

How to Become an Affiliated Practice Dental Hygienist

Suggested forms and instructions for completing an Affiliated Practice Notification Form and reporting an Affiliated Practice relation between a dentist and a dental hygienist are available on the AZ State Board of Dental Examiners website :

<https://dentalboard.az.gov/>

Click on Applications and Forms > Other Applications > Affiliated Practice)

The following documents must be submitted. There are sample templates on the website to assist you in developing these documents:

- ✓ Dental Hygienist Notification Form which includes signed and notarized affidavit of eligibility
- ✓ Affiliated Practice Agreement signed by both the Dental Hygienist and Dentist
- ✓ Dentist Notification Form
- ✓ Procedures and Standing Orders
- ✓ Referral Form and Report of Findings
- ✓ Permission and Medical History Form (Patient Information)

A copy of the Statutes and Rules relating to Affiliated Practice Relationship is also provided on the website.

A Brief Summary of Requirements

Affiliated Practice Dental Hygienist Info

Your name, AZ License #, original issue date, and other info

Affiliated Practice Dentist Info

Name & AZ license # of AP dentist

Practice Information

Must have been actively engaged in dental hygiene practice for at least 500 hours in each of the 2 years immediately preceding the affiliated practice relationship.

Affiliated Practice Agreement

Submit a completed, signed AP Agreement that includes:

- The setting in which the DH may deliver services
- The services to be provided, procedures, & standing orders
- A provision for a substitute dentist when AP dentist is unavailable

Affiliated Practice Relationship Requirements

- Patients who have been assessed by the dental hygienist shall be directed to the AP dentist for diagnosis, treatment or planning that is outside the dental hygienist's scope of practice, and the AP dentist may make any necessary referrals to other dentists.
- The AP dental hygienist shall consult with the AP dentist if the proposed treatment is outside the scope of the agreement.
- The AP dental hygienist shall consult with the AP dentist before initiating further treatment on patients who have not been seen by a dentist within twelve months of the initial treatment by the dental hygienist.
- The AP dental hygienist shall consult with the AP dentist before initiating treatment on patients presenting with a complex medical history or medication regimen.
- The patient shall be informed in writing that the dental hygienist providing the care is a licensed dental hygienist and that the care does not take the place of a diagnosis or treatment plan by a dentist.

Continuing Education

Have completed 12 hours of continuing education, with a minimum of 4 hours in medical emergencies; a minimum of 8 hours in at least two of the following: pediatric or other special health care needs, preventative dentistry , public health or community based dentistry.

Cardiopulmonary Resuscitation

Hold a current certificate in cardiopulmonary resuscitation (CPR).