal probe.
- 11. Use a high-speed handpiece inside the mouth, unless authorized to do so through a permit issued pursuant to section 20-03-01-01.1.
- 12. Unless authorized by permit in accordance with subsection 1 of section 20-02-01-05.1, monitor a patient who has been induced to a level of moderate sedation, deep sedation, or general anesthesia until the dentist authorized by permit to administer sedation or anesthesia determines the patient may be discharged for recovery.

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Commented [DS27]: If we do not add 'lasers' to the duties of assistants, then we could benefit from listing it in the prohibitions more clearly (its seemingly prohibited because its not a listed duty and by rule 20-03-01-01(a)(1)(10) but could be more clear).

Commented [DS28]: Per 8/1/25 meeting and clarification from Bev 8/28, and Board discussion on 9/19, decided to allow high speed hand pieces for restorative permit holders, so we need to clarify this prohibition.

History: Effective February 1, 1992; amended effective October 1, 1993; April 1, 2000; June 1, 2002; July 1, 2004; January 1, 2011; April 1, 2015; July 1, 2022; October 1, 2024, DATE, DAY, 2026.

General Authority: NDCC 43-20-10

Law Implemented: NDCC 43-20-01.1, 43-20-08, 43-20-10, 43-20-13

20-03-01-03. Annual registration of dental assistants performing expanded duties.

Repealed effective January 1, 2011.

20-03-01-04. Criteria for dental assistants placing sealants.

Repealed effective January 1, 2011.

20-03-01-05. Registration of dental assistants.

An individual seeking registration as a dental assistant shall apply on forms prescribed by the board. The application must be notarized and include the application fee.

- 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_τ 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:
 - a. Within one year of application; or
 - b. More than one year prior to application, and within two years before application, earned sixteen hours of continuing education in accordance with section 20-03-01-06, and provides evidence the applicant was gainfully and relevantly employed in the time prior to application. Proof of gainful and relevant employment may include letters of recommendation, payroll documentation, or other materials requested by the board.
 - (3) The applicant successfully completed a dental assisting program_τ 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 is licensed in good standing under the laws of another jurisdiction and possesses qualifications, education, or experience substantially similar to the requirements for licensure set forth in this section. Applicants shall submit evidence of at least one year of gainful and relevant employment in the practice prior to application. Proof of gainful and relevant employment may include letters of recommendation, payroll documentation, or other materials requested by the board. Applicants shall submit evidence of earning sixteen hours of continuing education in accordance with section 20-03-01-06 and meet other criteria as may be required by the board.
 - (5) The applicant successfully completed the examination administered by the joint commission on national dental examinations or the dental hygiene certification

board of Canada and completed within two years of application sixteen hours of continuing education in accordance with section 20-03-01-06.

- The applicant passed a written examination on the laws and rules governing the practice of dentistry in North Dakota within one year of application.
- The applicant successfully completed a cardiopulmonary resuscitation course within two years of application.
- Grounds for denial of the application under North Dakota Century Code section 43-20-05
- The board may grant registration as a qualified dental assistant to an applicant meeting all the following requirements:
 - The applicant meets any of the following requirements:
 - Within one year of application, the The applicant passed the national entry level dental assistant certification administered by the dental assisting national board or completed another board-approved equivalent program, and completed three hundred hours of on-the-job clinical training within one year of application.
 - More than one year before application, the The applicant passed the national entry level dental assistant certification administered by the dental assisting national board or completed another board-approved equivalent program, -and three hundred hours of on-the-job clinical training, and completed completed, within two years before application, sixteen hours of continuing education in accordance with section 20-03-01-06 within two years before application.
 - (3) The applicant successfully completed the national entry level dental assistant certification administered by the dental assisting national board or another boardapproved equivalent course, and within two years of application successfully completed the North Dakota department of career and technical education dental assisting education program association.
 - The applicant successfully completed a board-approved equivalent course within one year of application.
 - (5)(4) The applicant is licensed in good standinghas been practicing under the laws of another jurisdiction in a role and under laws substantially equivalent to that of a qualified dental assistant, and possesses qualifications, education, or experience substantially similar to the requirements for licensure set forth in this section. Applicants shall submit evidence of at least one year of gainful and relevant employment in the practice prior to application. Proof of gainful and relevant employment may include letters of recommendation, payroll documentation, or other materials requested by the board. Applicants shall submit evidence of earning sixteen hours of continuing education in accordance with section 20-03-01-06 and meet other criteria as may be required by the board.
 - The applicant passed a written examination on the laws and rules governing the practice of dentistry in North Dakota within one year of application.
 - The applicant successfully completed a cardiopulmonary resuscitation course within two years of application.
 - Grounds for denial of the application under North Dakota Century Code section 43-20-05 do not exist.

Commented [DS29]: 9/19/2025 meeting; Board striking this rule as unnecessary/inapplicable. Andrea shared that it was useful back when RDH's didn't have a rule that says they can do everything an assistant can do...so would become an RDA while waiting for RDH positions to come open. But now RDHs can do all tasks of an assistant so no need for this rule/path

Commented [DS30]: The way these pathways are worded results in lots of questions. Board is trying to word them in a way that reduces confusion.

Commented [DS31]: This change would align the DA Prep and BSC students more closely with the NELDA students. So those who complete DA Prep's or BSC's QDA programs more than a year before they apply in ND to get registered here (like NELDA applicants can).

9/19 accepted

Commented [DS32]: We don't recall any applicants completing the CTE course, but there is NO time limit on this rule/pathway. So someone could potentially complete parts or all of this rule many years ago. Maybe add to the CTE part—completed it within 2 years of application? That would let the CTE course act like the 16 CEs in #2.

9/19 accepted

Commented [DS33]: Eliminating this one after merging its 'board approved' language into 1-3 above.

9/19 accepted

Commented [DS34]: Revising this to meet what we wanted this rule to say when the 2024 rules were passed. Specifically, few states use 'QDA' for a license/registration. This change will allow us to potentially register a dental assistant from another state—who doesn't have a (non-existent) QDA license from hat state—but who got the education/training/experience that are equivalent to

9/19 accepted

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3.	The board may grant registration as a qualified dental assistant-limited radiology registrant to an applicant meeting all the following requirements:	Commented [DS35]: Declined to have QDA-LRRs take a jurisprudence exam to be registered

a. The applicant meets any of the following requirements:

- (1) Within two years of application, the applicant obtained the dental assisting national board's radiation health and safety certificate or completed a radiation health and safety course approved by the board.
- (2) More than two years from application, the applicant submits documentation confirming that they obtained the dental assisting national board's radiation health and safety certificate or completed a radiation health and safety course approved by the board, and submits a letter from a dentist confirming the assistant has successfully take radiographs within five years of application to the board.

(1)(3)

- b. Within two years of application, the applicant completed a cardiopulmonary resuscitation
- Grounds for denial of the application under North Dakota Century Code section 43-20-05 do not exist

History: Effective January 1, 2011; amended effective July 1, 2022; October 1, 2024.

General Authority: NDCC 43-20-10 Law Implemented: NDCC 43-20-13.2

20-03-01-05.1. Additional expanded duties of registered dental assistants.

Repealed effective July 1, 2022.

20-03-01-06. Continuing dental education for dental assistants.

Dental assistants shall provide evidence of attendance or participation in continuing clinical dental education in accordance with the following conditions:

- Continuing education activities include publications, seminars, symposiums, lectures, college courses, and online education.
- The continuing education hours 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 self-study. Self-study is an educational process designed to permit a participant to learn a given subject without involvement of a proctor or without the opportunity to interact in real-time with the proctor. A qualified professional may act as a proctor who oversees a clinical continuing education course which may be used for classroom style continuing education credits. Cardiopulmonary resuscitation courses must provide hands-on training. All other continuing education requirements may be satisfied from webinars or classroom style learning that allows for real-time interaction between attendees and the proctor. 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.
 - Two hours of infection control. This requirement may be met by attending a federal occupational safety and health administration course for dental providers.
 - c. A cardiopulmonary resuscitation course.
 - d. For registered dental assistants or qualified dental assistants that hold a dental anesthesia assistant permit, at least two hours related to sedation or anesthesia.

Commented [DS36]: RDA/QDA can get registered if they took their course more than two years ago. Allowing this for QDA-LRRs. Is the addition of the 6 hours of RHS CE a good fit/requirement/enough; is CE the right requirement—and if CE isn't, what requirement would we replace it with?

Board approved this as a new pathway for QDA LRR at 9/19/2025 meeting

Commented [DS37]: Per 8/1/2025 meeting and discussion of this idea during review of 20-02, the Board decided this is an important enough CE to keep in place. Not removing it, but adding OSHA education for flexibility.

e.	For registered dental restorative assistant permitholders, two hours related to restorative
	dentistry.

 $\label{eq:final_problem} \textbf{f.} \quad \text{No more than one hour related to practice management or administration.}$

- For qualified dental assistant-limited radiology registrants, the continuing education must include:
 - a. At least two hours related to infection control.
 - b. A cardiopulmonary resuscitation course.
- 5. For individuals whose sole registration with the board is that of a dental anesthesia assistant, the continuing education must include:
 - a. At least two hours related to sedation or anesthesia.
 - b. A cardiopulmonary resuscitation course.
- 6. Mere registration at a dental convention without specific attendance at continuing education presentations will not be creditable toward the continuing dental education requirement. Certificates awarded for continuing education must indicate the name of the continuing education provider, date, and number of hours of continuing education. Certificates obtained from webinar courses must indicate the course was a webinar. For continuing education courses utilizing a proctor, the certificate of attendance must be signed by the proctor.
- All qualified or registered dental assistants, qualified dental assistants, qualified dental assistants, qualified dental assistants must hold a current cardiopulmonary resuscitation certificate.
- 8. The board may audit continuing education credits of dental assistants that are registered with the board as a registered dental assistant, qualified dental assistant, qualified dental assistant. Imited radiology registrant, or dental anesthesia 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 the audited assistant shall provide satisfactory documentation of attendance at, or participation in, the continuing education activities. Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the registration.

History: Effective January 1, 2011; amended effective April 1, 2015; July 1, 2017; July 1, 2022;

October 1, 2024. MONTH, DATE, 2026. General Authority: NDCC 43-20-10 Law Implemented: NDCC 43-20-13.1 Commented [DS38]: Updating the rule so that all types of assistants are named in the audit rule (all assistants except unregistered assistants).