

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	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		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 ⁴	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 Planning	D	G/A	G	D	G/A	G	G/A	G	G	D	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	D	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

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

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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<i>Function</i>	<i>KY</i>	<i>LA</i>	<i>ME</i>	<i>MD</i>	<i>MA</i>	<i>MI</i>	<i>MN</i>	<i>MS</i>	<i>MO</i>	<i>MT</i>	<i>NE</i>	<i>NV</i>	<i>NH</i>	<i>NJ</i>	<i>NM</i>	<i>NY</i>	<i>NC</i>
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	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	D/G
Local Anesthesia	D	D	D	D	D	D	G		D	D	D	D/G	D	D	D/G	D	
Topical Anesthesia	D	D/G	G/A	G	G/A	G/A	G		G	G/A	G	G/A	G	D	D	G	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	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	
Root Planning	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	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		D	
Study Cast Impressions	G	D	G/A	G	G/A	G/A	G		G	G	G	G/A	G	D	G	D	D/G
Place Perio Dressings	G	D	D	G	G/A	G/A	G		G	G	G	G/A		D		D	
Remove Perio Dressings	G	D	G/A	G	G/A	G/A	G		D	G	G	G/A	G	D	G	D	D/G
Place Sutures																	
Remove Sutures	G	D	G/A	G	G/A	G/A	G		G	G	G	G/A	G	D		D	D/G
Dental Hygiene Diagnosis																	
Treatment Planning												G/A					
Dental Hygiene Assessment																	
Prescriptive Authority			A												G/A		

- D** Direct Supervision Levels; dentist needs to be present
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 - G** General Supervision Levels; dentist needs to authorize prior to services, but need not be present
 - 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)*
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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	D	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 Planning	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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