

NEVADA STATE BOARD of DENTAL EXAMINERS



PUBLIC BOOK

BOARD TELECONFERENCE MEETING

WEDNESDAY, JANUARY 21, 2026

6:00 P.M.

STATE OF NEVADA

JOE LOMBARDO
Governor



DR. KRISTOPHER SANCHEZ
Director

PERRY FAIGIN
NIKKI HAAG
MARCEL F. SCHAERER
Deputy Directors

A.L. HIGGINBOTHAM
Executive Director

DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS

PUBLIC MEETING NOTICE & BOARD MEETING AGENDA

Meeting Date & Time

Wednesday, January 21, 2026
6:00 p.m.

Meeting Location

Nevada State Board of Dental Examiners
2651 N. Green Valley Parkway, Suite 104
Henderson, NV 89014

Video Conferencing/ Teleconferencing Available

To access by phone, +1(646) 568-7788

To access by video webinar,

<https://us06web.zoom.us/j/82777468682>

Webinar/Meeting ID#: 827 7746 8682

Webinar/Meeting Passcode: 596790

PUBLIC NOTICE:

Public Comment by pre-submitted email/written form and Live Public Comment by teleconference is available after roll call (beginning of meeting and prior to adjournment (end of meeting). Live Public Comment is limited to three (3) minutes for each individual.

Members of the public may submit public comment in written form to: **Nevada State Board of Dental Examiners, 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014; FAX number (702) 486-7046; e-mail address nsbde@dental.nv.gov.** Written submissions received by the Board on or before **Tuesday, January 20, 2026, by 12:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

The Nevada State Board of Dental Examiners may: 1) address agenda items out of sequence to accommodate persons appearing before the Board or to aid the efficiency or effectiveness of the meeting; 2) combine items for consideration by the public body; 3) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. See NRS 241.030. Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual the board may refuse to consider public comment. See NRS 233B.126.

Persons/facilities who want to be on the mailing list must submit a written request every six (6) months to the Nevada State Board of Dental Examiners at the address listed in the previous paragraph. With regard to any board meeting or telephone conference, it is possible that an amended agenda will be published adding new items to the original agenda. Amended Nevada notices will be posted in compliance with the Open Meeting Law.

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the

meeting. If special arrangements for the meeting are necessary, please notify the Board, at (702) 486-7044, no later than 48 hours prior to the meeting. Requests for special arrangements made after this time frame cannot be guaranteed.

Pursuant to NRS 241.020(2) you may contact at (702) 486-7044, to request supporting materials for the public body or you may download the supporting materials for the public body from the Board's website at <http://dental.nv.gov>. In addition, the supporting materials for the public body are available at the Board's office located at 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014.

Note: Asterisks (*) "For Possible Action" denotes items on which the Board may take action.

Note: Action by the Board on an item may be to approve, deny, amend, or table it.

1. Call to Order

a. Roll Call/Quorum

2. Public Comment (Live public comment by teleconference and pre-submitted email/written form): The public comment period is limited to matters specifically noticed on the agenda. No action may be taken upon the matter raised during the public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place and manner restriction, but may not be limited to based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

Members of the public may submit public comment via email to nsbde@dental.nv.gov, or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before Tuesday, January 20, 2026, at 12:00 p.m. may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual, the Chair may prohibit comment if the content of that comment is a topic that is not relevant to, or within the authority of, the Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

3. Chairperson's Report: (For Possible Action)

a. Request to Remove Agenda Item(s) (For Possible Action)

b. Approve Agenda (For Possible Action)

4. New Business: (For Possible Action)

a. Review, Discussion and Possible Approval/Rejection of the Revised Proposed Regulations for RO79-24 EFDA – NRS 631.190 (For Possible Action)

b. Review, Discussion, and Possible Approval/Rejection of Public Health Program Applications – NRS 631.190; NRS 631.34583; NRS 631.287 (For Possible Action)

i. Revive Mobile Oral Health Solutions

5. **Public Comment (Live public comment by teleconference):** This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon the matter raised during public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place and manner restriction but may not be limited based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

Members of the public may submit public comment via email to nsbde@dental.nv.gov, or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before Tuesday, January 20, 2026, by 12:00 p.m. may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

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6. **Announcements:**

7. **Adjournment:** (For Possible Action)

Note: To minimize computer resource and data storage drains, only the copies of the applications (redacted to exclude personal identifying or personal health information) are included with this agenda. However, the Board acknowledges that some records attached to the applications (aside from any included proprietary information, but including such things as permits, licenses, route maps, etc.) are generally public records. The Board will make available copies of the non-confidential documents attached to the applications to any member of the public upon request.

**PROPOSED REGULATION OF THE
BOARD OF DENTAL EXAMINERS OF NEVADA**

LCB File No. R079-24

July 3, 2025

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: §§ 1, 10 and 19, NRS 631.190; § 2, NRS 631.190 and 631.3129; § 3, NRS 631.190 and 631.31286; § 4, NRS 631.190 and 631.31287; § 5, NRS 631.190 and 631.31288; § 6, NRS 631.190 and 631.288; § 7, NRS 631.190 and 631.287; § 8, NRS 631.190, 631.220 and 631.345; § 9, NRS 631.190, 631.220 and 631.31285; § 11, NRS 631.190 and 631.260; §§ 12 and 13, NRS 631.190 and 631.240; §§ 14 and 15, NRS 631.190 and 631.342; § 16, NRS 631.190, 631.330, 631.335 and 631.342; § 17, NRS 631.190 and 631.385; § 18, NRS 631.190 and 631.215; § 20, NRS 631.190 and 631.3121.

A REGULATION relating to oral health; interpreting certain terminology; prescribing certain requirements for licensure as an expanded function dental assistant and the issuance of a special endorsement to practice restorative dental hygiene; establishing certain requirements for the supervision of dental assistants and expanded function dental assistants; establishing the fees for licensure as an expanded function dental assistant; updating the name of a certain organization; requiring certain information be included in an application for a license to practice as an expanded function dental assistant; establishing requirements governing continuing education for expanded function dental assistants; subjecting an expanded function dental hygienist to certain provisions applicable to other dental professionals; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law provides for the licensure and regulation of dentists, dental hygienists and dental therapists by the Board of Dental Examiners of Nevada. (Chapter 631 of NRS) Senate Bill No. 310 (S.B. 310) of the 82nd Legislative Session provided for the licensure and regulation of expanded function dental assistants. (Senate Bill No. 310, chapter 523, Statutes of Nevada 2023, at page 3403) S.B. 310 also authorized dental hygienists to receive special endorsements to perform additional tasks relating to restorative dental hygiene. (NRS 631.288, 631.3129)

Existing law authorizes an expanded function dental assistant or a dental hygienist with a special endorsement to practice restorative dental hygiene to use an ultrasonic scaling unit for the removal of bonding agents, but does not authorize such a person to use an ultrasonic scaling unit on a natural tooth. (NRS 631.3129) For the purposes of those provisions, **section 2** of this regulation interprets: (1) “using an ultrasonic scaling unit only for the removal of bonding

agents” to mean using an ultrasonic scaling unit for the purpose of orthodontic care; and (2) “use an ultrasonic scaling unit on any natural tooth” to mean using an ultrasonic scaling unit for the purpose of dental cleaning.

Existing law requires an applicant for a license as an expanded function dental assistant to provide proof that he or she passed a written clinical examination given by the Board. (NRS 631.31286) **Section 3** of this regulation prescribes the written clinical examinations that such an applicant may pass to satisfy that requirement.

Existing law requires an applicant for a license by endorsement as an expanded function dental assistant to complete any training the Board deems necessary to ensure the competence of the applicant. (NRS 631.31287) **Section 4** of this regulation requires such an applicant to provide proof to the Board that he or she has: (1) passed certain examinations; or (2) successfully completed a course on restorative dental assisting that is approved by the Board. **Section 5** of this regulation: (1) prohibits a dentist from supervising more than two expanded function dental assistants at one time; and (2) requires a dentist to develop written protocols for expanded function dental assistants to follow in the event of a medical emergency.

Existing law requires an applicant for a special endorsement to practice restorative dental hygiene to complete a course on restorative dental hygiene. (NRS 631.288) **Section 6** of this regulation requires that such a course be: (1) offered by an organization accredited by the Commission on Dental Accreditation; or (2) approved by the Board. **Sections 8, 12, 13 and 20** of this regulation update the name of an organization that administers clinical examinations for dentists.

Existing law authorizes a dental assistant or expanded function dental assistant to perform certain tasks under the direct supervision of a dental hygienist with a special endorsement to practice public health dental hygiene. (NRS 631.287) **Section 7** of this regulation requires a supervising dental hygienist to enter into a written practice agreement with a dental assistant or expanded function dental assistant before authorizing the dental assistant or expanded function dental assistant to perform any such tasks.

Existing law authorizes the Board to establish and collect certain fees relating to licensure as an expanded function dental assistant. (NRS 631.190, 631.345) **Section 8** of this regulation establishes the fees to apply for, renew or reinstate a license as an expanded function dental assistant. **Section 9** of this regulation requires an application for licensure as an expanded function dental assistant to include contents similar to other applications for licensure submitted to the Board. **Section 11** of this regulation authorizes the Board to reject an application for licensure as an expanded function dental assistant under the same conditions as those under which the Board may reject other applications for licensure. **Sections 10 and 17-19** of this regulation make conforming changes treat expanded function dental assistants similarly to dental hygienists for various purposes, including unprofessional conduct and obtaining a determination or an advisory opinions from the Board.

Existing law requires the Board to adopt requirements governing continuing education for expanded function dental assistants. (NRS 631.342) **Sections 14 and 15** of this regulation require an expanded function dental assistant to complete 12 hours of continuing education annually or 24 hours of continuing education biennially, depending on the type of license the assistant holds. **Section 15** requires such continuing education to include instruction in certain subjects. **Section 14** also: (1) requires an expanded function dental assistant to maintain certification in administering cardiopulmonary resuscitation or another medically acceptable means of basic life support; and (2) authorizes an expanded function dental assistant to receive

credit for continuing education in the same manner as dental hygienists. **Section 16** of this regulation requires an expanded function dental assistant to submit a signed, written statement concerning completion of the required continuing education in the same manner as dentists and dental hygienists.

Section 1. Chapter 631 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 7, inclusive, of this regulation.

Sec. 2. *For the purpose of NRS 631.3129, the Board will interpret:*

1. “Use an ultrasonic scaling unit on any natural tooth” to mean using an ultrasonic scaling unit for the purpose of dental cleaning.

2. “Using an ultrasonic scaling unit only for the removal of bonding agents” to mean using an ultrasonic scaling unit for the purpose of orthodontic care.

Sec. 3. *In order to fulfill the requirements of subsection 3 of NRS 631.31286 to pass a written **and a** clinical examination, an applicant for a license to practice as an expanded function dental assistant **must** pass:*

*1. The written **and clinical** examination offered by the Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western Regional Examining Board, or its successor organization, for expanded function dental auxiliary; or*

2. All of the written examinations offered by the Dental Assisting National Board, or its successor organization, for certification as a Certified Preventive Functions Dental Assistant and a Certified Restorative Functions Dental Assistant.

Sec. 4. *1. In addition to the requirements of subsection 1 of NRS 631.31287, an applicant for licensure by endorsement as an expanded function dental assistant must include in his or her application proof that he or she:*

(a) Has passed all of the written examinations offered by the Dental Assisting National Board, or its successor organization, for certification as a Certified Preventive Functions Dental Assistant and a Certified Restorative Functions Dental Assistant; or

(b) Has successfully completed a course on restorative dental assisting that is approved by the Board pursuant to subsection 2.

2. The Board will approve a course on restorative dental assisting for the purposes of paragraph (b) of subsection 1 if the course is substantially similar in rigor and educational quality to a course on restorative dental assisting offered by the Dental Assisting National Board, or its successor organization. The Board will publish on an Internet website of the Board such courses that the Board has approved.

Sec. 5. *1. A dentist may supervise not more than two expanded function dental assistants at one time.*

2. A dentist who supervises an expanded function dental assistant shall develop and implement written protocols for the expanded function dental assistant to follow if a medical emergency occurs.

Sec. 6. *1. A course on restorative dental hygiene completed to satisfy the requirements of subsection 2 of NRS 631.288 must be:*

(a) Offered by an accredited organization; or

(b) Approved by the Board pursuant to subsection 2.

2. The Board will approve a course on restorative dental hygiene for the purposes of paragraph (b) of subsection 1 if the course is substantially similar in rigor and educational quality to a course on restorative dental hygiene offered by an accredited organization. The

Board will publish on an Internet website of the Board such courses that the Board has approved.

Sec. 7. 1. *Before a dental hygienist who holds a special endorsement to practice public health dental hygiene issued pursuant to NRS 631.287 may authorize a dental assistant or expanded function dental assistant to perform tasks specified in subsection 3 of NRS 631.287 under his or her direct supervision, the supervising dental hygienist and the dental assistant or expanded function dental assistant, as applicable, must enter into a signed written practice agreement prescribing the tasks specified in subsection 3 of NRS 631.287 which the dental assistant or expanded function dental assistant is authorized to perform.*

2. *A dental assistant or expanded function dental assistant practicing under the supervision of a dental hygienist with a special endorsement to practice public health dental hygiene may perform a task specified in subsection 3 of NRS 631.287 only:*

(a) If the dental assistant or expanded function dental assistant, as applicable, is authorized to do so pursuant to the written practice agreement entered into pursuant to subsection 1; and

(b) In accordance with any limitations or procedures set forth in the written practice agreement.

Sec. 8. NAC 631.029 is hereby amended to read as follows:

631.029 The Board will charge and collect the following fees:

Application fee for an initial license to practice dentistry if the applicant has successfully passed a clinical examination administered by the {Western} <i>Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western</i> Regional Examining Board or a clinical examination approved by the Board and the American Board of Dental Examiners and administered by a regional examination organization other than the Board.....	\$1,200
Application fee for an initial license to practice dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	600
Application fee for a specialty license by credential.....	1,200
Application fee for a temporary restricted geographical license to practice dentistry	600
Application fee for a temporary restricted geographical license to practice dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	150
Application fee for a specialist’s license to practice dentistry	125
Application fee for a limited license or restricted license to practice dentistry, dental therapy , {or} dental hygiene <i>or expanded function dental assistance</i>	125
Application and examination fee for a permit to administer general anesthesia, moderate sedation or deep sedation.....	750
Application and examination fee for a site permit to administer general anesthesia, moderate sedation or deep sedation	500
Fee for any reinspection required by the Board to maintain a permit to administer general anesthesia, moderate sedation or deep sedation.....	500

Fee for the inspection of a facility required by the Board to ensure compliance with infection control guidelines	250
Fee for a second or subsequent inspection of a facility required by the Board to ensure compliance with infection control guidelines	150
Biennial renewal fee for a permit to administer general anesthesia, moderate sedation or deep sedation.....	200
Fee for the inspection of a facility required by the Board to renew a permit to administer general anesthesia, moderate sedation or deep sedation.....	350
Biennial license renewal fee for a general license or specialist's license to practice dentistry	600
Biennial license renewal fee for a restricted geographical license to practice dentistry	600
Biennial license renewal fee for a restricted geographical license to practice dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Biennial license renewal fee for a general license to practice dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Annual license renewal fee for a limited license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	200
Annual license renewal fee for a restricted license to practice dentistry	100
Biennial license renewal fee for an inactive dentist	200
Biennial license renewal fee for an inactive dental therapist , for dental hygienist <i>or expanded function dental assistant</i>	50

Fee for a second or subsequent audit to ensure compliance with continuing education requirements.....	200
Reinstatement fee for a suspended license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	300
Reinstatement fee for a revoked license to practice dentistry, dental therapy , for dental hygiene <i>or expanded function dental assistance</i>	500
Reinstatement fee to return an inactive or retired dentist, dental therapist , for dental hygienist <i>or expanded function dental assistant</i> or a dentist, dental therapist , for dental hygienist <i>or expanded function dental assistant</i> with a disability to active status	300
Fee for the certification of a license	25
Fee for the certification of a license to administer nitrous oxide or local anesthesia.....	25
Fee for a duplicate wall certificate	25
Fee for a duplicate pocket card receipt.....	25
Application fee for converting a temporary license to a permanent license	125
Fee for an application packet for an examination	25
Fee for an application packet for licensure by credentials	25

Sec. 9. NAC 631.030 is hereby amended to read as follows:

631.030 1. An applicant for licensure must provide the following information and documentation in his or her application:

- (a) The date and place of his or her birth;

(b) Certification of graduation from an accredited dental school or college, from an accredited school or college of dental therapy , ~~for~~ from an accredited school or college of dental hygiene ~~or~~ *or from an accredited program for dental assisting*, whichever is applicable;

(c) Whether he or she has applied for similar licensure in another state or a territory of the United States or the District of Columbia and, if so, the name of the state or territory of the United States or the District of Columbia, the date and the result of his or her application;

(d) If he or she has practiced dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* in another state or a territory of the United States or the District of Columbia, certification from the licensing authority of each state or territory of the United States or the District of Columbia in which he or she has practiced or is practicing that he or she is in good standing and that there are not any disciplinary proceedings affecting his or her standing pending against him or her in the other state or territory of the United States or the District of Columbia;

(e) Whether he or she has terminated or attempted to terminate a license from another state or territory of the United States or the District of Columbia and, if so, the reasons for doing so;

(f) If he or she is not a natural born citizen of the United States, a copy of his or her certificate of naturalization or other document attesting that he or she is legally eligible to reside and work in the United States;

(g) All scores obtained on the examination in which he or she was granted a certificate by the Joint Commission on National Dental Examinations , *if applicable*, and the date it was issued;

(h) Whether he or she has ever been convicted of a crime involving moral turpitude or has entered a plea of nolo contendere to a charge of such a crime and, if so, the date and place of the conviction or plea and the sentence, if any, which was imposed;

- (i) Whether he or she has had any misdemeanor or felony convictions and, if so, any documents relevant to any misdemeanor or felony convictions;
- (j) Whether he or she has been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
- (k) Whether he or she has a history of substance misuse or substance use disorder and, if so, any documents relevant to the substance misuse or substance use disorder;
- (l) Whether he or she has been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of Columbia, or any regional testing agency recognized by the Board and, if so, any documents relevant to the refusal;
- (m) Whether he or she has been denied licensure by this State, any other state or territory of the United States or the District of Columbia and, if so, any documents relevant to the denial;
- (n) Whether he or she has had his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene ~~for~~ *or expanded function dental assistance*, including, without limitation, being subject to mandatory supervision, receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the suspension, revocation, probation or other discipline;
- (o) A copy of current certification in administering cardiopulmonary resuscitation;
- (p) Whether he or she is currently involved in any disciplinary action concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental*

assistance in this State, another state or territory of the United States or the District of Columbia and, if so, any documents relevant to the reprimand or disciplinary action;

(q) Two sets of certified fingerprint cards and an authorization form allowing the Board to submit the fingerprint forms to law enforcement agencies for verification of background information;

(r) Whether he or she has any claims against him or her or has committed any actions that would constitute unprofessional conduct pursuant to NRS 631.3475 or NAC 631.230;

(s) An application form that he or she has completed and signed which:

(1) Is furnished by the Board; and

(2) Includes, without limitation, a properly executed request to release information;

(t) If applicable, the statement and proof required by subsection 3;

(u) Evidence that he or she is eligible to apply for a license to practice:

(1) Dentistry pursuant to NRS 631.230;

(2) Dental hygiene pursuant to NRS 631.290; ~~for~~

(3) Dental therapy pursuant to NRS 631.312; *or*

(4) Expanded function dental assistance pursuant to NRS 631.31285;

(v) The statement required by NRS 425.520; and

(w) Any other information requested by the Board.

2. An applicant for licensure by endorsement pursuant to NRS 622.530 *to practice dentistry or dental hygiene* must provide the following information and documentation with his or her application:

(a) The information and documentation listed in subsection 1;

(b) A certificate granted by a nationally recognized, nationally accredited or nationally certified examination or other examination approved by the Board which proves that the applicant has achieved a passing score on such an examination; and

(c) Proof that the applicant has actively practiced dentistry, dental therapy or dental hygiene for the 5 years immediately preceding the date of submission of the application.

3. An applicant for licensure who wishes to use laser radiation in his or her practice of dentistry, dental therapy or dental hygiene must provide to the Board:

(a) A statement certifying that each laser that will be used by the licensee in the practice of dentistry, dental therapy or dental hygiene has been cleared by the Food and Drug Administration for use in dentistry; and

(b) Proof that he or she has successfully completed a course in laser proficiency that:

(1) Is at least 6 hours in length; and

(2) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to NAC 631.035.

Sec. 10. NAC 631.045 is hereby amended to read as follows:

631.045 A licensed dentist who owns an office or facility where dental treatments are to be performed in this State must, on the application for renewal of his or her license, execute a certified statement that includes:

1. The location of each office or facility owned by the licensed dentist where dental treatments are to be performed;

2. The name and address of each employee, other than a licensed dentist, dental therapist, ~~or~~ dental hygienist ~~or~~ *or expanded function dental assistant*, who assists at the office or

facility in procedures for infection control and the date the employee began to assist in procedures for infection control at the office or facility;

3. A statement that each employee identified in subsection 2:

(a) Has received adequate instruction concerning procedures for infection control; and

(b) Is qualified to:

(1) Operate sterilization equipment and other equipment in compliance with the guidelines adopted by reference in NAC 631.178; and

(2) Perform all other applicable activities in compliance with the guidelines adopted by reference in NAC 631.178; and

4. If the licensed dentist is registered to dispense controlled substances with the State Board of Pharmacy pursuant to chapter 453 of NRS, an attestation that the licensed dentist has conducted annually a minimum of one self-query regarding the issuance of controlled substances through the Prescription Monitoring Program of the State Board of Pharmacy.

Sec. 11. NAC 631.050 is hereby amended to read as follows:

631.050 1. If the Executive Director or Secretary-Treasurer finds that:

(a) An application is:

(1) Deficient; or

(2) Not in the proper form; or

(b) The applicant has:

(1) Provided incorrect information;

(2) Not attained the scores required by chapter 631 of NRS; or

(3) Not submitted the required fee,

↪ the Executive Director or Secretary-Treasurer shall reject the application and return it to the applicant with the reasons for its rejection.

2. If the Executive Director or Secretary-Treasurer finds that an applicant has:

- (a) A felony conviction;
- (b) A misdemeanor conviction;
- (c) Been held civilly or criminally liable in this State, another state or territory of the United States or the District of Columbia for misconduct relating to his or her occupation or profession;
- (d) A history of substance misuse or substance use disorder;
- (e) Been refused permission to take an examination for licensure by this State, any other state or territory of the United States or the District of Columbia;
- (f) Been denied licensure by this State, any other state or territory of the United States or the District of Columbia;
- (g) Had his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* suspended, revoked or placed on probation, or has otherwise been disciplined concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene ~~for~~ *or expanded function dental assistance*, including, without limitation, being subject to mandatory supervision or receiving a public reprimand, in this State, another state or territory of the United States or the District of Columbia;
- (h) Not actively practiced dentistry, dental therapy or dental hygiene, as applicable, for 2 years or more before the date of the application to the Board; or
- (i) ~~Is currently involved~~ *Current involvement* in any disciplinary action concerning his or her license to practice dentistry, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* in this State, another state or territory of the United States or the District of Columbia,

↪ the Executive Director or Secretary-Treasurer may reject the application. If rejected, the application must be returned to the applicant with the reasons for its rejection.

3. If an application is rejected pursuant to subsection 2, the applicant may furnish additional relevant information to the Executive Director or Secretary-Treasurer, and request that the application be reconsidered. If an application is rejected following reconsideration by the Executive Director or Secretary-Treasurer, the applicant may petition the Board for a review of the application at the next regularly scheduled meeting of the Board.

Sec. 12. NAC 631.090 is hereby amended to read as follows:

631.090 1. Except as otherwise provided in NRS 622.090, in fulfillment of the statutory requirements of paragraph (b) of subsection 1 of NRS 631.240, an applicant taking the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board must:

(a) Pass the Dental Simulated Clinical Examination or a comparable examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board, as applicable;

(b) Demonstrate proficiency in endodontics as the organization administering the clinical examination requires;

(c) Demonstrate proficiency in fixed prosthodontics as the organization administering the clinical examination requires;

(d) Demonstrate proficiency in restorative dentistry as the organization administering the clinical examination requires;

(e) Demonstrate proficiency in periodontics as the organization administering the clinical examination requires; and

(f) Perform such other procedures as the Board requires.

2. The Board may require an applicant for licensure to practice dentistry, dental hygiene or dental therapy to pass such additional examinations for licensure as the Board may prescribe if the applicant:

(a) Has been previously licensed in this State and has not held such a license for 2 years or more, including, without limitation, because the license was revoked or voluntarily surrendered; and

(b) Has not maintained an active practice outside of this State, including, without limitation, because his or her license to practice in another jurisdiction has been suspended, revoked, surrendered or because of any other order by a competent authority of another jurisdiction.

Sec. 13. NAC 631.140 is hereby amended to read as follows:

631.140 1. Except as otherwise provided in NRS 622.090, an applicant who does not pass all sections of the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board may apply for a reexamination. The application must be made on a form furnished by the Board.

2. An applicant who does not pass the examination may not take another examination without completing such additional professional training as is required by the Board.

3. An applicant who does not pass the examination solely because he or she fails one of the demonstrations required pursuant to NAC 631.090 may, at the next scheduled examination,

complete the remaining demonstration. If the applicant does not successfully complete the remaining demonstration at the next scheduled examination or within the timeline approved by the American Board of Dental Examiners or by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board for a person who takes the examination as part of an integrated curriculum, he or she must retake the entire examination.

4. For the purposes of NRS 631.280, an applicant who attempts to complete successfully a demonstration pursuant to subsection 3 shall not be deemed to have failed the examination twice if he or she fails to complete that demonstration successfully.

Sec. 14. NAC 631.173 is hereby amended to read as follows:

631.173 1. Each dentist licensed to practice in this State must annually complete at least 20 hours of instruction in approved courses of continuing education or biennially complete at least 40 hours of instruction in approved courses of continuing education, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dentist. Hours of instruction may not be transferred or carried over from one licensing period to another.

2. Each dental therapist licensed to practice in this State must annually complete at least 18 hours of instruction in approved courses of continuing education or biennially complete at least 40 hours of instruction in approved courses of continuing education, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dental therapist.

Hours of instruction may not be transferred or carried over from one licensing period to another.

3. Each dental hygienist licensed to practice in this State must annually complete at least 15 hours of instruction in approved courses of continuing education or biennially complete at least 30 hours of instruction in approved courses of continuing education, as applicable, based on the

renewal period set forth in NRS 631.330 for the type of license held by the dental hygienist.

Hours of instruction may not be transferred or carried over from one licensing period to another.

4. *Each expanded function dental assistant licensed to practice in this State must annually complete at least 12 hours of instruction in approved courses of continuing education or biennially complete at least 24 hours of instruction in approved courses of continuing education, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the expanded function dental assistant. Hours of instruction may not be transferred or carried over from one licensing period to another.*

5. In addition to the hours of instruction prescribed in subsections 1 ~~1, 2 and 3~~ to 4, *inclusive*, each dentist, dental therapist, ~~and~~ dental hygienist *and expanded function dental assistant* must maintain current certification in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life. Any course taken pursuant to this subsection must be taught by a certified instructor.

~~5.1~~ 6. Any provider of or instructor for a course in continuing education relating to the practice of dentistry, dental therapy, ~~or~~ dental hygiene *or expanded function dental assistance* which meets the requirements of this section must be approved by the Board, unless the course is for training in cardiopulmonary resuscitation or is approved by:

- (a) The American Dental Association or the societies which are a part of it;
- (b) The American Dental Hygienists' Association or the societies which are a part of it;
- (c) The Academy of General Dentistry;
- (d) Any nationally recognized association of dental or medical specialists;
- (e) Any university, college or community college, whether located in or out of Nevada; or
- (f) Any hospital accredited by The Joint Commission.

~~16.1~~ 7. To be approved as a provider of a course in continuing education, the instructor of the course must complete a form provided by the Board and submit it to the Board for review by a committee appointed by the Board not later than 45 days before the beginning date of the course. Upon receipt of the form, the committee shall, within 10 days after receiving the form, approve or disapprove the application and inform the applicant of its decision.

~~17.1~~ 8. Study by group may be approved for continuing education if the organizer of the group complies with the requirements of subsection ~~16.1~~ 7 and furnishes the Board with a complete list of all members of the group, a synopsis of the subject to be studied, the time, place and duration of the meetings of the group, and the method by which attendance is recorded and authenticated.

~~18.1~~ 9. Credit may be allowed for attendance at a meeting or a convention of a dental, dental therapy, ~~for~~ dental hygiene *or dental assistance* society.

~~19.1~~ 10. Credit may be allowed for courses completed via home study, on-line study, self-study or journal study which are taught through correspondence, webinar, compact disc or digital video disc.

~~110.1~~ 11. Credit may be allowed for dental, dental therapy, ~~and~~ dental hygiene *and expanded function dental assistance* services provided on a voluntary basis to nonprofit agencies and organizations approved by the Board.

Sec. 15. NAC 631.175 is hereby amended to read as follows:

631.175 1. Approved subjects for continuing education in dentistry, dental therapy, ~~and~~ dental hygiene *and expanded function dental assistance* are:

(a) Clinical subjects, including, without limitation:

(1) Dental and medical health;

- (2) Preventive services;
- (3) Dental diagnosis and treatment planning; and
- (4) Dental clinical procedures, including corrective and restorative oral health procedures and basic dental sciences, dental research and new concepts in dentistry; and

(b) Nonclinical subjects, including, without limitation:

- (1) Dental practice organization and management;
- (2) Patient management skills;
- (3) Methods of health care delivery; and
- (4) Teaching methodology.

2. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist or dental therapist must annually complete at least 15 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 30 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dentist or dental therapist, as applicable.

3. In completing the hours of continuing education required pursuant to NAC 631.173, a dental hygienist must annually complete at least 12 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 24 hours in clinical subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dental hygienist.

4. *In completing the hours of continuing education required pursuant to NAC 631.173, an expanded function dental assistant must annually complete at least 12 hours in clinical subjects approved pursuant to subsection 1 or biennially complete at least 24 hours in clinical*

subjects approved pursuant to subsection 1, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the expanded function dental assistant.

5. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist, *a* dental therapist ~~or~~, *a* dental hygienist *or an expanded function dental assistant* must annually complete at least 2 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in NAC 631.178 or biennially complete at least 4 hours in the clinical subject of infection control in accordance with the provisions of the guidelines adopted by reference in NAC 631.178, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the dentist, dental therapist, ~~or~~ dental hygienist ~~or~~ *or expanded function dental assistant*.

~~5.1~~ 6. *In completing the hours of continuing education required pursuant to NAC 631.173, an expanded function dental assistant must annually complete at least 2 hours in the clinical subject of the identification and prevention of medical emergencies or biennially complete at least 4 hours in the clinical subject of identification and prevention of medical emergencies, as applicable, based on the renewal period set forth in NRS 631.330 for the type of license held by the expanded function dental assistant.*

7. In completing the hours of continuing education required pursuant to NAC 631.173, a dentist who is registered to dispense controlled substances pursuant to NRS 453.231 must complete at least 2 hours of training relating specifically to the misuse and abuse of controlled substances, the prescribing of opioids or addiction during each period of licensure.

~~6.1~~ 8. The Board will credit, as a maximum in any one year of an annual or biennial licensing period, the following number of hours of instruction for the following types of courses or activities:

- (a) For approved study by a group, 3 hours.
- (b) For attendance at a meeting or convention of a dental, dental therapy , ~~for~~ dental hygiene *or dental assistance* society, 1 hour for each meeting, but not more than 3 hours, exclusive of hours of continuing education offered in conjunction with the meeting.
- (c) For courses completed via home study, on-line study, self-study or journal study through correspondence, webinar, compact disc or digital video disc, not more than 50 percent of the number of hours of continuing education required by subsection 1, 2 , ~~for~~ 3 *or 4* of NAC 631.173, as applicable.
- (d) For all other courses conducted by an approved instructor, the number of hours completed by the dentist, dental therapist , ~~for~~ dental hygienist ~~for~~ *or expanded function dental assistant.*
- (e) For approved dental, dental therapy , ~~for~~ dental hygiene *or expanded function dental assistance* services provided in approved nonprofit settings, 6 hours, except that not more than 3 hours will be allowed for any day of volunteer services provided.

Sec. 16. NAC 631.177 is hereby amended to read as follows:

631.177 1. When requesting a renewal or reinstatement of his or her license, each:

- (a) Dentist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 20 approved hours of instruction in continuing education during the period July 1,, through and including June 30, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary

resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Dentist

(b) Dental therapist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 18 hours of instruction in continuing education during the period July 1,, through and including June 30, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Dental Therapist

(c) Dental hygienist shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 15 approved hours of instruction in continuing education during the period July 1,, through and including June 30,, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Dental Hygienist

(d) *Expanded function dental assistant shall submit a signed, written statement in substantially the following language for each year since his or her last renewal:*

I,, hereby certify to the Board of Dental Examiners of Nevada that I have obtained at least 12 approved hours of instruction in continuing education during the period July 1,, through and including June 30,, I also certify to the Board of Dental Examiners of Nevada that I am currently certified in administering cardiopulmonary resuscitation or another medically acceptable means of maintaining basic bodily functions which support life.

Dated this (day) of (month) of (year)

.....
Signature of Expanded Function Dental Assistant

(e) Dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* shall submit proof of his or her current certification in administering cardiopulmonary resuscitation or other medically acceptable means of maintaining basic bodily functions which support life.

2. Legible copies of all receipts, records of attendance, certificates and other evidence of attendance by a dentist, *a* dental therapist ~~or~~, *a* dental hygienist *or an expanded function dental assistant* at an approved course in continuing education must be retained by the dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* and made available to the Board for inspection or copying for 3 years after attendance at the course is submitted to meet the continuing education requirements of the Board. Proof of attendance and completion of the required credit hours of instruction must be complete enough to enable the Board to verify the attendance and completion of the course by the dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* and must include at least the following information:

- (a) The name and location of the course;
- (b) The date of attendance;
- (c) The name, address and telephone number of its instructor;
- (d) A synopsis of its contents; and
- (e) For courses designed for home study, the number assigned to the provider by the Board at the time the course was approved and the name, address and telephone number of the producer or author of the course.

3. The second or subsequent failure of a dentist, *a* dental therapist, ~~or~~ *a* dental hygienist *or an expanded function dental assistant* to obtain or file proof of completion of the credit hours of instruction required by this section and NAC 631.173 and 631.175 is unprofessional conduct.

4. The Board will conduct random initial audits of dentists, dental therapists, ~~or~~ dental hygienists *and expanded function dental assistants* and additional follow-up audits, as necessary, to ensure compliance with the requirements of this section and NAC 631.173 and 631.175.

Sec. 17. NAC 631.273 is hereby amended to read as follows:

631.273 1. If, upon the death of a dentist licensed pursuant to chapter 631 of NRS, a surviving member of his or her family desires to own or control his or her practice, share in the fees therefrom, or control the services offered, the surviving member shall, within 2 months after the dentist's death, notify the Board of that fact by furnishing the Secretary-Treasurer with a certified copy of the death certificate.

2. Upon receipt of the death certificate, the Board will appoint one or more of its members, agents or employees to investigate the operation of the dental practice of the decedent to determine whether the practice is being conducted in full compliance with the requirements of chapter 631 of NRS and the regulations of the Board, paying particular attention to the health, welfare and safety of the public.

3. If, upon investigation, the Board finds that the practice is not being conducted in full compliance with the requirements of chapter 631 of NRS or the regulations of the Board, it will apply to the district court to enjoin the continuation of the practice and will further institute any disciplinary action it deems necessary against any licensed dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* associated with the practice.

Sec. 18. NAC 631.275 is hereby amended to read as follows:

631.275 1. For the purposes of paragraph (i) of subsection 2 of NRS 631.215, the Board will deem a person to exercise authority or control over the clinical practice of dentistry if the person, by agreement, lease, policy, understanding or other arrangement, exercises authority or control over:

(a) The manner in which a licensed dentist, a dental therapist, a dental hygienist , *an expanded function dental assistant* or a dental assistant uses dental equipment or materials for the provision of dental treatment;

(b) The use of a laboratory or the decision to purchase or not to purchase dental equipment or materials against the advice of a licensed dentist if the dentist reasonably concludes that such use, purchase or failure to purchase would impair the ability of the dentist, *a dental therapist ,* ~~for~~ a dental hygienist *or an expanded function dental assistant* to provide dental care to a patient consistent with the standard of care in the community;

(c) A decision of a licensed dentist regarding a course or alternative course of treatment for a patient, the procedures or materials to be used as part of a course of treatment or the manner in which a course of treatment is carried out by the dentist, a dental therapist, a dental hygienist , *an expanded function dental assistant* or a dental assistant;

(d) The length of time a licensed dentist, a dental therapist , ~~for~~ a dental hygienist *or an expanded function dental assistant* spends with a patient or if the person otherwise places conditions on the number of patients a licensed dentist, a dental therapist , ~~for~~ a dental hygienist *or an expanded function dental assistant* may treat in a certain period of time;

(e) The length of time a licensed dentist, a dental therapist, a dental hygienist , *an expanded function dental assistant* or a dental assistant spends performing dental services, against the

advice of the dentist, if the dentist reasonably believes that the ability of the dentist, dental therapist, dental hygienist , *expanded function dental assistant* or dental assistant to provide dental care to a patient consistent with the standard of care in the community would be impaired;

(f) The referrals by a licensed dentist to another licensed dentist or otherwise places any restriction or limitation on the referral of patients to a specialist or any other practitioner the licensed dentist determines is necessary;

(g) The clinical practices of a dental therapist ~~or~~ , a dental hygienist *or an expanded function dental assistant* regarding appropriate dental therapy care or dental hygiene care, as applicable, or the duties that a licensed dentist may delegate to a dental therapist ~~or~~ , a dental hygienist ~~or~~ *or an expanded function dental assistant*;

(h) Patient records at any time to the exclusion of the applicable licensed dentist or the applicable patient;

(i) A decision of a licensed dentist to refund payments made by a patient for clinical work that is not performed or is performed incorrectly by:

(1) The dentist; or

(2) A dental therapist ~~or~~ , a dental hygienist *or an expanded function dental assistant* employed by the licensed dentist or a professional entity of the licensed dentist;

(j) A decision regarding the advertising of the practice of a licensed dentist if the decision would result in a violation of the provisions of NRS 631.348 by the dentist;

(k) A decision to establish fees for dental services against the advice of a licensed dentist if the dentist reasonably concludes that those fees would impair the ability of the dentist, a dental therapist , ~~or~~ a dental hygienist *or an expanded function dental assistant* to provide dental care to patients consistent with the standard of care in the community;

(l) A decision relating to the clinical supervision of dental therapists , ~~or~~ dental hygienists , *expanded function dental assistants* and ancillary personnel regarding the delivery of dental care to patients of a licensed dentist;

(m) The hiring or firing of licensed dentists, dental therapists , ~~or~~ dental hygienists *or expanded function dental assistants* or the material clinical terms of their employment relationship with a licensed dentist or a professional entity of a licensed dentist;

(n) A decision regarding the hiring of ancillary personnel against the advice of a licensed dentist or a decision by a licensed dentist to fire or refuse to work with ancillary personnel if that advice, firing or refusal is related to the clinical competence of that ancillary personnel to render dental care to patients, regardless of who employs such ancillary personnel; and

(o) The material terms of any provider contracts or arrangements between a licensed dentist or a professional entity of a licensed dentist and third-party payors against the advice of the dentist, if the dentist reasonably concludes that the contract or arrangement would impair the ability of the dentist to provide dental care to patients consistent with the standard of care in the community.

2. For the purposes of this section:

(a) “Ancillary personnel” means a person, other than a licensed dentist, a dental therapist , ~~or~~ a dental hygienist ~~or~~ *or an expanded function dental assistant*, who:

(1) Directly provides dental care to a patient under the supervision of a licensed dentist, a licensed dental therapist or a dental hygienist; or

(2) Assists a licensed dentist, a dental therapist or a dental hygienist in the provision of dental care to a patient.

(b) “Clinical” means relating to or involving the diagnosis, evaluation, examination, prevention or treatment of conditions, diseases or disorders of the maxillofacial area, oral cavity or the adjacent and associated structures and their impact on the human body, as typically provided by a licensed dentist or, if applicable, a dental therapist ~~or~~, *a dental hygienist ~~H~~ or an expanded function dental assistant*, within the scope of the education, experience and training of the dentist, dental therapist, ~~or~~ dental hygienist ~~H~~ *or expanded function dental assistant*, in accordance with applicable law and the ethics of the profession of dentistry.

Sec. 19. NAC 631.279 is hereby amended to read as follows:

631.279 1. Any applicant or licensed dentist, dental therapist, ~~or~~ dental hygienist *or expanded function dental assistant* may obtain a determination or advisory opinion from the Board as to the applicability of any provision of chapter 631 of NRS or any regulation adopted pursuant thereto by bringing an action for a declaratory judgment before the Board.

2. The Board will construe any statute or regulation reviewed pursuant to this section in a manner consistent with the declared policy of the State of Nevada.

Sec. 20. Section 3 of LCB File No. R072-22 is hereby amended to read as follows:

Sec. 3. Except as otherwise provided in NRS 622.090, in fulfillment of the requirements of paragraph (b) of subsection 1 of NRS 631.3121, an applicant taking the clinical examination approved by the Board and the American Board of Dental Examiners or the clinical examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board must pass a simulated clinical examination in dental therapy or a comparable examination administered by the ~~Western~~ *Commission on Dental Competency Assessments-Council of Interstate Testing Agencies, Inc.-Western* Regional Examining Board, as applicable.

Program Name	Revive Mobile Oral Health Solutions
Program Website	www.revivehealthandwellnesscenter.com
Program Manager Name	Jacqueline Patterson
Program Service Categories	<div>Other</div> <div>Diagnostic and Preventive Care</div> <div>Non-Restorative Clinical Procedures</div> <div>Palliative and Protective Treatments</div> <div>Medicaments and Sealants</div>
Diagnostic and Preventative Care Services	<div>Expose radiographs</div> <div>Complete full oral-health assessment</div> <div>Develop a dental hygiene care plan</div> <div>Remove calculus, plaque, stains</div> <div>Provide oral hygiene instruction and risk reduction counseling</div> <div>Polish and smooth tooth surfaces</div>
Non-Restorative Clinical Procedures	<div>Take impressions</div> <div>Perform subgingival curettage</div> <div>Place/remove periodontal packs</div> <div>Remove sutures</div> <div>Remove excess cement from restorations orthodontic appliances</div>
Medicaments and Sealants	<div>Administer local intraoral chemotherapeutic agents (silver diamine fluoride)</div> <div>Apply pit-and-fissure sealants</div>
Palliative and Protective Treatment	<div>Re-cement or repair temporary crowns/bridge</div> <div>Re-cement permanent crowns/bridges with non-permanent material</div> <div>Place temporary restorative material as a palliative measure</div>

