WAC 246-815-160 Standards of dental hygiene practice. A dental hygienist working under the appropriate supervision of a licensed dentist shall perform the following tasks:

(1) Assessment, which must include:

(a) Documentation of patient history.

(i) Recording current and past dental oral health care; and

(ii) Collection of health history data including the patient's:

(A) Current and past health status;

(B) Pharmacologic considerations;

(C) Additional considerations;

(D) Record vital signs and compare with previous readings; and

(E) Consultation with appropriate health care provider(s) as indicated.

(b) A comprehensive clinical evaluation:

(i) An inspection of the head and neck and oral cavity including an oral cancer screening, evaluation of trauma and a temporomandibular joint (TMJ) assessment;

(ii) Evaluation for further diagnostics including radiographs;

(iii) Comprehensive periodontal evaluation that includes the documentation of:

(A) Full mouth periodontal charting:

(I) Probing depths;

(II) Bleeding points;

(III) Suppuration;

(IV) Mucogingival relationship and defects;

(V) Recession;

(VI) Attachment level or loss.

(B) Presence, degree and distribution of plaque and calculus;

(C) Gingival health and disease;

(D) Bone height and bone loss;

(E) Mobility and fremitus;

(F) Presence, location and extent of furcation involvement; and

(G) A comprehensive hard tissue evaluation that includes the charting conditions and oral habits to include:

(I) Demineralization;

(II) Caries;

(III) Defects;

(IV) Sealants;

(V) Existing restorations and potential needs;

(VI) Anomalies;

(VII) Occlusion;

(VIII) Fixed and removable prostheses; and

(IX) Missing teeth.

(c) Risk assessments.

(2) A dental hygiene analysis of assessment findings. The dental hygienist shall:

(a) Analyze and interpret all assessment data to evaluate clinical findings and formulate the dental hygiene care plan;

(b) Determine patient needs that can be improved through the delivery of dental hygiene care; and

(c) Incorporate the dental hygiene care plan into the overall dental treatment plan.

(3) Dental hygiene care planning. The dental hygienist shall:

(a) Identify, prioritize and sequence dental hygiene intervention;

(b) Coordinate resources to facilitate comprehensive quality care;

(c) Collaborate with the dentist and other health and dental care providers and community-based oral health programs;

(d) Present and document dental hygiene care plan to patient;

(e) Explain treatment rationale, risks, benefits, anticipated outcomes, treatment alternatives, and prognosis; and

(f) Obtain and document informed consent or informed refusal.

(4) Care plan implementation. The dental hygienist shall:

(a) Review and implement the dental hygiene care plan with the patient or caregiver;

(b) Modify the plan as necessary and obtain consent;

(c) Communicate with patient or caregiver appropriate for age, language, culture and learning style; and

(d) Confirm the plan for continuing care.

(5) Dental hygiene evaluation. The dental hygienist shall:

(a) Use measurable assessment criteria to evaluate the outcomes of dental hygiene care;

(b) Communicate to the patient, dentists and other health/dental care providers the outcomes of dental hygiene care; and

(c) Collaborate to determine the need for additional diagnostics, treatment, referral education and continuing care based on treatment outcomes and self-care behaviors.

[Statutory Authority: RCW 18.29.210, 43.70.280, and chapter 18.29 RCW. WSR 18-21-141, § 246-815-160, filed 10/19/18, effective 11/19/18. Statutory Authority: RCW 18.29.130, 18.29.076 and 18.130.050. WSR 92-02-018 (Order 224), § 246-815-160, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. WSR 91-02-049 (Order 121), recodified as § 246-815-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.29.076 and 18.130.050(12). WSR 89-16-096 (Order PM 858), § 308-25-170, filed 8/2/89, effective 9/2/89.]