



Policy and Requirements for Entry onto Advanced Restricted Activities Rosters

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In order to perform specific Advanced Restricted Activities in Alberta, as outlined in the *Dental Hygienists Profession Regulation* (the ‘Regulation’), Registered Dental Hygienists must receive authorization from the College of Registered Dental Hygienists of Alberta (CRDHA; the ‘College’). This policy document identifies the specific Advanced Restricted Activities as outlined in the Regulation. It also provides information on eligibility, education, and application requirements, including information related to each Advanced Restricted Activity, and an overview of the application process. Registrants who are interested in applying for authorization to perform any Advanced Restricted Activity should review this policy and relevant appendices in detail.

Advanced Restricted Activity Rosters

The following is a current list of Advanced Restricted Activities:

- Administer Local Anaesthesia
- Prescribe and Administer Nitrous Oxide/Oxygen Conscious Sedation
- Perform Restorative Procedures of a Permanent Nature
- Perform Orthodontic Procedures
- Prescribe the Schedule 1 Drugs listed in the Dental Hygienists Profession Regulation

Advanced training is required to apply for **authorization** from the CRDHA to perform the above restricted activities and be added to the respective Roster(s).

Legislative References

Section 13(1) and 13(2) of the Regulation authorizes General registrants and Courtesy registrants to perform certain restricted activities in the practice of dental hygiene, after receiving advanced training and applying to the College.

- Administration of local anaesthesia and prescribing of Schedule 1 drugs are considered restricted activities under s.13(1) of the Regulation.
- Prescribing or administering nitrous oxide and collaborating with a dentist to perform orthodontic or restorative procedures, as specifically described in the Regulation, are considered restricted activities under s.13(2) of the Regulation.

Section 14(1) of the Regulation requires that regulated members (i.e., registrants) restrict themselves in performing restricted activities to those activities that they are competent to perform and to those that are appropriate to the registrant’s area of practice and the procedure being performed. Restricted activities must be performed in accordance with the standards of practice approved by the Council, as per Section 14(2).

The relevant components of s.13 and s.14 of the Regulation are provided below for ease of reference. The full Regulation can be accessed via the hyperlink.

[*Dental Hygienists Profession Regulation* \(255/2006\)](#)

Restricted Activities

Authorized activities

13(1) General members and courtesy members are authorized, in the practice of dental hygiene and in accordance with the standards of practice approved by the Council, to perform the following restricted activities:

(a) for the purpose of assessing or treating oral health conditions but not for the purpose of performing restoration procedures of a permanent nature, to cut a body tissue, to administer anything by an invasive procedure on body tissue or to perform surgical or other invasive procedures on body tissue below the dermis or the mucous membrane or in or below the surface of teeth, including scaling of teeth;

(d) to prescribe the following Schedule 1 drugs within the meaning of Schedule 7.1 to 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;*

(e) to compound, provide for selling or sell, incidentally to the practice of dental hygiene, a Schedule 1 drug or Schedule 2 drug within the meaning of Schedule 7.1 to the Government Organization Act;

13(2) A general member or a courtesy member who has provided evidence satisfactory to the Registrar of having completed and remaining current in the advanced training required by the Council and who has received notification from the Registrar that the authorization is indicated on the general register or the courtesy register is authorized to perform the following restricted activities:

- (a) to prescribe or administer nitrous oxide for the purposes of conscious sedation;*
- (b) in collaboration with a dentist, to fit an orthodontic or periodontal appliance for the purpose of determining the preliminary fit of the appliance;*
- (c) in collaboration with a dentist, to perform surgical or other invasive procedures on body tissue below the surface of teeth for the purpose of performing restoration procedures of a permanent nature.*

Restriction

14(1) Despite any authorization to perform restricted activities, regulated members must restrict themselves in performing restricted activities to those activities that they are competent to perform and to those that are appropriate to the member's area of practice and the procedure being performed.

14(2) A regulated member who performs a restricted activity must do so in accordance with the standards of practice adopted by the Council under section 133 of the Act.

*NOTE: "fluoride" has been reclassified as a natural health product. Currently none of the oral care fluoride products require a prescription.

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 of the CRDHA 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 CRDHA which allows a registrant to perform an Advanced Restricted Activity as part of their dental hygiene practice.

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 CRDHA to perform a specific Advanced Restricted Activity as part of their practice of dental hygiene in Alberta.

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

Eligibility and Substantial Equivalency

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

Entry onto any **Roster** is based on a combination of:

- **Appropriate education** related to the performance of the activity; and
- The length of time that has elapsed since an applicant successfully completed their education related to the activity; and
- **Currency**

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**. If currency is not maintained, then the applicant may take a Council-approved refresher course, if applicable.

Programs or courses may be Council-approved¹ or deemed as **substantially equivalent**. If a program or course is neither Council-approved, nor already deemed as substantially equivalent, it must meet approved competencies and must be reviewed by CRDHA for substantial equivalence upon application.

Eligibility criteria and information about substantial equivalency education specific to each Roster is provided in the respective Appendices:

- [Appendix A - Local Anaesthesia](#)
- [Appendix B - Nitrous Oxide/Oxygen Conscious Sedation](#)
- [Appendix C - Restorative](#)
- [Appendix D - Orthodontics](#)
- [Appendix E - Prescribe Schedule 1 Drugs](#)

Application for Entry

Applicants must provide a complete application form and any additional documentation required for entry to any Roster. The information required as part of an application for entry onto an Advanced Restricted Activity Roster may vary depending on the length of time that has lapsed since the applicant completed the relevant CRDHA Council-approved course or an educational course or program that has been deemed to be substantially equivalent. Further information and/or documentation may be requested by CRDHA for entry onto any of the Advanced Restricted Activity Rosters.

A registrant must not perform the Advanced Restricted Activity until they have been notified in writing that their application has been approved and their name has been added to the respective CRDHA Roster of dental hygienists who have been authorized to perform that activity.

Requirements

The following items are required for an application:

- A completed application form for entry onto the CRDHA Roster for the Advanced Restricted Activity.
- Current CPR certification, at the required level and issued within the last 12 months, must be on the registrant's file with the CRDHA.
- Evidence (as specified on the application form) of successful completion of appropriate education (e.g., *official* transcript from dental hygiene program, *notarized* certificate of completion from continuing education course).
- Courses or programs that are not currently on the Council-approved list must be reviewed by the CRDHA for substantial equivalency. Detailed course information (i.e., course outline, schedule, course syllabus, course manual) must accompany the application.
- Evidence of currency in the Advanced Restricted Activity, verifying that the applicant performs the procedures on a regular basis.

¹ Council-approved programs/courses may change as course providers and/or course content changes.
CRDHA Advanced Restricted Activities Policy 2021-05-29

In addition to the above items, applicants must review each relevant appendix for specific timelines related to currency as well as any other required documentation for each Advanced Restricted Activity.

Processing of Applications

Each application for entry onto any Roster will be reviewed on an individual basis. The Registrar or Registration Committee may request additional information in order to verify an applicant's education related to the Advanced Restricted Activity (e.g., detailed course outline, syllabus, workbook, manual, summary of experience). Applicants should check their phone messages and/or email regularly, including junk/spam folders, in the event that further information is required by CRDHA to process the application. **Failure to respond may result in processing delays or cancellation of the application.**

Timeline for Review of Applications

All applications will be initially assessed within **10 business days** of receipt. Applicants will be notified if the application is complete or incomplete. Any items that may be outstanding to complete the application will also be identified.

If an application is complete (i.e., meets *all* of the requirements above), a decision will be provided **within seven (7) to ten (10) working days** of receipt of the application.

For programs or courses that need to be reviewed by the CRDHA for substantial equivalency, once a complete application is received, including required course information, applicants should expect **four (4) to six (6) weeks** for review and decision. The CRDHA staff and/or the volunteer Registration Committee will do the best they can to process applications in an expedient fashion.

If the information provided with the application is incomplete or additional information is required, the process may take longer than four (4) to six (6) weeks.

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

If an Advanced Restricted Activity application is submitted at the same time as a new registration, reinstatement or transfer application, the timelines pertaining to this policy will commence once the latter (i.e., new registration, reinstatement or transfer application) has been processed. The CRDHA will make every reasonable effort to provide both decisions at the same time where possible.

Possible Outcomes for Application Decisions

- If the Registrar or Registration Committee **is satisfied** that the applicant's qualifications and competencies meet the requirements established by Council, the applicant's name **will** be entered on the respective CRDHA Roster and evidence of authorization will be provided.
- If the Registrar or Registration Committee **is satisfied** that the applicant's qualifications and competencies meet the requirements established by Council, **but more than the specified time** (refer to the appropriate appendix for that activity) has elapsed since the applicant completed the equivalent educational course or program and/or performed the activity on a regular basis, the applicant's name **will not** be entered on the CRDHA Roster and the applicant will be required to successfully complete an educational course or program equivalent that meets the required competency criteria prior to re-applying for entry onto the CRDHA Roster.

- If the Registrar or Registration Committee **is not satisfied** that the applicant’s qualifications meet the requirements established by Council, the applicant’s name **will not** be entered on the CRDHA Roster and the applicant will be required to successfully complete an educational course or program equivalent that meets the required competency criteria prior to re-applying for entry onto the CRDHA Roster (a refresher course will not be accepted).
- **An application for entry onto any Roster may be denied or deferred if the applicant is the subject of investigation or discipline related to unprofessional conduct in any jurisdiction.**

Authorization

Once authorized, the registrant must adhere to any established Standard of Practice, Guidelines and/or Policies 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 CRDHA website (www.crdha.ca).

Suspension or Cancellation

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, removing oneself from either of these Registers (e.g., transferring from the General Register to Non-practicing Register) will result in cancellation of any authorizations for Advanced Restricted Activities.**

CRDHA 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@crdha.ca.

In order to allow College staff the time to process your application, please refrain from contacting the College for inquiries on application status if the application is still within the timelines for review indicated above.

Appendix A – Local Anaesthesia

Eligibility and Substantial Equivalency

The CRDHA may accept applications for entry onto the Administration of Local Anaesthesia Roster from CRDHA registrants who have successfully completed one of the following:

- A CRDHA Council-approved local anaesthesia course
- A local anaesthesia course delivered by an accredited dental or dental hygiene educational program.

Local Anaesthesia Courses Currently Deemed CRDHA Council-Approved

The below noted local anaesthesia courses are CRDHA Council-approved and serve as the benchmark courses of study for authorization to perform the restricted activity of administering local anaesthesia in Alberta.

- The University of Alberta Dental Hygiene Program
- The University of Alberta Local Anaesthesia Continuing Education Course for Dental Hygienists

The CRDHA 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.

Local Anaesthesia Courses Currently Deemed Substantially Equivalent

The accredited dental hygiene programs listed below, offering local anaesthesia courses delivered as a component of the program or as a continuing education course, are currently deemed substantially equivalent. This list is periodically reviewed by CRDHA and is subject to change.

Delivered as a component of these accredited dental hygiene programs:	Delivered as a continuing education course by these accredited dental hygiene programs:
<ul style="list-style-type: none"> • Camosun College, Victoria, BC • College of New Caledonia, Prince George, BC • Saskatchewan Polytechnic, Regina, SK (formerly Wascana Institute, SIAST Dental Hygiene Program) • University of British Columbia, Vancouver, BC • University of Manitoba, Winnipeg, MN • Vancouver Community College, Vancouver, BC • Vancouver Island University, Nanaimo, BC 	<ul style="list-style-type: none"> • Camosun College, Victoria, BC • Saskatchewan Polytechnic, Regina, SK (formerly Wascana Institute, SIAST Extension Local Anaesthesia Course) • Saskatchewan Polytechnic, Regina, SK (formerly Wascana Institute, SIAST Extension Local Anaesthesia Review Continuing Education Course) • University of British Columbia Continuing Dental Education Local Anaesthesia Course for Dental Hygienists, Vancouver, BC • University of Manitoba, School of Dental Hygiene, Local Anaesthesia Continuing Education Program

Last updated: 2015

Documentation

In addition to the documentation outlined in the main policy:

If the applicant completed a local anaesthesia course more than 36 months prior to the date of application, the following is required:

- Evidence of currency of practice in the administration of local anaesthesia (e.g., a letter from the applicant's employer(s), redacted copies of charts/documentation, etc.) The evidence must verify that the applicant regularly administered local anaesthesia as part of the practice of dental hygiene.
- *If more than 36 months have elapsed since the applicant last administered local anaesthesia on a regular basis, the applicant must successfully complete the required course prior to being reconsidered for recognition of local anaesthesia credentials:*
 - A. a Council-approved local anaesthesia *refresher course* if the applicant completed their local anaesthesia course **less than 72 months** prior to application;
 - B. a Council-approved local anaesthesia *education course* (*a refresher course will not be accepted*) if the applicant completed their local anaesthesia course **72 months or more** prior to application.

Appendix B – Nitrous Oxide/Oxygen Conscious Sedation

Eligibility and Substantial Equivalency

Nitrous Oxide/Oxygen Conscious Sedation Courses Currently Deemed CRDHA Council-Approved
The below noted nitrous oxide/oxygen conscious sedation course is CRDHA Council-approved and serves as the benchmark course of study for authorization to perform the restricted activity of prescribing or administering nitrous oxide/oxygen conscious sedation in Alberta.

- Nitrous oxide/oxygen conscious sedation course delivered by the University of Alberta, Faculty of Medicine and Dentistry, Continuing Dental Education

The CRDHA 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.

Course Competencies

An educational course designed to produce competency in prescribing and administering nitrous oxide/oxygen conscious sedation will be considered for CRDHA Council-approval 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 sedation 3. Client evaluation and selection 4. Pharmacology of nitrous oxide 5. Function of the basic components of the inhalation sedation equipment 6. Monitoring of vital signs (before, during and after treatment) 	<ol style="list-style-type: none"> 1. Client evaluation 2. Set up and operation of the inhalation and monitoring equipment 3. 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; and 1.2. Three (3) hours of on-site clinical experience with clients 2. 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, or 3.2. An accredited dental hygiene program 4. 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. 	

Course providers must issue evidence of successful completion of the nitrous oxide/oxygen conscious sedation course (e.g., transcript from dental hygiene program, certificate of completion from continuing education course). A dental hygienist will only be considered a graduate of a nitrous oxide/oxygen conscious sedation program education upon successful completion of both the theoretical and clinical aspects of the program.

Documentation

In addition to the documentation outlined in the main policy:

If the applicant completed a nitrous oxide/oxygen conscious sedation course more than 36 months prior to the date of application, the following is required:

- Evidence of currency in prescribing and administering nitrous oxide/oxygen conscious sedation (e.g., a letter from the applicant's employer(s), redacted copies of charts/documentation, etc.) The evidence must verify that the applicant regularly performed these procedures as part of the practice of dental hygiene.
- *If more than 36 months have elapsed since the applicant last prescribed and administered nitrous oxide/oxygen conscious sedation on a regular basis, the applicant will be required to successfully complete a Council-approved nitrous oxide/oxygen conscious sedation course prior to re-applying for entry onto the CRDHA Roster (a refresher course will not be accepted).*

Appendix C – Restorative

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.

Eligibility and Substantial Equivalency

Restorative Courses Currently Deemed CRDHA Council-Approved

The below noted restorative courses are currently CRDHA Council-approved for authorization to perform the restricted activity of orthodontic procedures in Alberta.

Delivered as a component of these accredited dental hygiene programs:	Date of approval
<ul style="list-style-type: none"> • Cégep de Chicoutimi • Cégep François-Xavier Garneau • Collège de L’Outaouais • Collège Édouard-Montpetit • Collège Maisonneuve • Dalhousie University, School of DH (up to May 2010) • John Abbott College • University of Manitoba, School of DH (up to May 1999) 	<p>April 29, 2008</p> <p>April 29, 2008</p> <p>April 29, 2008</p>
Delivered as a continuing education course by these accredited dental hygiene programs:	Date of approval
<ul style="list-style-type: none"> • Algonquin College, Restorative Dental Hygiene Program (post-diploma) • George Brown College, Restorative Dental Hygiene Program (post-diploma) • University of Manitoba, Restorative Dental Hygiene Program (post-diploma) 	<p>April 29, 2008</p> <p>April 29, 2008</p> <p>June 16, 2003</p>

The CRDHA will assess the qualifications and competencies of graduates of any other restorative programs. To determine substantial equivalence of restorative training acquired through another restorative program, practical evaluations, theoretical evaluations, and clinical upgrades may be required.

Course Competencies

An educational course designed to produce competency in the performance of restorative procedures of a permanent nature will be considered for CRDHA Council-approval if it meets the following criteria:

Theoretical course content must include:	Pre-clinical and clinical course content must include:
<ol style="list-style-type: none"> 1. Science of dental materials 2. Histology and embryology 3. Dental anatomy 4. Functional occlusion 5. Black’s classification 6. Health and safety 7. Management of records 	<ol style="list-style-type: none"> 1. Moisture control and isolation techniques 2. Placement of pulp protection (e.g. liners, bases) 3. Placement and removal of matrices and wedges 4. Bonding Materials 5. Amalgam Restorations (Class I, II, and V) 6. Composite Restorations (Class I, II, III, IV, and V) 7. Placement of temporary restorations/sedative dressings 8. Placement of gingival retraction cord 9. Placement, finishing and polishing of restorations

	10. Periodontal response to restorations 11. Infection control procedures 12. 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, or 2.2. 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: <ol style="list-style-type: none"> 2.2.1. Organized and taught by oral health practitioners who are registered/licensed³ 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. 	

Course providers must issue evidence of successful completion of the restorative course (e.g., transcript from dental hygiene program, certificate of completion from continuing education.) A dental hygienist will only be considered a graduate of a restorative program education upon successful completion of both the theoretical and clinical aspects of the program.

Documentation

In addition to the documentation outlined in the main policy:

If the applicant completed a restorative course more than 36 months prior to the date of application the following is required:

- Evidence of currency of practice in performance of restorative procedures (e.g., a letter from the applicant's employer(s), redacted copies of charts/documentation, etc.) The evidence must verify that the applicant regularly performed restorative procedures as part of the practice of dental hygiene.
- *If more than 36 months have elapsed since the applicant last performed restorative procedures on a regular basis, the applicant must successfully complete the required course prior to being reconsidered for recognition of restorative credentials;*
 - A. a Council-approved dental hygiene restorative *refresher course* if the applicant completed their restorative course **less than 72 months** prior to application.
 - B. a Council-approved dental hygiene restorative *education course* (a *refresher course* will not be accepted) if the applicant completed their restorative course **72 months or more** prior to application.

Appendix D – Orthodontics

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).

Orthodontic Procedures

Below is a list of orthodontic procedures requiring Council-approved orthodontic training and CRDHA 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

Eligibility and Substantial Equivalency

Orthodontic Courses Currently Deemed CRDHA Council-Approved

The Alberta Orthodontic Module was previously owned jointly by the ADA+C, the CRDHA and the College of Alberta Dental Assistants (CADA). This module, which was CRDHA Council-approved, no longer exists, therefore, there are currently no CRDHA Council-approved orthodontic programs or courses of study for authorization to perform the restricted activity of orthodontic procedures in Alberta.

The CRDHA will assess the qualifications and competencies of graduates of all orthodontic programs to the Course Competencies outlined below. To determine substantial equivalence of orthodontic training acquired through an orthodontic program, practical evaluations, theoretical evaluations, and clinical upgrades may be required.

Orthodontic Courses Currently Deemed Substantially Equivalent

Orthodontic courses delivered as continuing education courses by the following accredited educational institutions were considered substantially equivalent to the Alberta Orthodontic Module and remain as substantially equivalent at this time:

- Columbia College Dental Assisting Program, AB, Alberta Orthodontic Module
- Southern Alberta Institute of Technology (SAIT), Continuing Education Dept., Alberta Orthodontic Module
- Saskatchewan Polytechnic, Regina, SK (formerly SIAST, Wascana Campus), Orthodontics for Allied Oral Health Personnel (RDH's and CDA's)
- University of Alberta Continuing Dental Education Dept., Alberta Orthodontic Module
- University of British Columbia Continuing Dental Education Dept., Orthodontic Module for Certified Dental Assistants and Registered Dental Hygienists
- University of Western Ontario, Schulich Division, Continuing Dental Education Dept. (2007, 2008 only)

Course Competencies

An educational course designed to produce competency in the performance of orthodontic procedures will be considered a CRDHA Council-approved program if it meets the following criteria:

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 	<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

<ul style="list-style-type: none"> 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: <ul 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: <ul 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: <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 	<ul style="list-style-type: none"> 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: <ul 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
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Additional Requirements

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:
 - 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., CRDHA, 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.

Course providers must issue evidence of successful completion of the orthodontic course (e.g., transcript from dental hygiene program, certificate of completion from continuing education course). A dental

hygienist will only be considered a graduate of an orthodontic program education upon successful completion of both the theoretical and clinical aspects of the program.

Documentation

In addition to the documentation outlined in the main policy:

If the applicant completed an orthodontics course more than 36 months prior to the date of application the following is required:

- Evidence of currency of practice in performance of orthodontic procedures (e.g., a letter from the applicant's employer(s), redacted copies of charts/documentation, etc.) The evidence must verify that the applicant regularly performed orthodontic procedures as part of the practice of dental hygiene.
- *If more than 36 months have elapsed since the applicant last performed orthodontic procedures on a regular basis*, the applicant must successfully complete the required course prior to being reconsidered for recognition of orthodontic credentials;
 - A. a Council-approved dental hygiene orthodontics *refresher course* if the applicant completed their orthodontics course **less than 72 months** prior to application.
 - B. a Council-approved dental hygiene orthodontics *education course* (*a refresher course will not be accepted*) if the applicant completed their orthodontics course **72 months or more** prior to application.

Appendix E – Prescribe Schedule 1 Drugs

Eligibility

The CRDHA may accept applications for entry onto the Schedule 1 Drugs Prescriber’s Roster from CRDHA registrants who have successfully completed a prescribing educational course or program that meets the criteria set out in the CRDHA *Competencies Required for Registered Dental Hygienists Prescribing Schedule 1 Drugs* (below).

Prescribers Courses Currently Deemed CRDHA Council-Approved

The CRDHA *Elements of Prescribing: A Pharmacy Refresher* course originally developed by the CRDHA 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 below noted prescribers courses are CRDHA Council-approved for authorization to perform the restricted activity of prescribing Schedule 1 drugs in Alberta.

- CRDHA Elements of Prescribing: A Pharmacy Refresher
 - Originally delivered by CRDHA
 - As of 2021, delivered by University of Alberta, Continuing Dental Education Department
- The University of Alberta Dental Hygiene Program

Competencies Required for Registered Dental Hygienists Prescribing Schedule 1 Drugs

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;*

will be considered a CRDHA Council-approved course 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. 	<ol style="list-style-type: none"> 1. Client evaluation and oral condition management decision making 2. Clear and accurate written and verbal communication 3. Issue Prescriptions 4. Proper Documentation

<p>4. Issue prescriptions which are accurate and complete by incorporating the principles of prescribing drugs in the management of dental hygiene treatment and diagnosis.</p> <p>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.</p>	
Additional Requirements:	
<p>1. The course content or content covered in the Dental Hygiene program contains a minimum of:</p> <p>1.1. Didactic instruction; and</p> <p>1.2. 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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>5. The course includes all of the competency requirements in the table below:</p>	

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 CRDHA 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 CRDHA standards of practice to facilitate successful dental hygiene interventions (e.g. CRDHA standards include the Practice Standards Document, the Code of Ethics, etc.).

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Course providers must issue evidence of successful completion of the prescribers course (e.g., transcript from dental hygiene program, certificate of completion from continuing education course). A dental hygienist will only be considered a graduate of a prescribers program education upon successful completion of both the theoretical and clinical aspects of the program.

Documentation

In addition to the documentation outlined in the main policy:

If the applicant completed a prescribing educational course or program more than 12 months prior to the date of application, the following is also required:

- Evidence of currency in prescribing the Schedule 1 Drugs listed in the Dental Hygienists Profession Regulation, (e.g., a letter from the applicant’s employer(s), redacted copies of charts/documentation, etc.) The evidence must verify that the applicant regularly prescribed Schedule 1 Drugs as part of the practice of dental hygiene.
- **If evidence of currency cannot be provided or is deemed unacceptable, and more than 12 months have elapsed since the applicant completed the equivalent educational course or program, the applicant will be required to successfully complete a prescribing educational course or program equivalent that meets the required competency criteria prior to re-applying for entry onto the CRDHA Roster.**