

Information for Regulated Members Applying for Advanced Restricted Activity Authorization and Entry onto the Advanced Restricted Activity Rosters of the Alberta College of Dental Hygienists (ACDH)

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General Information and Legislative References

In order to perform specific Advanced Restricted Activities in Alberta, as outlined in the [Dental Hygienists Profession Regulation](#) (the 'Regulation'), sections 13(1) and 13(2), Registered Dental Hygienists must receive authorization from the Alberta College of Dental Hygienists (ACDH, or the 'College').

Provided that General registrants and Courtesy registrants have received the appropriate advanced training, and applied for and received authorization from the College, they are permitted to perform the following restricted activities in their practice of dental hygiene:

- Administration of Local Anaesthesia
- Prescribing of Schedule 1 Drugs as listed in the Regulation
- Prescribing or administering nitrous oxide for the purpose of conscious sedation
- Collaborating with a dentist to perform orthodontic procedures as described in the Regulation
- Collaborating with a dentist to perform restorative procedures of a permanent nature as described in the Regulation

Section 14 of the Regulation describes what boundaries authorized registrants must apply to the performance of these activities and to what standards they must be performed to.

Registrants authorized to perform advanced restricted activities must restrict themselves to performing activities that:

- They are competent to perform
- Are appropriate to the registrant's area of practice
- Are appropriate to the procedure being performed

Registrants authorized to perform advanced restricted activities must adhere to the standards approved by Council.

No applicant may perform the restricted activity until they have received notification from the ACDH that the application for authorization to perform the restricted activity has been approved.

Eligibility and Substantial Equivalency

Only registrants who are on the ACDH's General Register or Courtesy Register may apply for Advanced Restricted Activity authorization.

Applicants who are submitting an application for initial registration, reinstatement, or transfer may apply for Advanced Restricted Activity authorization at the same time, however, approval of their application for General registration is required before Advanced Restricted Activity authorization is considered.

Entry onto any Roster is based on a combination of the following factors.

Appropriate education related to the performance of the activity:

- Registrants must acquire the competencies (knowledge, skills, attitude, and judgment) required to perform the activity at the required standard of competence, through appropriate education. Initial training for Advanced Restricted Activities must be received from an institution that delivers an accredited program. This training may be completed as part of a dental hygiene education program or via a continuing education course. Any education must be received from either:
 - A Council-approved program, or
 - A program that has been deemed substantially equivalent to the Council-approved program.
- Applicants must provide evidence of successful completion of the appropriate education course (e.g., an *official* transcript from a dental hygiene program, a *notarized* certificate of completion). Applicants must have successfully completed both the theoretical and clinical aspects of the appropriate education course or program.

The length of time that has elapsed since an applicant successfully completed education related to the activity

- Registrants must apply for Advanced Restricted Activity authorization within 6 months of having successfully completed the appropriate education. This means:
 - Within six (6) months of course completion if initial training is obtained via a continuing education course.
 - Within six (6) months of program completion if initial training is obtained as part of a dental hygiene education program.

Currency of their practice of the activity

- If the registrant successfully completed the appropriate education more than 6 months prior to the date of application, they must provide evidence of currency of practice (e.g., a letter from an employer, or redacted charts/documentation) verifying that they have regularly performed the activity in their practice.
- For all Advanced Restricted Activities except prescribing Schedule 1 drugs, if more than 36 months have elapsed since the applicant performed the activity, they may be required to take either a Council-approved refresher course or an appropriate education course for the activity in its entirety, as determined by sole discretion of the ACDH.
- For the Advanced Restricted Activity of prescribing Schedule 1 drugs, if more than 12 months have elapsed since the applicant performed this restricted activity, they may be required to retake the appropriate education course.

Application Form and Process

An application for Advanced Restricted Activity authorization must be made on the current and required form. All applications will be reviewed on an individual basis.

The College works to process all applications within 1-2 weeks once an application has been made complete but may take longer if additional information is required to make a decision. The College will notify applicants when:

- Their application has been received
- Their application is incomplete and what is still required
- Their application is complete and being put forward for consideration
- A decision has been made

Applications that remain incomplete for **more than ninety (90) days** after notification is sent to the applicant will be cancelled and the registrant must start a new application.

The Registrar may approve or deny an application, based on an assessment of the documentation provided and what is in the best interest of the public.

An application for entry onto any Roster may be denied or deferred if the applicant is the subject of an investigation or discipline related to unprofessional conduct in any jurisdiction.

Requirements

The following items are required for an application:

- A completed application form for entry onto the ACDH Roster for the Advanced Restricted Activity.
- Current CPR certification that meets the Council-approved policy must be on the registrant's file with the ACDH.
- Evidence of successful completion of appropriate education (e.g., official transcript from dental hygiene program, notarized certificate of completion from continuing education course) **AND**
- Evidence of currency verifying that the applicant performs the procedures on a regular basis (e.g. a signed letter from an employer or redacted patient charts) verifying that the registrant performed the activity in their practice if the education was completed more than 6 months prior to application.

Authorization

Once authorized, the registrant must adhere to any established Standard of Practice for each Advanced Restricted Activity. These may change from time to time and registrants are responsible for maintaining competence and currency. The most current Standards of Practice and Guidelines are located on the ACDH website.

Changes to Permit Status

As per s.13(2) of the Dental Hygienists Profession Regulation, authorization to perform any Advanced Restricted Activity may only be granted to registrants who are on the General Register or Courtesy Register. **Therefore, if a registrant is removed from the General or Courtesy Register for any reason (e.g., cancellation at the request of the registrant or by the College, or switching to the Non-Practicing Register) they will no longer retain authorization for any Advanced Restricted Activities.** Registrants may reapply for Advanced Restricted Activity authorization if they apply for reinstatement or transfer to the General Register or for registration on the Courtesy Register. Advanced Restricted Activity authorizations are not automatically reinstated.

The College reserves the right to suspend or cancel any authorization given to a registrant, including, but not limited to, if a registrant does not maintain their practice permit in good standing on the General Register or Courtesy Register.

Inquiries

All inquiries regarding this policy or application process should be directed to registration@acdh.ca.

Definitions

Accredited program: refers to an educational program accredited by the Commission on Dental Accreditation of Canada (CDAC) or the American Dental Association Commission on Dental Accreditation (CODA).

Advanced Restricted Activity: a restricted activity which requires advanced training and authorization by the ACDH prior to performing the restricted activity.

Advanced training: theoretical and clinical training in a specific area of practice, which is above and beyond the entry-to-practice competency requirements. Advanced training is not usually offered as part of an entry-to-practice dental hygiene education program and must be approved by the College.

Appropriate education: education which provides sufficient theoretical foundation and clinical experience for the practitioner to practice in a competent, legal, ethical, and professional manner.

Authorization: approval by the ACDH which allows a registrant to perform an Advanced Restricted Activity as part of their practice of dental hygiene.

Currency: refers to the length of time that has passed since the registrant last performed the activity. Each Advanced Restricted Activity may have a different timeframe within which a registrant is considered to have Currency.

Restricted Activity: a particular activity which may be performed only by registrants in specific regulated health professions. These are defined within the "Regulation" of a profession under the Health Professions Act of Alberta. For dental hygienists, these are defined in s.13 of the Dental Hygienists Profession Regulation and are restricted according to the parameters in s.14.

Roster: a list of registrants who are authorized by the ACDH to perform a specific Advanced Restricted Activity as part of their practice of dental hygiene in Alberta.

Substantially equivalent: the determination made by the ACDH that an education program or course is comparable to an education program or course that has been approved by ACDH Council.

Appendix A – Local Anaesthesia

Council-Approved Appropriate Education Courses

The University of Alberta Dental Hygiene Program and the University of Alberta Local Anaesthesia Continuing Dental Education Course for Dental Hygienists are the Council-approved appropriate education courses and serve as the benchmark courses of study for authorization to administer local anaesthesia in Alberta.

Substantial Equivalency

The ACDH will assess the qualifications and competencies of graduates of local anaesthesia courses other than those delivered by the University of Alberta, for the purpose of determining substantial equivalence to the qualifications and competencies required for successful completion of the Council-approved courses.

Refresher Course

If the applicant completed their local anaesthesia course less than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last *administered* local anaesthesia on a regular basis, the applicant must successfully complete a Council-approved local anaesthesia *refresher course* prior to applying for authorization.

If the applicant completed their local anaesthesia course more than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last administered local anaesthesia on a regular basis, the applicant must successfully complete a Council-approved local anaesthesia *education course* (*a refresher course will not be accepted*) prior to application.

Appendix B – Nitrous Oxide/Oxygen Conscious Sedation

Council-Approved Appropriate Education Courses

The Nitrous Oxide/Oxygen Conscious Sedation course delivered by the University of Alberta, Faculty of Medicine and Dentistry, Continuing Dental Education is the Council-approved appropriate education course and serves as the benchmark course of study for authorization to prescribe or administer nitrous oxide/oxygen conscious sedation in Alberta.

Substantial Equivalency

The ACDH will assess the qualifications and competencies of graduates of nitrous oxide/oxygen conscious sedation courses other than the Council-approved course, for the purpose of determining substantial equivalence to the qualifications and competencies required for successful completion of the Council-approved course.

Refresher Course

If the applicant completed nitrous oxide course more than 36 months (3 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last prescribed or administered nitrous oxide/oxygen conscious sedation on a regular basis, the applicant must successfully complete a Council-approved or substantially equivalent nitrous oxide/oxygen conscious sedation *education course (a refresher course will not be accepted)* prior to application.

Course Competencies

An educational course designed to produce competency in prescribing and administering nitrous oxide/oxygen conscious sedation may be reviewed for substantial equivalence by the College if it meets the following criteria:

Theoretical course content must include:	Clinical course content must include:
<ol style="list-style-type: none">1. Nitrous oxide and oxygen conscious sedation medical emergencies and other adverse events, (includes prevention, recognition and management)2. Indications and contraindications for use of nitrous oxide/oxygen conscious sedation3. Client evaluation and selection4. Pharmacology of nitrous oxide5. Function of the basic components of the inhalation sedation equipment6. Monitoring of vital signs (before, during and after treatment)	<ol style="list-style-type: none">1. Client evaluation2. Set up and operation of the inhalation and monitoring equipment3. Nitrous oxide and oxygen conscious sedation techniques on clients (includes the signs of adequate client sedation, signs of client distress, and proper client monitoring)
Additional Requirements:	
<ol style="list-style-type: none">1. The course contains a minimum of:<ol style="list-style-type: none">1.1. Four (4) hours of didactic instruction; and1.2. Three (3) hours of on-site clinical experience with clients2. There must be evidence that course participants receive sufficient experiences in both the pre-clinical and clinical settings to attain competence.3. The nitrous oxide/oxygen conscious sedation course must be delivered as a component of an accredited dental hygiene undergraduate program or as a continuing education course delivered by:<ol style="list-style-type: none">3.1. An accredited faculty of dentistry, or3.2. An accredited dental hygiene program4. The course must be held in a properly equipped dental environment which will permit the course participants to use the techniques being taught on clients.5. There must be evidence of an appropriate process for evaluation in both the theoretical and clinical components of the course.	

Appendix C – Restorative Procedures of a Permanent Nature

Definitions

In reference to the Regulation (s.13(2)b), and for the purposes of this policy, the following definition is provided:

“In collaboration with a dentist” means that the dentist must prepare (cut) the tooth prior to the dental hygienist placing, carving and finishing the restorative material. Dental hygienists are not authorized to cut teeth as part of the performance of restorative procedures of a permanent nature.

Council-Approved Appropriate Education Courses

There are currently no Council-approved education courses for authorization to perform restorative procedures of a permanent nature in Alberta. However, an educational course designed to produce competency in performing restorative procedures of a permanent nature must meet the criteria listed below in order for the College to determine if it can be deemed to be appropriate education.

Refresher Course

If the applicant completed their restorative procedures course less than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last *performed* restorative procedures on a regular basis, the applicant must successfully complete a Council-approved restorative procedures *refresher course* prior to applying for authorization.

If the applicant completed their restorative procedures course more than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last performed restorative procedures on a regular basis, the applicant must successfully complete a Council-approved restorative procedures *education course* (*a refresher course will not be accepted*) prior to application.

Course Competencies

An educational course designed to produce competency in the performance of restorative procedures of a permanent nature must meet the following criteria in order for the College to determine if it can be deemed to be appropriate education.

Theoretical course content must include:	Pre-clinical and clinical course content must include:
<ol style="list-style-type: none">1. Science of dental materials2. Histology and embryology3. Dental anatomy4. Functional occlusion5. Black’s classification6. Health and safety7. Management of records	<ol style="list-style-type: none">1. Moisture control and isolation techniques2. Placement of pulp protection (e.g. liners, bases)3. Placement and removal of matrices and wedges4. Bonding Materials5. Amalgam Restorations (Class I, II, and V)6. Composite Restorations (Class I, II, III, IV, and V)7. Placement of temporary restorations/sedative dressings8. Placement of gingival retraction cord9. Placement, finishing and polishing of restorations10. Periodontal response to restorations11. Infection control procedures12. Hazardous waste management procedures
Additional Requirements:	
<ol style="list-style-type: none">1. There must be evidence that course participants receive sufficient experiences in both the pre-clinical and clinical settings to attain competence.2. The restorative dental hygiene course must be delivered as a component of an accredited dental hygiene undergraduate program or as a continuing education course delivered by:<ol style="list-style-type: none">2.1. An accredited faculty of dentistry or dental hygiene undergraduate program, or2.2. Other continuing education programs which the Registrar or Registration Committee deem substantially equivalent to a Council approved accredited faculty of dentistry/dental hygiene sponsored course and is:	

- 2.2.1. Organized and taught by oral health practitioners who are registered/licensed in good standing and authorized to provide restorative procedures in the jurisdiction where they hold registration/licensure, and
 - 2.2.2. Held in a properly equipped dental environment which will permit the course participants to use the techniques being taught to achieve an acceptable entry-level of competence for the performance of restorative procedures
3. There must be evidence of an appropriate process for evaluation in both the theoretical and clinical components of the course.

Appendix D – Orthodontic Procedures

Definitions

In reference to the Regulation (Section 13(2)c), and for the purposes of this policy, the following definitions are provided:

“In collaboration with a dentist” means that a dental hygienist authorized to perform any orthodontic procedures must only perform such procedures following the diagnosis and treatment planning prescribed by the dentist. **The dentist must be on-site and available to assist** during the performance of the orthodontic procedures listed below. Prior to dismissal of the client, the dentist must:

- Perform the final fitting and/or adjustment of any appliance, and
- Perform a final check on any of the following orthodontic procedures performed by the dental hygienist:
 - Bonding of attachments
 - Direct and Indirect bonding of brackets
 - Cementation of bands and appliances

“Appliance” means any temporary, provisional, or long-term fixed or removable device designed to influence the shape and/or function of the stomatognathic system.

“Orthodontic appliance” means any device used to influence the growth or the position of teeth and jaws (e.g., holding arches, bands, headgear, activator, bionator, palatal expansion device, etc.).

“Periodontal appliance” means any device used to immobilize and stabilize loose teeth (e.g., splint); reduce occlusal trauma caused by bruxism (e.g., nightguard) or treat TMJ disorders.

“Preliminary fit” means the initial try-in or placement of an appliance prior to final fitting and/or adjustment by a regulated member (i.e., registrant) of the Alberta Dental Association and College (ADA+C).

Council-Approved Appropriate Education Courses

There are currently no Council-approved appropriate education courses for authorization to perform orthodontic procedures in Alberta. However, an educational course designed to produce competency in performing orthodontic procedures must meet the criteria listed below in order for the College to determine if it can be deemed to be appropriate education.

Refresher Course

If the applicant completed their orthodontic procedures course less than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last *performed* orthodontic procedures on a regular basis, the applicant must successfully complete a Council-approved orthodontic procedures *refresher course* prior to applying for authorization.

If the applicant completed their orthodontic procedures course more than 72 months (6 years) prior to application, **and** more than 36 months (3 years) have elapsed since the applicant last performed orthodontic procedures on a regular basis, the applicant must successfully complete a Council-approved orthodontic procedures *education course (a refresher course will not be accepted)* prior to application.

Orthodontic Procedures Requiring Advanced Training and Authorization

Below is a list of orthodontic procedures requiring Council-approved orthodontic training and ACDH authorization as per the Advanced Restricted Activities Policy:

- placement and removal of separators
- preliminary placement of fixed appliances prior to adjustment by a dentist
- preliminary placement of removable appliances prior to adjustment by a dentist
- preliminary fitting of bands
- direct bonding of attachments following prescription of the dentist and prior to final check by the dentist
- direct or indirect bonding of brackets following the prescription of the dentist and prior to final check by the dentist
- cementation of bands and appliances prior to final check by the dentist
- placement and removal of archwires which have been formed by a dentist

- placement and removal of archwire accessories and ligatures
- removal of bands and bonded metal attachments

Course Competencies

An educational course designed to produce competency in the performance of orthodontic procedures must meet the following criteria in order for the College to determine if it can be deemed to be appropriate education.

Theoretical course content must include:	Pre-clinical and clinical course content must include:
<ol style="list-style-type: none"> 1. Classifications of malocclusion 2. Common etiologies of malocclusion 3. Goals of orthodontics and indications for treatment 4. The four stages of comprehensive treatment 5. Treatment mechanics: <ol style="list-style-type: none"> 5.1. Mechanics of orthodontic /orthopaedic/surgical movement 5.2. General mechanics of appliance action 5.3. Fixed appliances and their mechanics of action 5.4. Band and bond structure 5.5. Properties of archwires 5.6. Fixed and removable appliances and their mechanics of action 6. Diagnostic records: <ol style="list-style-type: none"> 6.1. Orthodontic evaluation 6.2. Photographs 6.3. Radiographs 6.4. Orthodontic impression taking 6.5. Centric occlusion wax bite 6.6. Model trimming 6.7. Bitefork and facebow registration 6.8. Mounting articulated models 7. Clinical procedures: <ol style="list-style-type: none"> 7.1. Separation 7.2. Banding and debanding 7.3. Bonding and debonding 7.4. Archwires 7.5. Ligatures 7.6. Self-ligating brackets 7.7. Power products and accessories 7.8. Checking appliance integrity and initial try-in of appliances including: <ol style="list-style-type: none"> 7.8.1. Determining the preliminary fit of removable appliances prior to final fitting and/or adjustment by a dentist 7.8.2. Determining the preliminary fit of bands prior to final fitting and/or cementation by a dentist 7.8.3. Determining the preliminary fit of fixed appliances prior to adjustment and cementation by a dentist 8. Patient instruction: 	<ol style="list-style-type: none"> 1. Taking intra-oral and extra-oral photographs 2. Patient placement for exposure of extra-oral radiographs (hand/wrist, cephalometric, panoramic) 3. Placement and removal of separators 4. Placement and removal of oral isolation devices in preparation for direct bonding procedures 5. Manipulation and application of materials for bonding and banding procedures 6. Cement bands and appliances prior to final check by the dentist 7. Removal of banding cement and bonding adhesive with hand or power instruments 8. Preparation of the teeth for banding and direct bonding procedures 9. Placement and indirect or direct bonding of ortho brackets and bondable attachments. Checking integrity of bands, bonds, attachments, etc. 10. Placement and removal of archwires which have been formed by a dentist 11. Trim and/or bend distal ends of archwires 12. Placement and removal of archwire accessories and ligatures: individual or chain elastomeric ligatures, wire ligatures (separate and continuous) and self-ligation mechanisms 13. Application of non-medicinal material such as wax or lip bumper to reduce ortho component irritation 14. Removal of bands and bonded metal attachments, utilizing hand instruments 15. Provide patient instruction regarding: <ol style="list-style-type: none"> 15.1. the care and use of orthodontic appliances 15.2. oral hygiene and disease control 15.3. elastic placement 15.4. proper eating habits and patient cooperation 15.5. orthodontic emergencies 16. Determining the preliminary fit of removable appliances prior to final fitting and/or adjustment by a dentist 17. Determining the preliminary fit of bands prior to final fitting by a dentist and cementation by a dentist or RDH 18. Determining the preliminary fit of fixed appliances prior to adjustment and cementation by a dentist

<ul style="list-style-type: none"> 8.1. The care and use of orthodontic appliances 8.2. Oral hygiene and disease control 8.3. Elastic placement 8.4. Proper eating habits and patient cooperation 8.5. Orthodontic emergencies 9. Infection prevention and control in orthodontics 	
Additional Requirements	
<ul style="list-style-type: none"> 1. There must be evidence that course participants receive sufficient experiences in both the pre-clinical and clinical settings to attain competence. The clinical session must be a minimum of 24 hours including instruction, practice, and evaluation. 2. The orthodontic course must be delivered as a component of an accredited dental hygiene program or as a continuing education course delivered by: <ul style="list-style-type: none"> 2.1. An accredited faculty of dentistry, 2.2. An accredited dental hygiene program, or 2.3. An accredited dental assisting program. 3. The orthodontic program must be taught by oral health practitioners who are registered/licensed in good standing and authorized to provide orthodontic procedures in the jurisdiction where they hold registration/licensure. In accordance with the Health Professions Act, persons teaching clinical courses in Alberta must be registered with the appropriate Alberta regulatory authority (e.g., ACDH, ADA+C). 4. The orthodontic program must be held in a properly equipped dental environment which will permit the course participants to use the techniques being taught to achieve an acceptable entry-level of competence for the performance of orthodontic procedures. 5. There must be evidence of appropriate evaluation in both the theory (written examination) and clinical components. 	

Appendix E – Prescribing Schedule 1 Drugs

Council-Approved Appropriate Education Courses

The *ACDH Elements of Prescribing: A Pharmacy Refresher* course originally developed by the ACDH is deemed Council-approved. This course serves as the benchmark course for authorization to perform the restricted activity of prescribing the Schedule 1 Drugs listed in the Dental Hygienists Profession Regulation. The ACDH Elements of Prescribing course was originally delivered by ACDH, but is now being delivered by the University of Alberta Dental Hygiene Program and the University of Alberta, Continuing Dental Education Department.

Refresher Course

If the applicant completed their prescribing Schedule 1 drugs course more than 12 months prior to application, **and** more than 12 months have elapsed since the applicant last *prescribed* schedule 1 drugs on a regular basis the applicant must successfully complete a Council-approved prescribing Schedule 1 drugs *education course* (a *refresher course will not be accepted*) prior to application.

Course Competencies

An educational course designed to produce competency in prescribing the following Schedule 1 drugs within the meaning of Schedule 7.1 of the Government Organization Act for the purpose of treating oral health conditions, providing prophylaxis and treating emergencies:

- i. antibiotics;
- ii. antifungal agents;
- iii. anti-infective agents;
- iv. antiviral agents;
- v. bronchodilators;
- vi. epinephrine;
- vii. fluoride;
- viii. pilocarpine;
- ix. topical corticosteroids;

may be reviewed for substantial equivalence by the College if it meets the following criteria:

Theoretical course content must include:	Clinical course content must include:
<ol style="list-style-type: none">1. Review of the principles of drug pharmacokinetics and pharmacodynamics.2. The mechanisms of actions, indications for use, potential actions, and contraindications of specific drugs and the implications to dental hygiene therapy.3. Implement risk reduction strategies in the management of dental hygiene treatment.4. Issue prescriptions which are accurate and complete by incorporating the principles of prescribing drugs in the management of dental hygiene treatment and diagnosis.5. Adhere with the requirements for drug storage, disposal and labelling to maintain safe handling of drugs and to protect the safety of clients and the environment.	<ol style="list-style-type: none">1. Client evaluation and oral condition management decision making2. Clear and accurate written and verbal communication3. Issue Prescriptions4. Proper Documentation
Additional Requirements:	
<ol style="list-style-type: none">1. The course content or content covered in the Dental Hygiene program contains a minimum of:<ol style="list-style-type: none">1.1. Didactic instruction; and1.2. Clinical experiences with clients or case studies or a combination of both, that require issuing a prescription for treating a variety of oral health conditions.	

2. There must be evidence of an appropriate process for evaluation in both the theoretical and clinical components of the course or program including evidence of acceptable psychometrics to determine the final exam pass score and overall course pass score. Acceptable evaluation pass marks for all aspects of the course must be **70% or higher**.
3. The Prescribing Schedule 1 drugs competencies must be taught as a component of an **accredited** dental hygiene undergraduate program or as a continuing education course delivered by an accredited faculty of dentistry or an accredited dental hygiene program.
4. The course or program should be held in a properly equipped dental environment which will permit the course participants or undergraduate students to use the techniques being taught on clients whenever possible.
5. The course includes all of the competency requirements in the table below:

COMPETENCY REQUIREMENTS	
Assessment and Diagnosis	
1	Assess health history (i.e., comprehensive medical history).
2	Assess pharmacological actions/interactions based on the client's current health history (e.g., allergies, medications, natural health products [herbal remedies], etc.).
3	Identify clients at risk for medical emergency.
4	Assess contraindications for treatment based on the client's current health history (e.g., pharmacological, active TB, hypertension, etc.).
5	Assess oral manifestations related to disease, pharmaceuticals and/or natural health products.
6	Assess exposure to fluoride (e.g., community levels, prescriptions, mouth rinses, dentifrice use, etc.).
7	Determine the need for fluoride (e.g., for caries, desensitizing, etc.).
8	Determine the need for non-fluoride caries prevention agents (e.g., chlorhexidine mouth rinses, pit and fissure sealants, etc.).
9	Assess the client's need for pharmacotherapeutic agents required during the provision of dental hygiene services (e.g. premedication antibiotics, local anaesthetics, anti-fungal agents, etc.).
10	Assess the need for management of client pain, anxiety and discomfort (e.g. local anaesthetic, anti-anxiety medication, nitrous oxide/oxygen conscious sedation, support, etc.).
11	Document all records accurately, legibly, comprehensively, and in compliance with privacy legislation throughout the dental hygiene process of care (i.e. during assessment and diagnosis, planning, implementation, and evaluation).
12	Assess practice environment for safety risks (i.e. for clients, the dental hygienist and others).
13	Assess practice environment for emergency measures (i.e. for clients, the dental hygienist and others).
14	Demonstrate knowledge of and compliance with the ACDH Standards of Practice throughout the dental hygiene process of care (e.g. Practice Standards, Code of Ethics, guidelines, etc.).
15	Possess knowledge of categories of the Alberta Drug Schedules for prescription and non-prescription drugs and applicable federal/provincial legislation and guidelines related to prescriptive authority.
16	Assess potential actions/interactions and contraindications of medications to be prescribed by the dental hygienist, with reference to the health history (e.g. local anaesthetic, antibiotics, etc.).
17	Assess the need for consultation and referrals within the health care delivery system.
Planning	
18	selects appropriate pharmacotherapeutic agents based on assessment and dental hygiene diagnosis.
19	obtains informed consent for the dental hygiene care plan from the client and/or agent (e.g. therapy, pharmacotherapeutic agents, anaesthetics, etc.).
20	applies knowledge of categories of the Alberta Drug Schedules for prescription and non-prescription drugs and applicable federal/provincial legislation and guidelines related to prescriptive authority when planning dental hygiene services.

21	applies knowledge of the local, provincial and federal legislation and guidelines regarding the acquisition, proper storage and disposal of prescription and non-prescription drugs.
22	selects appropriate pain management strategies (e.g., local anaesthetic, anti-anxiety medication, nitrous oxide/oxygen conscious sedation, support, etc.).
23	selects appropriate local anaesthesia agents.
24	selects evidence-based clinical intervention options based on the assessment data.
25	collaborates with relevant others in planning services/programs (e.g. family members, agents, health care providers, community members, service clubs, other professionals, etc.).
26	develops a sequence for interventions based on the diagnosis.
Implementation	
27	teaches the client and/or agent about the range of available oral care products and their proper selection (e.g. powered toothbrushes, pharmacotherapeutic agents, mouth rinses, tongue scraper, etc.).
28	implements strategies to manage client pain, anxiety and discomfort (e.g., local anaesthetic, anti-anxiety medication, nitrous oxide/oxygen conscious sedation, support, etc.)
29	monitors the client for adverse reactions to interventions.
30	applies principles of risk management for client health and safety (e.g. universal precautions, considering latex allergies, etc.).
31	applies knowledge of the federal/provincial guidelines for drug error management within the practice environment (e.g. prevention of drug errors related to the "five rights" of medication administration).
32	writes or orders legal prescriptions required in dental hygiene practice in compliance with federal and provincial legislation and guidelines.
33	provides instructions and/or teaches post-operative oral self-care (e.g. implant care, surgery, periodontal debridement, effects of anaesthesia, etc.).
34	provides information regarding actions, interactions, and oral manifestations of pharmaceuticals (i.e. prescription and non-prescription drugs including natural health products).
35	ensures provision of care in emergency situations.
36	applies knowledge of the Canadian Adverse Drug Reaction Monitoring program guidelines.
37	acts as a client advocate (e.g. assisting the client to find treatment, communicating the client's needs to other health professionals, etc.).
38	provides information regarding the effects of recreational drug and alcohol abuse on oral health.
39	provides information regarding histology and embryology of oral and dental structures (e.g. cleft palate, hypoplasia, fluorosis, etc.).
40	collaborates with others in providing, maintaining and advocating for oral health care programs.
Evaluation	
41	evaluates the need for further dental hygiene interventions.
42	evaluates the need for further consultation and referrals within the health care delivery system.
43	evaluates compliance with local, provincial and federal legislation and guidelines regarding the acquisition, proper storage and disposal of prescription and non-prescription drugs.
44	evaluates effectiveness of drug error management within the practice environment (e.g. prevention of drug errors related to the "five rights" of medication administration).
45	evaluates compliance with the Canadian Adverse Drug Reaction Monitoring program guidelines regarding reporting of adverse drug reactions.
46	evaluates the progress of interventions throughout the dental hygiene process of care (e.g. effectiveness of strategies to manage pain, anxiety and discomfort, etc.).
47	evaluates the client's behavioural responses to interventions.

48	evaluates the short and long-term effectiveness of interventions by comparing actual outcomes to expected outcomes (e.g. conducting interim evaluations related to periodontal therapy interventions, reassessing the effectiveness of a community program, etc.).
49	evaluates oral biological and physiological outcomes of interventions.
50	modifies interventions based on interim evaluations and discussions with the client and/or agent.
51	modifies goals based on interim evaluations and discussions with the client and/or agent.
52	evaluates own professional performance in relation to the ACDH standards of practice to facilitate successful dental hygiene interventions (e.g. ACDH standards include the Practice Standards Document, the Code of Ethics, etc.).