



Ohio State Dental Board

77 South High Street, 17th Floor
Columbus, Ohio 43215-6135

Phone #: 614/466-2580
Fax #: 614/752-8995

www.dental.ohio.gov

Dear Coronal Polishing Certificate Applicant:

This application packet contains the regulatory information (pages 1-2) and application necessary to obtain a certificate to perform coronal polishing under the direct supervision of a licensed dentist in the State of Ohio.

Please complete the application and submit it along with copies of the following documentation:

- Proof of current dental assistant certification from the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC); **and**
- Proof of completion of the 7-hour Board-approved Coronal Polishing Training Program; **and**
- Proof of having successfully completed an examination for coronal polishing through the Dental Assisting National Board (DANB), Ohio Commission on Dental Assistant Certification or the educational institution in which you received the Board-approved Training Program; **or**
- Proof of current certification from DANB or OCDAC and a copy of licensure, certification, or other credential issued by another state that uses standards that are at least equal to the training and examination requirements for Ohio; **and**
- Proof of immunity to or inoculation against the Hepatitis B virus.

In addition, along with the application fee of \$15.00, you must attach a color photograph taken not more than six (6) months prior to application in the space indicated on the application, and have your signature notarized on the back of the application.

Our goal is to successfully guide and assist you through the certification process. Should you have any questions, concerns or comments, please feel free to contact the Dental Board office. Our staff will be happy to assist you.

Sincerely,

A handwritten signature in black ink, appearing to read "Lili C. Reitz". The signature is fluid and cursive, with a large, sweeping flourish at the end.

LILI C. REITZ, Esq.
Executive Director

Ohio State Dental Board

Ohio Revised Code Sections 4715.39 and Ohio Administrative Code Sections 4715-10-01 and 4715-12-02

Coronal Polishing Certification Guidelines

4715.39 Duties and procedures qualified persons may and may not perform.

- (A) The state dental board may define the duties that may be performed by dental assistants and other individuals designated by the board as qualified personnel. If defined, the duties shall be defined in rules adopted in accordance with Chapter 119. of the Revised Code. The rules may include training and practice standards for dental assistants and other qualified personnel. The standards may include examination and issuance of a certificate. If the board issues a certificate, the recipient shall display the certificate in a conspicuous location in any office in which the recipient is employed to perform the duties authorized by the certificate.
- (B) A dental assistant may polish the clinical crowns of teeth if all of the following requirements are met:
- (1) The dental assistant's polishing activities are limited to the use of a rubber cup attached to a slow-speed rotary dental hand piece to remove soft deposits that build up over time on the crowns of teeth.
 - (2) The polishing is performed only after a dentist has evaluated the patient and any calculus detected on the teeth to be polished has been removed by the dentist or dental hygienist.
 - (3) The dentist supervising the assistant supervises not more than two dental assistants engaging in polishing activities at any given time.
 - (4) The dental assistant is certified by the dental assisting national board or the Ohio commission on dental assistant certification.
 - (5) The dental assistant receives a certificate from the board authorizing the assistant to engage in the polishing activities. The board shall issue the certificate if the individual has successfully completed training in the polishing of clinical crowns through a program accredited by the commission on dental accreditation or equivalent training approved by the board. The training shall include courses in basic dental anatomy and infection control, followed by a course in coronal polishing that includes didactic, preclinical, and clinical training; any other training required by the board; and a skills assessment that includes successful completion of standardized testing. The board shall adopt rules pursuant to division (A) of this section establishing standards for approval of this training.
- (C) Subject to this section and the applicable rules of the board, licensed dentists may assign to dental assistants and other qualified personnel dental procedures that do not require the professional competence or skill of the licensed dentist or dental hygienist as this section or the board by rule authorizes dental assistants and other qualified personnel to perform. The performance of dental procedures by dental assistants and other qualified personnel shall be under direct supervision and full responsibility of the licensed dentist.
- (D) Nothing in this section shall be construed by rule of the state dental board or otherwise to do the following:
- (1) Authorize dental assistants or other qualified personnel to engage in the practice of dental hygiene as defined by sections 4715.22 and 4715.23 of the Revised Code or to perform the duties of a dental hygienist, including the removal of calcareous deposits, dental cement, or accretions on the crowns and roots of teeth other than as authorized pursuant to this section;
 - (2) Authorize the assignment of any of the following:
 - (a) Diagnosis;
 - (b) Treatment planning and prescription, including prescription for drugs and medicaments or authorization for restorative, prosthodontic, or orthodontic appliances;
 - (c) Surgical procedures on hard or soft tissue of the oral cavity, or any other intraoral procedure that contributes to or results in an irreparable alteration of the oral anatomy;
 - (d) The making of final impressions from which casts are made to construct any dental restoration.
- (E) No dentist shall assign any dental assistant or other individual acting in the capacity of qualified personnel to perform any dental procedure that the assistant or other individual is not authorized by this section or by board rule to perform. No dental assistant or other individual acting in the capacity of qualified personnel shall perform any dental procedure other than in accordance with this section and any applicable board rule or any dental procedure that the assistant or other individual is not authorized this section or by board rule to perform.

4715-10-01 Coronal polishing certification.

Pursuant to Ohio Revised Code section 4715.39 and this rule, certified dental assistants shall receive certification to perform coronal polishing and may do so under the restrictions set forth in agency level rule 4715-11-02.

- (A) Qualifications - Within ninety days from receipt of successfully passing the standardized examination required pursuant to Ohio Revised Code section 4715.39(B)(5), an applicant to be considered for issuance of coronal polishing certification shall furnish satisfactory proof of all the following on a form prescribed and provided by the state dental board:
- (1) He is currently certified by the Dental assisting national board or the Ohio commission on dental assistant certification; and
 - (2) He has successfully completed an approved training program as defined by Ohio Revised Code section 4715.39(B)(5) and paragraph (B) of this rule; and
 - (3) He has successfully passed standardized testing as required by Ohio Revised Code section 4715.39(B)(5) and paragraph (C) of this rule immediately following successful completion of a skills assessment component of an approved training program.
- The board executive office shall issue a coronal polishing certificate to those certified dental assistants who have provided a completed application along with an application fee of fifteen dollars, the appropriate documentation of current certification and approved training program, and successful completion of standardized testing. Certified dental assistants who do not submit the application and appropriate documentation for a coronal polishing certificate within ninety days after successful completion of the standardized testing required pursuant to Ohio Revised Code section 4715.39(B)(5) and paragraph (C) of this rule, must retake the training program in its entirety including, but not limited to, successful completion of standardized testing.
- (B) Approved training program - Training in the polishing of the clinical crowns of teeth through an approved program accredited by the American dental association commission on dental accreditation or equivalent board-approved training through a college or university accredited by the Higher learning commission of the North central association of colleges and schools. The college or university must have a classroom and a (pre)clinical facility with the proper armamentarium and equipment to support the educational objectives.
- (1) The board-approved training program must include a minimum of seven hours of coursework of which three are didactic and four are (pre)clinical. The training shall include courses in:
 - (a) basic dental anatomy; and
 - (b) infection control; and
 - (c) coronal polishing which consists of didactic, preclinical, and clinical instruction; and
 - (d) a clinical skills assessment that includes successful completion of a standardized examination.
 - (2) The faculty who participate in a coronal polishing course shall be full or part-time. Faculty must be competent educators with educational methodology, professional training, and have experience in coronal polishing. The participating faculty must be associated with an educational institution who is accredited by the American dental association commission on dental accreditation. There shall be a supervising dentist or dental hygienist faculty present for all (pre)clinical portions of the course. This person will be responsible for the learning experiences. Only course faculty will be responsible for final evaluation of students.
 - (3) This course shall include an evaluation component, mechanism, or procedure which assesses competence in coronal polishing. Minimal competency level shall be at seventy-five percent and must be demonstrated by the student prior to sitting for the standardized examination. The skills assessment must be on a clinical patient and disclosing solution must be utilized as an evaluation tool.

Coronal Polishing Certification Guidelines (Continued)

- (4) An applicant shall not be permitted to take the standardized examination until the instructor certifies that the applicant has successfully completed all components of the training program and that the applicant is deemed capable of safely performing coronal polishing. The board reserves the right to make an independent determination on the issue of completion.
 - (5) The board retains the right and authority, upon notification, to audit, monitor, or request evidence demonstrating adherence to Chapter 4715 of the Revised Code for training programs approved by board action. The board may rescind approval status if the career college or school has disseminated any false or misleading information in connection with the training program, or if the career college or school has failed to conform to Chapter 4715 of the Revised Code or Chapter 4715 of the Administrative Code.
- (C) Standardized testing - A board-approved examination to be administered by the Dental assisting national board, the Ohio commission on dental assistant certification, or the educational institution in which the applicant has obtained successful completion of an approved training program.
- (1) The examination shall be conducted within sixty days after the conclusion of the training program and shall be governed in format, content and subject matter by the testing agency and/or educational institution.
 - (2) The minimum passing score for the standardized testing is seventy-five percent.
 - (3) An applicant must submit the examination fee established by the testing entity each time the applicant takes the examination.
 - (4) An applicant who fails to successfully complete the examination after the third attempt must retake the training program.
 - (5) An applicant must file a new application for each examination to be taken and submit a new examination fee as provided for in paragraph (C)(3) of this rule.
- (D) The board shall issue a certificate to perform coronal polishing to currently certified dental assistants who, within one year immediately preceding the date of application, have completed the requirements set forth in paragraphs (A)(2) and (A)(3) of this rule.
- (E) A certified dental assistant shall be exempt from the approved training program and standardized testing requirements provided in paragraphs (A)(2) and (A)(3) of this rule if he holds a current license, certificate, or other credential issued by another state that the board determines uses standards that are at least equal to those established by these rules.

4715-11-02 Certified dental assistant; functions.

- (A) A licensed dentist may assign to certified dental assistants under his direct supervision and full responsibility those basic remediable intra-oral dental tasks and/or procedures as defined in rule 4715-11-01.
- (B) A licensed dentist may assign to currently certified dental assistants under his direct supervision and full responsibility the following dental tasks and/or procedures in addition to those basic remediable intra-oral dental tasks and/or procedures as defined in rule 4715-11-01:
 - (1) "Coronal polishing" - Upon receipt of a certificate from the board authorizing the certified dental assistant to engage in coronal polishing activities, pursuant to Ohio Revised Code section 4715.39, the certified dental assistant may perform polishing of the enamel and restorations on the anatomical crowns of human teeth by utilizing only a combination of a polishing agent, a slow speed hand piece, a prophyl angle and a rubber cup. This in no way authorizes the mechanical removal of calculus. Nothing in this rule authorizes a certified dental assistant to perform a complete oral prophylaxis; and
 - (2) The polishing is performed only after a dentist has evaluated the patient and any calculus detected on the teeth to be polished has been removed by the dentist or dental hygienist; and
 - (3) The dentist supervising the assistant supervises not more than two dental assistants engaging in coronal polishing activities at any given time.



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APPLICATION FOR A CERTIFICATE TO PERFORM CORONAL POLISHING IN THE STATE OF OHIO

1. Present Legal Name (Print) Last First Middle Maiden (If applicable)

2. Address Number and Street City State Zip Code

**Do Not Write In This Space
For Office Use Only**

3. Name as you wish it to appear on your license: (Type or Print Legibly)

4. Place of Birth City State County

5. Date of Birth Age Sex Male Soc. Sec. No.
/ / Female

6. Color of Hair Color of eyes Height Weight

For this application to be processed, a color photograph of the applicant taken not more than six (6) months prior to the date of application, must be attached in this space.

7. Employer's Name and Address

Proof of Current Certification through the Dental Assisting National Board (DANB) OR The Ohio Commission on Dental Assistant Certification (OCDAC)

8. Do you hold current certification from the Dental Assisting National Board (DANB) or the Ohio Commission on Dental Assistant Certification (OCDAC)? If YES, attach copies of documentation. Yes No

Proof of Completion of the 7-hour Board-approved Training Program AND Successful Completion of an Examination provided by the Dental Assisting National Board (DANB), Ohio Commission on Dental Assistant Certification, or the educational institution in which you received the Board-approved Training Program OR

Proof of License, Certification, or Credential from another state whose standards are at least equal to those of the Ohio State Dental Board.

9. Have you completed an Ohio State Dental Board approved 7-hour Training Program in coronal polishing? Attach copies of Certificate of Course Completion. Course Date: _____ Yes No

10. Have you successfully passed an examination for coronal polishing through the Dental Assisting National Board (DANB), Ohio Commission on Dental Assistant Certification or the educational institution in which you received the Board-approved Training Program? Attach copies of documentation. Examination Date: _____ Yes No

11. Do you hold a License, Certificate or other credential in Coronal Polishing from another state that uses standards that are at least equal to the training and examination requirements for Ohio? If YES, attach copies of certificate/license and documentation indicating training and examination requirements. Yes No

**A non-refundable application fee of \$15.00 MUST be submitted with this application.
The certified check or money order must be made out to:**

Treasurer, State of Ohio or Ohio State Dental Board

12. Are you immune to or immunized against the Hepatitis B virus? If YES, attach copies of documentation.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
13. Have you been convicted of or plead guilty to any felony or misdemeanor? (Exclude all traffic violations other than those involving driving while under the influence of alcohol or drugs)? If YES, attach statements.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
14. Do you have any criminal charges pending against you? If YES, attach statement giving details of the matter and the name and address of the authority in possession of the record thereof.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
15. In the past year, have you been a patient in any sanitarium, hospital, or mental institution for the treatment of mental illness? If YES, attach statements, giving full explanation, including name and address of doctor and institution.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
16. Are you engaged in the current illegal use of controlled substances, or other habit-forming drugs, or alcohol, or other chemical substances? If YES, attach statement giving full explanation, dates, places, etc.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
17. Do you have a physical or mental condition which could affect your ability to perform coronal polishing duties? If YES, attach statement giving full explanation.	<input type="checkbox"/> Yes
	<input type="checkbox"/> No

AFFIDAVIT

18. STATE OF _____)
 COUNTY OF _____)
 SS.

I have carefully read the questions in the foregoing application and have answered them truthfully, fully and completely, without mental reservation of any kind.

I fully understand that failure to make a full disclosure of any fact or information called for may result in the denial of my application.

I hereby authorize all educational institutions, governmental agencies and instrumentalities, my references, employers and business and professional associates (past and present), to release to the Ohio State Dental Board any information, files or records requested by the Board in connection with the processing of this application.

I hereby WAIVE all provisions of law forbidding any physician or other person who has attended or examined me, or who may hereafter attend or examine me, from disclosing any knowledge or information which he/she thereby acquired, and I hereby consent that he/she may disclose such knowledge or information to the Ohio State Dental Board.

I hereby certify that I have read carefully and understand the law and rules pertaining to the practice of dentistry.

Being duly sworn, _____ says that he/she is the person referred to in this application and that the foregoing statements are true in every respect, and that the attached photograph is a true likeness of himself/herself taken within the last six (6) months.

Signature of Applicant _____

S E A L

Sworn to and subscribed before me this _____ day of _____, _____

Signature of Notary _____

This Space To Be Completed By The Ohio State Dental Board

APPLICATION	CERTIFICATE NUMBER	DATE OF CERTIFICATION
<input type="checkbox"/> Approved		
<input type="checkbox"/> Denied		