

# DENTAL ASSISTANT SPECIALTY

## Clinical Skills-Preventive Dentistry



## Volume 4

**381st Training Squadron  
2931 Harney Road  
Fort Sam Houston, TX 78234**

**QTP 4Y0X1-4**

**DENTAL ASSISTANT SPECIALTY**

*Volume 4: Clinical Skills- Preventive Dentistry*

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# INTRODUCTION

1. Volume 4, *Clinical Skills-Preventive Dentistry*, Qualification Training Package (QTP) contains modules on clinical phase/fundamentals, oral health care instructions, periodontal instruments, using, ultrasonic devices, sharpening periodontal instruments, removing accumulated deposits, applying topical anticariogenic agents and applying pit and fissure sealants. This QTP enhances the 5-skill level on-the-job training (OJT) for a dental assistant journeyman. Trainers and trainees may use the training references listed in each module to compliment training. Trainees, trainers, supervisors, and task certifiers must use all QTPs to conduct upgrade training. Before initiating any training, review your responsibilities as a supervisor/trainer for conducting OJT per AFI 36-2201, Chapter 6, *Air Force Training Program On-The-Job Training Administration*.

2. QTPs are instructional packages designed to help you conduct and evaluate your field training. Once you begin upgrade training, you are required to use the QTPs. QTPs provide continuity to the trainee's upgrade training and are divided into the following volumes: 1) *Basic Skills and Infection Control*; 2) *Clinical Skills-Radiology*; 3) *Clinical Skills-Chairside Assisting*; 4) *Clinical Skills-Preventive Dentistry*; 5) *Patient Administration*, 6) *Logistics Management* and 7) *Budget and Financial Planning*. Developers designed the QTP modules to assist you in preparing for and conducting training. Each module segments the major tasks into teachable elements. Your goal is to provide enough training and guidance so trainees can do all task related steps, without assistance. QTPs also aid OJT task certifiers in evaluating the trainee's demonstrated performance. If you have local training requirements not covered by a QTP module you *should* develop "steps in performance" and "performance checklists" supporting and standardizing those tasks. When you are satisfied the trainee meets standards, as prescribed in the QTP performance checklist, you must document each task completion in the QTP tab. If you are recertifying on a task supported by a QTP, you must use the appropriate module to complete the recertification process.

3. Typically, you will manage each module by training the tasks and then, evaluating performance. Your local steps in performance may vary from the method listed in the QTP module. If this is the case, you may make changes to the first half of each module, (i.e. steps in task performance); however, the "performance checklist" is considered a *standard* and cannot be altered. You may train each QTP volume/module in any sequence; however, when conducting training, use an organized and methodical approach. This organized and methodical approach will reduce your training time and enhance your efforts.

4. The QTPs are tools for assessing/certifying the Dental Assistant initially and each time they arrive at a new duty station. Trainees, trainers, supervisors, and task certifiers must use the QTP as a tool for standardizing annual refresher training. Our goal has been to publish a useable document for both the trainee and trainer. We value your first hand expertise and solicit your feedback on how we can improve our product. Direct all inquiries to:

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## **MODULE 1: CLINICAL PHASE/FUNDAMENTALS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Identify the Presence of Calculus

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies , identify the presence of calculus IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.2 Identify the presence of calculus

**EQUIPMENT REQUIRED:**

1. Computer with digital imaging software (e.g., MiPACS)
2. Dental radiographs (e.g., bitewings, panoramic)
3. Dental health record or electronic health record (EHR) equivalent

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 4, *Dental Assistant Journeyman*

**PERFORMANCE CHECKLIST TASK: Identify the Presence of Calculus**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee's abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee's performance using this checklist.
5. Once completed, the supervisor must certify performance in the member's AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

<b>Step-by-step procedures</b>	<b>GO</b>	<b>NO GO</b>	<b>NOTES</b>
1. Turn on computer			
2. Launch/log-in MiPACs Dental Enterprise Viewer			
3. View most current radiographs via MiPACs			
4. Inspect maxillary and mandibular anatomy by tooth, from left to right			
5. Identify light protrusions (spurs) at neck of tooth			
6. Annotate location of calculus deposits on patient treatment narrative			
7. Logout MiPACs program			
8. Turn computer off			
<b>FINAL RESULT</b>			

## **MODULE 1: CLINICAL PHASE/FUNDAMENTALS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Perform Screening Examinations and Refer Patients as Needed

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, perform screening examinations IAW the performance checklist.

#### **CFETP/STS REFERENCES:**

10.3 Perform screening examinations and refer patients as needed

#### **EQUIPMENT REQUIRED:**

1. Basic Diagnostic Set-up (BDS) instruments (e.g., mirror, explorer/probe, cotton forceps [optional])
2. Dental health record or electronic health record (EHR) equivalent
3. Pen (black or blue ink) and pencil
4. Personal protective equipment (PPE)

#### **TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Perform Screening Examinations and Refer Patients as Needed**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee’s performance using this checklist.
5. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
1. Confirm patient identification and seat patient			
2. Review patient’s dental/medical history (e.g., AF Form 696)			
3. Discuss positive health entries with patient (if any), refer changes to dentist			
4. Initial and date health history form			
5. Drape patient and provide glasses			
6. Recline the patient chair and position treatment light to illuminate patient’s oral cavity			
7. Perform extraoral examination: visual observation of the face, head and neck; palpate TMJ, lymph nodes, and salivary glands of the neck and face			
8. Intraoral examination: using a dental mirror, examine the soft and hard tissues of intraoral cavity to include the following: lip borders, tongue, interior cheek, floor, palate, tonsillar region, throat, alveolar ridge, gingiva, teeth and proximal areas			
9. Document any color or size changes, bleeding, swelling, cracks, abscesses, etc.			
10. Consult dentist for any abnormal or suspicious findings			
<b>FINAL RESULT</b>			

## **MODULE 1: CLINICAL PHASE/FUNDAMENTALS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Identify and Record Oral Health

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, identify and record patient's oral health IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.4 Identify and record oral health status

**EQUIPMENT REQUIRED:**

1. Dental forms (e.g., AF Form 603/603a, AF Form 696)
2. Dental health record or electronic health record (EHR) equivalent
3. Pen (black or blue ink) and pencil

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 4, *Dental Assistant Journeyman*
3. USAF Guidelines for Infection Prevention & Control in Dentistry



**PERFORMANCE CHECKLIST TASK: Identify and Record Oral Health**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee’s performance using this checklist.
5. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Task to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4).			
1. Upon observation in oral mucosa, take note of oral health			
2. Observe any abnormalities			
3. Consult with dentist on abnormal findings or questionable areas within the mucosa			
4. Record observations in dental health record			
5. Use descriptive details when annotating dental health record (or EHR equivalent) such as: location, color, size (usually in mm), shape, and any history patient can provide on finding/s			
6. Record finding/s, and any homecare instructions or follow-up procedures relayed to patient			
<b>FINAL RESULT</b>			

## **MODULE 2: ORAL HEALTH CARE INSTRUCTIONS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Instruct Patient on Oral Hygiene Techniques and Devices

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, instruct a patient on oral hygiene techniques and devices IAW the performance checklist.

#### **CFETP/STS REFERENCES:**

10.5.4 Instruct a patient on oral hygiene techniques and devices

#### **EQUIPMENT REQUIRED:**

1. Dental health record or electronic health record (EHR) equivalent
2. Disclosing agent with manufacturer's IFU
3. Oral hygiene devices (e.g., toothbrush, mouthwash, floss, floss threader)
4. Hand mirror
5. Personal protective equipment (PPE)

#### **TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Instruct Patient on Oral Hygiene Techniques and Devices**  
**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee's abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer's Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee's performance using this checklist.
6. Once completed, the supervisor must certify performance in the member's AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Task to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4). Review disclosing agent IFU and oral hygiene techniques prior to use/demonstration on patient.			
1. Prepare and apply disclosing agent IAW manufacturer's IFU			
2. Instruct patient to examine teeth a using hand mirror			
3. Explain the etiology, progression and treatment of gingivitis and periodontal disease			
4. Emphasize the importance of improved oral hygiene through home care			
5. Discuss how diet and nutrition affect oral health			
6. Brief patient on proper oral health hygiene based on patient's needs (e.g., visual inspection, questions)			
7. Emphasize importance of home care over dental clinic care			
8. Demonstrate proper brushing techniques			
9. Observe patient performance and recommend improvements			
10. Demonstrate proper flossing techniques			
11. Observe patient performance and recommend improvements			
12. Demonstrate home care techniques using additional oral hygiene devices, if warranted (e.g., floss threader)			
13. Observe patient performance and recommend improvements			
14. Discuss/demonstrate proper care of dental prosthesis (if applicable)			
15. Re-emphasize areas of needed improvement			
16. Allow opportunity for patient questions and review of instructions			
<b>FINAL RESULT</b>			

## **MODULE 2: ORAL HEALTH CARE INSTRUCTIONS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Instruct Patient on Care of Dental Implants

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, instruct a patient on care of dental implants IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.5.6 Instruct patient on care of dental implants

**EQUIPMENT REQUIRED:**

1. Dental health record or electronic health record (EHR) equivalent
2. Dental care of implants documentation (as available)
3. Oral hygiene devices (as available)
4. Hand mirror
5. Personal protective equipment (PPE)

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Instruct Patient on Care of Dental Implants**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee’s performance using this checklist.
5. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Task to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4). Review and follow available dental care of implant documentation prior to start of procedure.			
1. Explain importance of home care for implants			
2. Explain progression of periodontal disease			
3. Emphasize similarities of natural teeth and implants			
4. Demonstrate home care techniques using required devices			
5. Instruct patient to remove plaque at least once daily			
6. Observe patient performance, recommend improvements			
7. Emphasize importance of home care over clinical care			
8. Emphasize use of dentifrice and other dental hygiene aids (e.g., floss, rubber tip and/or interdental brushes)			
9. Re-emphasize areas of needed improvement			
10. Provide patient with appropriate home care items			
11. Allow opportunity for patient questions and review of instructions			
<b>FINAL RESULT</b>			

## **MODULE 3: PERIODONTAL INSTRUMENTS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Use Hand Instruments

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies , use hand instruments to remove calculus deposits IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.6.1 Use hand instruments

**EQUIPMENT REQUIRED:**

1. Prophy kit (e.g., scalers/currettes, dental mirror)
2. Personal protective equipment (PPE)

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Use Hand Instruments**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee's abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee's performance using this checklist.
5. Once completed, the supervisor must certify performance in the member's AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
1. Perform hand hygiene and don PPE			
2. Position patient in treatment position and position treatment light to illuminate the patient's oral cavity			
<b>Instrumentation Technique:</b>			
3. Select correct tooth			
4. Select instrument appropriate for use based on tooth location (e.g., anterior/posterior/sickle/curette)			
5. Select correct working end of instrument			
6. Use modified pen grasp			
7. Adapt blade to tooth throughout scaling procedure			
8. Use proper angulation 1) 60-80 degrees for scaling 2) 0-40 degrees for insertion			
9. Use proper wrist motion activation			
10. Use appropriate stroke (assessment/calculus removal)			
11. Use proper stroke direction (e.g., vertical, oblique, horizontal)			
12. Cover all line angles			
13. Continue strokes at least halfway across interproximal surfaces			
<b>FINAL RESULT</b>			

## **MODULE 3: PERIODONTAL INSTRUMENTS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Use Exploratory Instruments

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, perform exploratory techniques IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.6.2 Use exploratory instruments

**EQUIPMENT REQUIRED:**

1. Dental mirror
2. Dental explorer/probe
3. Personal protective equipment (PPE)

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. USAF Guidelines for Infection Prevention & Control in Dentistry



**PERFORMANCE CHECKLIST TASK: Use Exploratory Instruments**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee’s performance using this checklist.
5. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
1. Perform hand hygiene and don PPE			
2. Position patient in treatment position and position treatment light to illuminate the patient’s oral cavity			
3. Using a dental mirror and explorer, measure patient oral hygiene status using an appropriate index			
4. Notice any color or size changes, bleeding, swelling, cracks, abscesses, etc.			
5. Determine and record the oral hygiene index or other local indices, as authorized/required			
6. Consult with dentist for any abnormal or suspicious finding/s			
7. Continue with scheduled treatment (unless contraindicated)			
<b>FINAL RESULT</b>			

## **MODULE 4: USE ULTRASONIC DEVICES**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Use Ultrasonic Devices

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, perform ultrasonic scaling IAW the performance checklist.

**CFETP/STS REFERENCES:**

5.3 Perform hand hygiene

**EQUIPMENT REQUIRED:**

1. Personal protective equipment (PPE)
2. Saliva ejector
3. Ultrasonic unit/motor with manufacturer's IFU
4. Ultrasonic handpiece insert/tip

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volume 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Use Ultrasonic Devices**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer’s Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee’s performance using this checklist.
6. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Review ultrasonic device manufacturer’s IFU prior to use.			
1. Perform hand hygiene and don PPE			
2. Turn ultrasonic unit master switch on IAW manufacturer’s IFU			
3. Perform operational and safety checks IAW ultrasonic unit’s IFU			
4. Purge waterlines			
5. Insert ultrasonic tip ensuring lubrication of “O” ring (applicable only to ultrasonic inserts; sonic inserts screw into handpiece and doesn’t require lubrication)			
6. Flush water through tip			
7. Adjust water and power settings until fine mist burst from tip (halo effect)			
8. Drape patient and provide eye protection			
9. Position patient for treatment procedure and position treatment light to illuminate patient’s oral cavity			
10. Perform oral screening using radiographs as needed			
11. Identify areas of plaque/calculus accumulation			
12. IMPORTANT: If subgingival calculus is located beyond 3-4 mm, consult dentist			
13. Bend saliva ejector tip and place saliva ejector under patient’s tongue			
14. Grasp ultrasonic handpiece with modified pen grasp			
15. Establish stable finger rest/fulcrum			
16. Insert side of instrument with working end toward gingival margin			

17. Position the handpiece at a 10-15 degree angle to tooth angulation			
18. Move instrument with smooth, light, continual, controlled strokes			
19. Adapt working end to the deposit			
20. Ensure insert tip's working end is not held perpendicular to tooth surface			
21. Pass side of instrument working end over deposit using short light strokes			
22. Maintain constant motion of instrument's working end to avoid patient discomfort			
23. Inspect tooth surface to verify calculus removal			
24. Repeat ultrasonic/sonic scaling until deposits are removed (as much as possible, remove calculus in one piece)			
25. Irrigate and aspirate as needed			
26. Apply fluoride/varnish if prescribed by dentist			
27. Remove saliva ejector			
<b>FINAL RESULT</b>			

## **MODULE 5: SHARPEN PERIODONTAL INSTRUMENTS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Sharpen Periodontal Scaling Instruments

**OBJECTIVE:** Provided all necessary equipment and supplies, sharpen periodontal scaling instruments IAW the performance checklist.

#### **CFETP/STS REFERENCES:**

10.8 Sharpen periodontal scaling instruments

#### **EQUIPMENT REQUIRED:**

1. Dental light
2. Lubricating oil or water as needed
3. Personal protective equipment (PPE)
4. Plastic test stick
5. Scaling instrument (sickle or curette)
6. Stone

#### **TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y0510 Volumes 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Sharpen Periodontal Scaling Instruments**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer’s Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee’s performance using this checklist.
6. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
1. Secure stable working area with adequate lighting			
2. Don PPE			
3. Determine instrument design characteristics: 1) Sickle 2) Curette			
4. Hold instrument in non-dominant hand using palm grasp			
5. Support instrument arm on countertop			
6. Establish proper angulation between stone and face of instrument 1) 3-minutes before 12 o’clock position (left-handed technician) 2) 3-minutes after 12 o’clock position (right-handed clinician) 3) Positioned stone at 2 o’clock (to round toe of curette)			
7. Begin stroke of heel of cutting edge and ended at the tip/toe-third			
8. Use a rhythmic up and down motion with even strokes			
9. Finish with a downward stroke to prevent a wire edge			
10. Sharpen both cutting edges of the instrument			
11. Preserve the original design of the instrument characteristics: 1) Sickle scaler (pointed tip) 2) Curette (rounded toe)			
<b>FINAL RESULT</b>			

## **MODULE 6: REMOVE ACCUMULATED DEPOSITS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Remove Accumulated Supragingival Deposits

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, remove accumulated supragingival deposits IAW the performance checklist.

**CFETP/STS REFERENCES:**

- 10.9 Remove accumulated deposits
- 10.9.1 Supragingival

**EQUIPMENT REQUIRED:**

1. Computer with digital imaging software (e.g., MiPACs)
2. Dental radiograph
3. Explorer/probe
4. Mirror
5. Scaler
6. Personal protective equipment (PPE)

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volumes 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Remove Accumulated (Supragingival) Deposits**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee’s performance using this checklist.
5. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Task to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4).			
1. Identify supragingival area of dentition			
2. Demonstrate understanding of where subgingival area begins (3-4 mm under gumline)			
3. Identify areas of plaque/calculus accumulation			
4. <b>IMPORTANT:</b> If subgingival calculus is located beyond 3-4 mm, consult dentist			
<b>FINAL RESULT</b>			



## **MODULE 6: REMOVE ACCUMULATED DEPOSITS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Remove Accumulated Deposits on an Implanted Prosthesis

**OBJECTIVE:** Given a patient and all necessary equipment and supplies, remove accumulated deposits on an implanted prosthesis IAW the performance checklist.

#### **CFETP/STS REFERENCES:**

- 10.9 Remove accumulated deposits
- 10.9.3 Implanted prosthesis

#### **EQUIPMENT REQUIRED:**

1. Air/water syringe with disposable tip
2. Computer with digital imaging software (e.g., MiPACs)
3. Dental health record or electronic health record (EHR) equivalent
4. Dental straight handpiece with manufacturer's IFU and disposable prophylaxis cup attachment
5. Dental radiograph
6. Floss and floss threader (as needed)
7. Implant floss (if available)
8. Interproximal brushes (as needed)
9. Mirror
10. Plastic/teflon explorer/probe
11. Prophylaxis paste (e.g., nonabrasive, cleaning agent for implants or mild, nonabrasive toothpaste)
12. Personal protective equipment (PPE)
13. Saliva ejector

#### **TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y0510 Volumes 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Remove Accumulated Deposits on an Implanted Prosthesis**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee's abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. The trainee must perform all parts of the task *without* assistance.
4. The evaluator will evaluate the trainee's performance using this checklist.
5. Once completed, the supervisor must certify performance in the member's AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<p><b>NOTE:</b> Refer to dentist's recommendation when using plastic curettes/scalers and/or ultrasonic with protective plastic-tip inserts. Professional instrumentation is minimal and should be limited to prevent damage to implant component/s that can contribute to plaque and calculus accumulation.</p> <p>Steps listed below are to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4).</p>			
1. Identify areas of plaque/calculus accumulation on implanted prosthesis			
2. <b>IMPORTANT:</b> If subgingival calculus is located beyond 3-4 mm or implant threads exist, consult dentist			
3. Perform cleaning as normal on any dentition without dental implant			
4. For implant site with excellent health, use handpiece with prophy cup attachment and polishing paste			
5. Prepare handpiece with prophy cup attachment			
6. Perform operational/safety checks IAW prophy handpiece manufacturer's IFU			
7. Place saliva ejector inside patient's mouth			
8. Grasp handpiece with modified pen or pen grasp; establish finger rest/fulcrum; apply polishing agent on prophy cup attachment			
9. Compress rheostat to maintain medium/moderate rotation			

10. Establish a slow working speed of approximately 20 psi			
11. Sweep cup over implant crown using light lateral pressure until plaque or biofilm is removed (ensure flared cup does not extend below gingival margin)			
12. Use interproximal brushes (as needed for implanted supported bridge/s)			
13. Floss interproximal surfaces using implant floss or floss threaders (as needed) around the abutment 360 degrees			
14. Irrigate and aspirate oral cavity			
15. Remove saliva ejector			
<b>FINAL RESULT</b>			

## **MODULE 6: REMOVE ACCUMULATED DEPOSITS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Polish Teeth

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, polish teeth, IAW the performance checklist.

**CFETP/STS REFERENCES:**

10.10 Polish teeth

**EQUIPMENT REQUIRED:**

1. Air/water syringe with disposable tip
2. Dental straight handpiece with disposable prophylaxis angle cup attachment
3. Floss and floss threader (as needed)
4. Polishing agent/paste (e.g., nonabrasive [fine/medium grit] clinically acceptable for use on tooth structure/restorations)
5. Personal protective equipment (PPE)
6. Saliva ejector

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y0510 Volumes 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Polish Teeth**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer’s Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee’s performance using this checklist.
6. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Task to be performed and continued from patient screening performance checklist (as evaluated in QTP Vol 4 page 4). Review prophylaxis handpiece and selected polishing agent’s IFU’s prior to use. Consider the type of polishing agent clinically designed for use on tooth structure, type of stain, restorations, crowns and/or implants.			
1. Assemble prophylaxis handpiece and perform safety/operational checks IAW manufacturer’s IFU			
2. Brief patient on procedure			
3. Place saliva ejector inside patient's mouth			
4. Grasp handpiece with modified pen or pen grasp; establish finger rest/fulcrum			
5. Choose appropriate polishing agent/paste and fill rubber cup with polishing agent/paste			
6. Compress rheostat to maintain medium/moderate rotation (minimize heat production)			
7. Establish a slow working speed of approximately 20 psi			
8. Sweep cup over crown of tooth using light lateral pressure at 90 degree to tooth surface; ensure flared cup does not extend below gingival margin and short contact for each tooth to alleviate heat production			
9. Repeat polishing on all teeth except for tooth/teeth with sensitivity, newly erupted and/or decalcified areas			
10. Floss interproximal surfaces			
11. Irrigate and aspirate as needed			
12. Remove saliva ejector			
<b>FINAL RESULT</b>			

## **MODULE 7: APPLY TOPICAL ANTICARIOGENIC AGENTS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Apply Topical Anticariogenic Agents

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies , apply topical anticariogenic agents, IAW the performance checklist.

**CFETP/STS REFERENCES:**

7.6.15 Apply topical anticariogenic agents

**EQUIPMENT REQUIRED:**

1. Fluoride vanish unit dose package with manufacturer's IFU
2. Personal protective equipment (PPE)

**TRAINING REFERENCES:**

1. Air Force Medical Service Dental Clinical Practice Guidelines
2. CDC 4Y051O Volumes 2 & 4, *Dental Assistant Journeyman*
3. *Clinical Practice of the Dental Hygienist*, Esther M. Wilkins
4. Manufacturer's Instructions for Use (IFU)
5. USAF Guidelines for Infection Prevention & Control in Dentistry

**PERFORMANCE CHECKLIST TASK: Apply Topical Anticariogenic Agents**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer’s Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee’s performance using this checklist.
6. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
1. Review fluoride varnish manufacturer’s IFU prior to use			
2. Ensure tooth surface(s) is/are at a minimum “toothbrush clean”			
3. Open unit-dose varnish package			
4. Mix varnish with applicator brush (follow manufacturer’s IFU for preparation)			
5. Apply thin layer of varnish evenly on teeth			
6. For large surface areas, use a horizontal sweeping stroke across multiple teeth			
7. After application, have patient close their mouth to allow varnish to set			
8. Instruct patient that the minimum treatment time is four hours			
9. Instruct patient that during the four-hour treatment time, avoid hard/sticky foods, alcohol-containing products, hot beverages, and brushing/flossing			
10. Instruct the patient that after the four-hour treatment time, they may remove the varnish by brushing/flossing			
11. Advise patient that varnish will naturally wear away within 24 hours			
<b>FINAL RESULT</b>			

## **MODULE 8: APPLY PIT AND FISSURE SEALANTS**

### **DENTAL ASSISTANT SPECIALTY QTP**

**TASK NAME:** Apply Pit and Fissure Sealants

**OBJECTIVE:** Provided a patient and all necessary equipment and supplies, apply pit and fissure sealants IAW the performance checklist.

#### **CFETP/STS REFERENCES:**

10.11 Apply pit and fissure sealants

#### **EQUIPMENT REQUIRED:**

1. Air/water syringe with disposable tip
2. Articulating paper and forceps
3. Basic Diagnostic Set-up (BDS) instruments (e.g., mouth mirror, explorer/probe and cotton forceps)
4. Cotton rolls and dry angles
5. Curing light with protective shield
6. Dental handpiece with polishing cup attachment
7. Dental health record or electronic health record (EHR) equivalent
8. Etching agent with disposable tip
9. Floss
10. Flour pumice or bristle brush
11. High volume evacuator (HVE)
12. Manufacturer's IFU for etching agent and sealant material
13. Sealant material with disposable applicator
14. Personal protective equipment (PPE)
15. Saliva ejector
16. Water

#### **TRAINING REFERENCES:**

1. AFI 44-108, *Infection Prevention and Control Program*
2. CDC Guidelines for Infection Control in Dental Healthcare Settings
3. CDC 4Y051N Volume 1, *Dental Assistant Journeyman*
4. USAF Guidelines for Infection Prevention & Control in Dentistry
5. Manufacturer's Instructions for Use (IFU)
6. Safety Data Sheets (SDS)



**PERFORMANCE CHECKLIST TASK: Apply Pit and Fissure Sealants**

**EVALUATION INSTRUCTIONS:**

1. After the trainee has received instruction and allowed sufficient supervised practice, evaluate the trainee’s abilities using this performance checklist.
2. The trainee must use infection control practices and follow all safety precautions at all times.
3. Personnel must use manufacturer’s Instructions for Use (IFU) when completing this task.
4. The trainee must perform all parts of the task *without* assistance.
5. The evaluator will evaluate the trainee’s performance using this checklist.
6. Once completed, the supervisor must certify performance in the member’s AFTR.

**NOTE:** The evaluator will STOP the procedure immediately and correct the member if performance is detrimental to patient safety.

Step-by-step procedures	GO	NO GO	NOTES
<b>NOTE:</b> Review etching material and sealant material’s IFU’s compatible for use.			
1. Perform patient entry/screening procedures as evaluated in QTP Vol 4 page 4			
2. Initial and date health history			
3. Brief patient on procedure			
4. Perform hand hygiene and don PPE			
5. Drape and position patient in treatment position; position treatment light to illuminate patient’s oral cavity			
6. Clean each tooth to be treated with flour pumice or bristle brush with water			
7. Irrigate and aspirate thoroughly			
8. Isolate tooth/teeth to be sealed using cotton roll/s with dry angle keeping treatment site dry			
9. Apply acid etch to isolated tooth/teeth and allow to set IAW manufacturer’s IFU			
10. Irrigate and aspirate thoroughly			
11. Inspect each tooth for chalky appearance (if not, re-etch)			
12. Re-isolate tooth/teeth to be sealed			
13. Prepare and apply sealant material IAW manufacturer’s IFU			
14. Cure sealant material IAW manufacturer’s IFU while keeping tooth/teeth dry			
15. Inspect occlusal surface for sealant adhesion with no voids and no air bubbles			
16. Remove any unhardened sealant			

17. Add additional sealant if needed			
18. Remove cotton roll/dry angle or rubber dam			
19. Check patient's bite with articulating paper			
20. Use floss to remove excess sealant material from circumference of tooth			
21. Consult with dentist if excessive sealant remains			
22. Repeat sealant procedure for remaining teeth			
23. Provide patient with home care instructions			
24. Complete patient treatment forms			
<b>FINAL RESULT</b>			