

Board of Dentistry Supports Community Dental Health Coordinator Project

By John V. Reitz, D.D.S., Chairman

Shortly after taking over as the new Dean of Temple University's Kornberg School of Dentistry, Dr. Amid Ismail contacted the Pennsylvania State Board of Dentistry concerning the feasibility of using Pennsylvania as a test site for the American Dental Association's Community Dental Health Coordinator (CDHC) pilot program. The program was designed with the goal of increasing access to care in underserved urban and rural communities, and the CDHC position was created to test the feasibility of combining the functions of a community-based dental hygienist or expanded function dental assistant, with the responsibilities of a dental health community organizer.

The CDHC will be trained to screen for oral health problems, develop and implement community-based oral health promotion programs, and perform basic dental functions (under remote supervision of a dentist) in preparation for permanent care by a supervising dentist. The CDHC will also function as an advocate for the underserved community, providing outreach services, and following up with patients having specific oral health problems. To prepare them to function effectively in this complex combination of roles, the pilot program will provide CDHC with extensive, pragmatic training in behavioral sciences, oral health literacy, public health, and community networking.

At its January 30 meeting, the State Board of Dentistry overwhelmingly passed a resolution supporting the pilot program in Pennsylvania, with the following provisions:

- The State Board of Dentistry will have input in the makeup of the Oversight Committee evaluating the program on an ongoing basis.
- A member of the State Board of Dentistry will be part of the Oversight Committee, along with representatives chosen by the Pennsylvania Dental Association, Pennsylvania Academy of General Dentistry, Pennsylvania Dental Hygiene

Association, and Pennsylvania Dental Assistants Association.

- The Community Dental Health Coordinator will be trained as either a Pennsylvania Expanded Function Dental Assistant (EFDA) Certificate holder or Dental Hygiene licensee.
- The pilot program will produce a maximum of 18 trained CDHC's over the five-year implementation period.

Based on receipt of State Board of Dentistry's support, Dr. Ismail has been successful in having ADA funding of the project allocated to the Pennsylvania pilot program, to be conducted under his guidance. The CDHC concept will be initially tested in North Philadelphia.

As with any new venture, there is concern about safety and effectiveness. However, with the proper oversight from the various professional dental associations listed above, it is our sincere hope that this five-year pilot program will make Pennsylvania an innovator in addressing access to care issues for underserved communities – not only in our own state, but also across the nation.

Tooth Whitening in Pennsylvania – The Issues

By Lisa P. Deem, D.M.D., J.D.

The proliferation of tooth whitening centers in areas outside the dental office has raised questions regarding the safety of materials and procedures.

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Mall kiosks and salons offer convenient whitening services – but at what cost to the public?

Whitening procedures performed outside a dental office places the patient at risk for exposure to:

- An environment not adhering to the guidelines of the Centers for Disease Control and Prevention;
- Excessive bleaching material that may cause dentin sensitivity, and damage to teeth and surrounding tissue;
- Improper bleaching light that may cause trauma to adjacent tissue; and
- Adverse reactions to photoreactive drugs.

The State Board of Dentistry has received numerous inquiries regarding its position with regard to tooth whitening products and systems, ranging from the most basic (whether tooth whitening is considered a dental procedure) to more specific (about the efficacy of specific tooth whitening products and systems), as well as which dental personnel may perform tooth whitening services.

In addressing the issues related to tooth whitening, the board has focused on its principal mandate: protection of the public. There are three ways the board can set forth rules to govern the profession, and protect the public: by proposing legislative changes, by adopting regulations, and by promulgating policy statements. Legislative changes and regulations are the most involved and political of these processes. Interpretation of the existing law however can be published as policy statement.

A State Board of Dentistry policy statement on tooth whitening was proposed, and is being reviewed, that will clearly state that “tooth whitening” falls within the definition of the Practice of Dentistry in Pennsylvania as set forth in the Dental Law, and can only be performed by a dentist or under the direct supervision of a licensed dentist.

The Practice of Dentistry is in part defined as the regulation of the physical condition of the teeth. Since bleaching regulates or changes the physical condition of teeth resulting in a change in tooth color, the board has determined the procedure falls within the existing definition. In the statement of policy, the term “tooth whitening” includes any means or method used to whiten or bleach the teeth of another person, or the dispensing of a tooth whitening agent to another person, other than

a product that may be purchased over-the-counter by a consumer for the consumer’s personal use.

As a dental procedure, whitening must be performed in compliance with the Dental Law, regardless of the setting in which it is performed. Dental records for each tooth-whitening patient should be kept, and the appropriate standard of care followed. CDC guidelines for infection control should be followed. A medical history should be recorded, a dental examination performed, and a treatment plan developed prior to tooth whitening.

Risk, options and benefits of tooth whitening should be discussed with the patient, and informed consent obtained and documented in the patient’s dental records. Dates of visits and services performed, or whitening agents dispensed, should be recorded in the patient’s dental records. Dental records of tooth whitening patients should be prepared, maintained and retained in compliance with section 33.209 of the board’s regulations, 49 Pa. Code § 33.209 (relating to preparing, maintaining and retaining patient records), and the Health Insurance Portability and Accountability Act’s Privacy Rule.

After regulatory review is completed, the statement of policy will be published in the Pennsylvania Bulletin.

Stay tuned for information on Botox and dermal fillers. *Does the use of Botox and dermal fillers fall within the definition of the “Practice of Dentistry?”*

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