

68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1220 ILLINOIS DENTAL PRACTICE ACT
Section 1220.240 Prescribed Duties of Dental Hygienists

a) Dental hygienists may perform the operative procedure of dental hygiene, consisting of oral prophylaxis procedures.

b) Dental hygienists may perform dental health education functions and may record case histories and oral conditions observed.

c) Dental hygienists may perform all procedures that may be performed by an appropriately trained dental assistant.

d) Dental hygienists shall not perform those procedures that constitute the practice of dentistry as described in the Act. Hygienists may not perform procedures that require the professional judgment and skill of a dentist. Such prohibited procedures include, but shall not be limited to, the following:

- 1) Making denture adjustments.
- 2) Placing and finishing composite restorations.
- 3) Taking final impressions for the fabrication of prosthetic appliances, crowns, bridges, inlays, onlays or other restorative or replacement dentistry.
- 4) Permanently cementing permanent crowns or bridges.
- 5) Permanently re-cementing permanent crowns or bridges that have come loose.
- 6) Inter-oral use of a high-speed hand piece.
- 7) Use of a laser to remove tissue.
- 8) Placement or removal of implant prosthetic components and prostheses, including but not limited to the placement or removal of healing abutments, implant supported provisionals, components used in final impression procedures, and final prostheses, which include abutment, crowns, fixed and fixed detachable prostheses and fixed detachable prostheses during recare appointments.

e) Dental hygienists may administer and monitor nitrous oxide under the following conditions:

- 1) The dental hygienist functions under the supervision of the dentist who must remain in the facility;
- 2) The dental hygienist may administer (start the flow of) nitrous oxide to the patient and control the induction of the gas, so that the patient is at a level of analgesia not anesthesia;
- 3) The dental hygienist may remove the patient from nitrous oxide when the hygiene procedures have been completed;
- 4) Proof of Completion
 - A) The dental hygienist is responsible for obtaining proof of certification, validating completion of a 12 hour course relative to nitrous oxide analgesia and submitting

certification to the dentist of valid completion of the required course. The course shall have been completed no earlier than December 31, 1994.

B) A dental hygienist who completed the 12 hour course shall complete an additional 2 hour course in nitrous oxide analgesia administration. The course shall be completed by September 30, 2011. A dental hygienist who has not completed the 12 hour course shall complete an approved course of 14 hours relative to the administration and monitoring of nitrous oxide analgesia and submit certification of successful completion to the dentist. The course shall have been completed no earlier than January 1, 1998.

C) An individual who graduated from an approved dental hygiene program after January 1, 1998 that contained nitrous oxide analgesia administration and monitoring in the curriculum shall not be required to complete the 14 hour course upon proof to the dentist of the required curriculum.

D) A dental hygienist who has not completed the 12 or 14 hour course shall complete an approved 6 hour course relative to the administration and monitoring of nitrous oxide analgesia and submit certification of successful completion to the dentist.

E) Proof of nitrous oxide analgesia education shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental hygiene program approved by the Division pursuant to Section 1220.250;

5) The dental hygienist must maintain BLS certification or its equivalent, which will be in addition to the required courses. Certification or its equivalent shall be completed by September 30, 2011.

f) Dental hygienists may assist in the provision of moderate sedation (conscious sedation), deep sedation, and general anesthesia, as defined in Section 1220.500, under the following conditions:

1) The dental hygienist functions under the supervision of the dentist who must remain in the facility. When the hygienist is the treatment provider while the patient is under moderate sedation (conscious sedation), deep sedation, or general anesthesia, the anesthesia permit holder must remain in the treatment room;

2) The dental hygienist is responsible for obtaining proof of certification validating completion of a course or courses totaling 12 hours or more, including 6 hours of didactic education and 6 hours of clinical training. The didactic education may be completed online, and online instruction may be used to guide the hands-on clinical training.

A) The didactic course work shall include the areas of anatomy, physiology, pharmacology, monitoring, including nitrous oxide monitoring, and emergency procedures with an emphasis on airway management.

B) The clinical components may be conducted by the CE sponsor approved pursuant to Section 1220.440, a dental hygiene program approved by the Division pursuant to Section 1220.250 or a licensed dentist having a permit A or B who employs the dental hygienist.

i) The courses described in this subsection (f)(2)(B) must be approved by the Division prior to initial offering. Dental hygienists who completed a 12 hour course that met course requirements in place for monitoring sedation prior to adoption of the current rules will not be required to recertify. Proof shall be provided to the Division upon request.

ii) If the clinical training is delivered by the supervising dentist, that dentist must attest, in writing, to the CE sponsor that the training has been completed. This attestation must be received by the CE sponsor in order for the sponsor to issue a certification of course completion. The supervising dentist must attest that the dental hygienist has been thoroughly trained and has demonstrated in-office proficiency in the skills required by this subsection (f)(2)(B)(ii). The dentist's attestation, signed by both the dentist and the dental hygienist, shall be maintained by the dentist. The copy sent to the CE sponsor shall be maintained by that sponsor as part of the official course record.

iii) The clinical component must include practical training on airway management. Other skills that must be demonstrated include manual blood pressure and pulse determination, operation of supplemental oxygen equipment, monitoring operations, including EKG, pulse oximeter and capnograph, and completion of the anesthesia record.

3) If the dental hygienist has complied with the provisions set forth in subsection (e)(4), the dental hygienist may complete an additional course or courses totaling 6 hours or more on advanced airway management and monitoring equipment in lieu of the 12 hour course required by subsection (f)(2). The course must comply with the elements set forth in subsection (f)(2), other than coursework related only to administration and monitoring of nitrous oxide. The courses described in this subsection (f)(3) must be approved by the Division prior to their initial offering. Proof of course completion shall be made available to the Division upon request;

4) The dental hygienist must maintain BLS certification or its equivalent, which will be in addition to the required courses.

g) Dental hygienists may administer local anesthetics under the following conditions:

1) The dental hygienist functions under the supervision of the dentist who remains in the facility.

2) The dental hygienist is responsible for obtaining proof of certification, indicating successful completion of a 32 hour course that contains 24 hours of lecture and 8 hours of clinical training relative to the administration of local anesthetics and submitting certification to the dentist. An individual who graduated from an approved dental hygiene program after January 1, 1999 that contained administration of local anesthetics in the curriculum shall not be required to complete the 32 hour course upon proof to the dentist of the required curriculum. Proof of completion of education shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved pursuant to Section 1220.440 or a dental or a dental hygiene program approved by the Division pursuant to Section 1220.250. The course shall contain at a minimum the following topics:

- A) Patient preevaluation, which includes dental and medical health history (e.g., drug interactions/anxiety/pain and a physical evaluation);
- B) Pharmacology (e.g., drugs/types, vasoconstrictors, dosages, toxicity);
- C) Recordkeeping;
- D) Anatomy/Neuroanatomy/Physiology;
- E) Armamentarium;
- F) Techniques that include adjunctive use of topical anesthetics, mandibular block and infiltration;
- G) Complications;
- H) Post-operative instructions; and
- I) Clinical experience that includes combining techniques for quadrant anesthesia and practical use of different techniques in all areas of oral cavity.

3) A dental hygienist who was licensed in another state and was authorized to administer local anesthesia in that jurisdiction will not be required to complete an additional course. Proof shall be submitted to the dentist and shall be made available to the Division upon request.

h) Dental hygienists may place, carve and finish amalgam restorations under the following conditions:

1) The dental hygienist functions under the direct supervision of a dentist who remains in the facility and examines the work done by the hygienist prior to the dismissal of the patient.

2) The dental hygienist is responsible for obtaining proof of certification, indicating successful completion of a 40-hour course, pre-approved by the Board, that contains lecture, laboratory and manikin training relative to the placing, carving and finishing of amalgam restorations and submitting certification to the dentist. Proof of completion of education shall be made available to the Division upon request. The required hours shall include both didactic and clinical components and be given by a continuing education sponsor approved by the Division and taught in an institution that is CODA approved, such as a dental school, hygiene program or assistant program. The course shall contain, at a minimum, the following preclinical, didactic and clinical instruction:

- A) nomenclature;
- B) caries classification;
- C) oral anatomy;
- D) dental morphology;
- E) periodontium;
- F) histology;
- G) basic occlusion;
- H) ergonomics;
- I) instrumentation;
- J) pulp protection liners and bases;
- K) dental materials;
- L) the medical history conditions and their implication for dental treatment and office emergencies;
- M) matrix and wedge techniques;
- N) amalgam placement and carving;
- O) polishing amalgams;
- P) rubber dam clamp placement;

- Q) rubber dam placement and removal;
- R) amalgam class I, II, IV and V. Class II cannot involve cusp replacement or pins.

3) Pass a pre-examination on basic dental procedures and techniques, as well as the basic fundamentals of dentistry.

4) Pass DANB's AMP Exam, IS Exam and RF Exam or equivalent exams administered by DANB or DANB's successor organization, or pass another written and clinical exam that is psychometrically sound and approved by the Board.

5) A supervising dentist must attend a required orientation class with the applicant and sign an agreement that he or she will follow the required guidelines regarding supervision and clinical application of specific techniques being taught.

i) The licensed dentist need not be present in the facility for a dental hygienist to perform the procedures set forth in this Section (except for the administration and monitoring of nitrous oxide, minimal sedation, assisting in the provision of moderate sedation (conscious sedation), deep sedation, and general anesthesia, as defined in Section 1220.500, and the administration of injectable local anesthetics, which must be done under the direct supervision of a dentist as outlined in subsection (e)(1)) on persons who reside in a long-term care facility licensed by the State of Illinois or a mental health or developmental disability facility operated by the Department of Human Services hospital or other similar institution and are unable to travel to a dental office because of illness or infirmity. The dentist shall personally examine and diagnose the patient and determine which services are necessary to be performed, which shall be contained in a written order to the hygienist. The order must be implemented within 90 days after its issuance and an updated medical history and oral inspection must be performed by the hygienist immediately prior to beginning the procedures to ensure that the patient's health has not changed in any manner to warrant a re-examination by the dentist.

j) All intraoral procedures performed by a dental hygienist, except those provided for in subsections (b), (h) and (i), must be examined by the supervising dentist prior to the dismissal of the patient from the facility that day.

(Source: Amended at 40 Ill. Reg. 12553, effective September 2, 2016)



Public Health Dental Hygienist

Definitions:

"Public health dental hygienist" means a hygienist who holds a valid license to practice in the State, has 2 years of full-time clinical experience or an equivalent of 4,000 hours of clinical experience and has completed at least 42 clock hours of additional structured courses in dental education in advanced areas specific to public health dentistry.

"Public health setting" means a federally qualified health center; a federal, State, or local public health facility; Head Start; a special supplemental nutrition program for Women, Infants, and Children (WIC) facility; or a certified school-based health center or school-based oral health program.

"Public health supervision" means the supervision of a public health dental hygienist by a licensed dentist who has a written public health supervision agreement with that public health dental hygienist while working in an approved facility or program that allows the public health dental hygienist to treat patients, without a dentist first examining the patient and being present in the facility during treatment, (1) who are eligible for Medicaid or (2) who are uninsured and whose household income is not greater than 200% of the federal poverty level.

(225 ILCS 25/13.5) (Section scheduled to be repealed on January 1, 2026)

Sec. 13.5. Training programs for public health dental hygienists.

(a) With respect to the requirement that a public health dental hygienist have additional structured courses in dental education in advanced areas specific to public health dentistry, education in advanced areas specific to public health dentistry must include emergency procedures for medically compromised patients (5 hours), pharmacology (5 hours), medical recordkeeping procedures (4 hours), geriatric dentistry (5 hours), pediatric dentistry (5 hours), and pathology (5 hours) provided by:

(1) an educational institution accredited by the Commission on Dental Accreditation, such as a dental school or dental hygiene program; or

(2) a statewide dental association or dental hygiene association, approved by the Department to provide continuing education, that has developed and conducted training programs for expanded functions for dental assistants and hygienists.

(b) Training programs for a public health dental hygienist must:

(1) include a minimum 29 hours of didactic study as described in subsection (a), which may be taken in an online structured format and in compliance with the continued learning education requirements of 68 Illinois Administrative Code 1220.440;