

Entry-level Competencies for Allied Dental Professionals

Preamble

Dental health professionals require interrelated health knowledge in order to deliver ethical and equitable person-centered care. They are members of interprofessional and intraprofessional teams, emphasizing evidence-based practice, quality assurance and informatics.

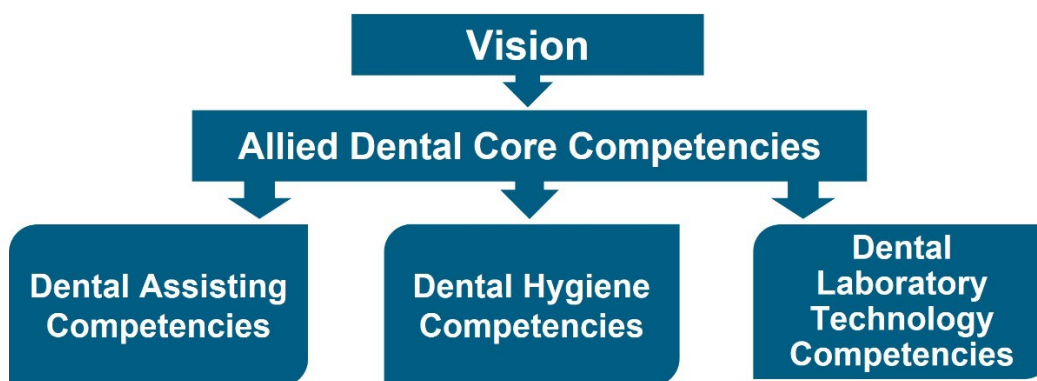
The dental workforce is comprised of dental assistants, dental hygienists, dental laboratory technicians, dentists and all advanced and future dental practitioners. All dental health care providers collaborate with one another and related professionals to deliver continuing oral care and support patients by addressing health care issues affecting society. The allied dental professional must have a broad-based education and experience to demonstrate professional and ethical behavior. This includes employing effective communication and interpersonal skills, using emerging trends and technologies, applying critical thinking skills and addressing health care issues. To enhance personal and professional development, including opportunities for career expansion, dental professionals' participation in continuing education and lifelong learning is vital.

This document addresses the **Core and Discipline-specific Competencies** for the allied dental professions (dental assisting, dental hygiene and dental laboratory technology) that provide characteristics of conduct found among all dental professionals. The Core Competencies include:

- **Professional Knowledge:** 1) Professionalism, 2) Safety, 3) Critical Thinking and 4) Scientific Inquiry and Research
- **Health Promotion and Disease Prevention:** 1) Health Education and Community Connection and 2) Advocacy
- **Professional Development and Practice:** 1) Professional Growth, 2) Business Practices and 3) Leadership

The **Core and Discipline-specific Competencies** provide a framework for the development of an entry-level curriculum as part of the educational process for the new practitioner. This framework embraces the intent of high-quality and culturally aware care for all persons.

Graphic Representation of Competency Structure



This document was developed by three allied dental health disciplines. As experts in each of the three professions, groups from dental assisting, dental hygiene and dental laboratory technology crafted specific competencies for their individual disciplines. Furthermore, each allied dental profession was represented equally to create **Discipline-specific Competencies** related to the specific scopes of practice. These competencies are focused on foundational scientific knowledge, patient care and skills required of each profession.

This document is intended for use by new and existing programs for future innovation, growth and expansion. It supports curricular modifications and serves to educate other professionals about curricular priorities in allied dental education. The content assists in understanding the roles of oral health care professionals. This document is advisory in nature; it is not intended to standardize educational programs and should be used in conjunction with other professional resources. It is also not intended to serve as a validation for program content within allied dental education or for written or clinical licensing examinations.

Allied Dental Core Competencies

Professional Knowledge

1. Professionalism

- 1.1 Apply professional values and ethics in all endeavors.
- 1.2 Adhere to accreditation standards and federal, state and local laws and regulations.
- 1.3 Promote quality assurance practices based on accepted standards of care.
- 1.4 Demonstrate interpersonal skills to effectively communicate and collaborate with professionals and patients across socioeconomic and cultural backgrounds.

2. Safety

- 2.1 Comply with local, state and federal regulations concerning infection control protocols for blood-borne and respiratory pathogens, other infectious diseases and hazardous materials.
- 2.2 Follow manufacturers' recommendations related to materials and equipment used in practice.
- 2.3 Establish and enforce mechanisms to ensure the management of emergencies.

- 2.4 Use security guidelines and compliance training to create and maintain a safe, eco-friendly and sustainable practice compatible with emerging trends.
- 2.5 Ensure a humanistic approach to care.
- 2.6 Uphold a respectful and emotionally safe environment for patients and practitioners.

3. Critical Thinking

- 3.1 Demonstrate critical and analytical reasoning to identify and develop comprehensive oral health care solutions and protocols.
- 3.2 Apply individual and population risk factors, social determinants of health and scientific research to promote improved health and enhanced quality of life.

4. Scientific Inquiry and Research

- 4.1 Support research activities and develop research skills.
- 4.2 Use evidence-based decision-making to evaluate and implement health care strategies aligned with emerging trends to achieve high-quality, cost-effective and humanistic care.
- 4.3 Integrate accepted scientific theories and research into educational, preventive and therapeutic oral health services.

Health Promotion and Disease Prevention

5. Health Education and Community Connection

- 5.1 Endorse health literacy and disease prevention.
- 5.2 Communicate and provide health education and oral self-care to diverse populations.
- 5.3 Facilitate learning platforms for communities of interest by providing health education through collaboration with dental and other professionals.
- 5.4 Promote the values of the dental profession through service-based activities.
- 5.5 Evaluate outcomes for future activities supporting health and wellness of individuals and communities.

6. Advocacy

- 6.1 Promote an ethical and equitable patient care and practice environment by demonstrating inclusion of diverse beliefs and values.
- 6.2 Uphold civic and social engagement through active involvement in professional affiliations to advance oral health.

Professional Development and Practice

7. Professional Growth

- 7.1 Commit to lifelong learning for professional and career opportunities in a variety of roles and settings.
- 7.2 Engage in research, education, industry involvement, technological and professional developments and/or advanced degrees.
- 7.3 Demonstrate self-awareness through reflective assessment for continued improvement.

8. Business Practices

- 8.1 Facilitate referrals to and consultations with relevant health care providers and other professionals to promote equitable and optimal patient care.
- 8.2 Promote economic growth and sustainability by meeting practice goals.
- 8.3 Create and maintain comprehensive, timely and accurate records.
- 8.4 Protect privacy, confidentiality and security of the patients and the practice by complying with legislation, practice standards, ethics and organizational policies.

9. Leadership

- 9.1 Develop and use effective strategies to facilitate change.
- 9.2 Inspire and network with others to nurture collegial affiliations.
- 9.3 Solicit and provide constructive feedback to promote professional growth of self.

Discipline-specific Competencies—Dental Assisting

The dental assisting competencies are the continuation of the allied dental core competencies and both should be viewed as a single framework for this discipline. Dental assistants are integral members of the dental team requiring dedication, personal responsibility, integrity and a commitment to continuing education. They advocate for patients and collaborate with other professionals in providing safe, ethical and clinical oral health care. In addition to the clinical role, dental assistants possess experience related to administration and laboratory functions.

DA. 1 Essential Knowledge

- DA. 1.1 Recognize the implications of the interrelationship of the following sciences on the diagnosis, treatment and management of dental diseases:
- Microbiology
 - Human anatomy and physiology
 - Human cellular biology
 - Embryological and histological development of the hard and soft tissues of the head and neck
 - Anatomical and physiological features for the dentition
 - General and oral pathology
 - Nutrition
 - Pharmacokinetics
- DA. 1.2 Relate to patients' intellectual and psychosocial development and growth throughout their lifespan.
- DA. 1.3 Possess a level of background knowledge and skill necessary to be competent with the current dental materials and technologies used for direct restorative procedures, indirect restorative procedures, fixed and removable prostheses and the recognized specialties.

DA. 2 Person-centered Care

2.1 Assessment

- DA. 2.1.1 Collect, analyze, record and communicate diagnostic data on the general and oral health status of diverse patients and communities.
- DA. 2.1.2 Produce dental images of diagnostic quality using as low as reasonably achievable (ALARA) and/or appropriate safety principles.
- DA. 2.1.3 Identify relevant factors associated with medication dosage and administration for prescription and over-the-counter drugs commonly used in dentistry and medicine.
- DA. 2.1.4 Assist in the development of a comprehensive treatment plan or program that is reflective of the general and oral health needs of the individual patient.

2.2 Chairside Skills

- DA. 2.2.1 Select and assemble the appropriate materials and armamentarium for general and specialized patient care.

- DA. 2.2.2 Demonstrate ergonomic and safe instrument transfer techniques.
- DA. 2.2.3 Manage medical and dental emergencies, including current basic life support and first aid.
- DA. 2.2.4 Perform chairside and expanded function procedures as permitted by the state statutes and regulations.
- DA. 2.2.5 Educate patients on caries and periodontal disease prevention.
- DA. 2.2.6 Provide recommendations for nutritional needs as they relate to oral health.
- DA. 2.2.7 Inform patients of pre- and post-operative instructions for preventive, restorative and specialty dental procedures.
- DA. 2.2.8 Demonstrate isolation and evacuation techniques for intraoral procedures.

2.3 Administrative Skills

- DA. 2.3.1 Support administrative roles in the dental practice.
- DA. 2.3.2 Demonstrate proficiency in strategies that support practice management.
- DA. 2.3.3 Possess familiarity with software and hardware used in administrative processes.

Discipline-specific Competencies—Dental Hygiene

The dental hygiene competencies are the continuation of the allied dental core competencies, and both should be viewed as a single framework for this discipline. Dental hygienists are oral health professionals who specialize in the identification, prevention and management of oral diseases. Dental hygienists provide evidence-based, person-centered care through assessment, diagnosis, planning, implementation, evaluation and documentation. They practice in collaboration with dental and other professionals in a variety of settings to recognize the oral-systemic connection for improvement of oral health, general health and well-being of individuals, communities and populations.

DH. 1 Essential Knowledge

- DH. 1.1 Apply the knowledge of the following sciences during the dental hygiene process of care:
- Microbiology
 - Human anatomy and physiology
 - Human cellular biology
 - Chemistry
 - Biochemistry
 - Immunology and pathology
 - Nutrition
 - Pharmacokinetics
- DH. 1.2 Apply the knowledge of the following behavioral sciences during the dental hygiene process of care:
- Sociology
 - Psychology
 - Interpersonal communication

DH. 2 Person-centered Care

2.1 Assessment

- DH. 2.1.1 Accurately collect and document a comprehensive medical, dental, social health history and diagnostic data.
- DH. 2.1.2 Critically analyze all collected data.
- DH. 2.1.3 Identify predisposing, etiologic, environmental and social risk factors for person-centered care.

2.2 Dental Hygiene Diagnosis

- DH. 2.2.1 Analyze comprehensive medical, dental and social health history.
- DH. 2.2.2 Integrate observational and diagnostic data as part of the dental hygiene diagnosis.
- DH. 2.2.3 Use predisposing, etiologic, environmental and social risk factors for person-centered care.

2.3 Planning

- DH. 2.3.1 Use the patient's assessment to establish an optimal and realistic, person-centered dental hygiene care plan through mutual communication.

- DH. 2.3.2 Use all aspects of the dental hygiene diagnosis in combination with the person's values, beliefs and preferences to develop a dental hygiene care plan through shared decision-making.

2.4 Implementation

- DH. 2.4.1 Obtain informed consent based on the agreed-upon treatment plan.
- DH. 2.4.2 Execute individualized treatment based on the patient's dental hygiene diagnosis.
- DH. 2.4.3 Integrate educational, preventive and therapeutic services to provide comprehensive person-centered care.
- DH. 2.4.4 Use specialized skills and evidenced-based technology to promote dental and periodontal health.
- DH. 2.4.5 Continuously re-evaluate for modifications to achieve desired outcomes.

2.5 Evaluation and Documentation

- DH. 2.5.1 Evaluate the effectiveness of completed services.
- DH. 2.5.2 Analyze treatment outcomes of the dental hygiene process of care to determine improved health and modifications.
- DH. 2.5.3 Modify dental hygiene care plans as necessary to meet goals of patient and clinician.
- DH. 2.5.4 Identify necessary referrals for success of the treatment outcomes, including intraprofessional and interprofessional health care providers, supporting professions and patient advocates.
- DH. 2.5.5 Accurately document assessment findings and data, dental hygiene diagnosis and care plan, implementation, outcome evaluation and any communication between professionals and patient and anyone else in the circle of care.

Discipline-specific Competencies—Dental Laboratory Technology

The dental laboratory technology competencies are the continuation of the allied dental core competencies and both should be viewed as a single framework for this discipline. Dental laboratory technicians fabricate custom dental prostheses and appliances and provide services according to the dentist's prescription. They practice in collaboration with health care and other professionals in various settings. Dental laboratory technicians may become nationally certified but have no licensing requirements.

DLT. 1 Essential Knowledge

DLT. 1.1 General Knowledge

- Communication
- Mathematics
- Business principles

DLT 1.2 Physical Sciences

- Anatomy and physiology
- Chemistry
- Biology
- Physics

DLT 1.3 Dental Sciences

- Head, neck and oral anatomy and physiology
- Tooth morphology
- Occlusion
- Dental lab material types, properties and handling

DLT 1.4 Dental Laboratory Fundamental Knowledge of Materials, Equipment and Techniques in

- Complete dentures
- Removable partial dentures
- Fixed prosthodontics
- Orthodontics
- Implants
- Other dental appliances improving patient's health and well-being

DLT. 2 Best Practices

2.1 Assessment

DLT. 2.1.1 Ensure adequate information and the dentist's prescription are supplied for case assessment.

DLT. 2.1.2 Evaluate and establish design and fabrication methods customized for each patient.

2.2 Planning

- DLT. 2.2.1 Apply foundational knowledge to all aspects of dental laboratory practices.
- DLT. 2.2.2 Determine the advantages and disadvantages of materials, equipment and processes necessary to fabricate custom dental prostheses and appliances.

2.3 Fabrication

- DLT. 2.3.1 Use evidence-based analysis to apply emerging technologies, innovative materials and manufacturing methods to improve the quality of products and services.
- DLT. 2.3.2 Design and fabricate custom dental prostheses and appliances.
- DLT. 2.3.3 Perform repairs and alterations.

2.4 Evaluation

- DLT. 2.4.1 Provide quality assurance and maintain quality control.
- DLT. 2.4.2 Evaluate and reflect on the effectiveness of completed services.
- DLT. 2.4.3 Implement improvements.

2.5 Business Practices

- DLT. 2.5.1 Apply management and marketing strategies relative to the dental laboratory practices.
- DLT. 2.5.2 Document and maintain case information.
- DLT. 2.5.3 Demonstrate efficient handling, storage and delivery of dental prostheses and appliances.

Glossary

Administrative Skills: A variety of qualities related to carrying out tasks that are directly related to running a business and keeping the office organized. (*Irlbacher-Girtel; Girtel Dental Office Administration.*)

Assessment: The collection and analysis of systematic and oral health data in order to identify client needs. (adha.org/resources-docs/7614_Policy_Manual.pdf)

Chairside Skills: A wide range of skills and procedures that are performed independently, or to assist the dental hygienist or dentist, and occur in a dental setting.
(Adapted from Bird DL, Robinson DS. *Modern Dental Assisting*. 13th Ed. Elsevier Health Sciences, 2021; and ada.org/publications/cdt/glossary-of-dental-clinical-terms#direct)

Civil and Social Engagements: Individual and collective actions designed to identify and address issues of public concern. (apa.org/education-career/undergrad/civic-engagement)

Community Connection: A process of developing relationships that enable stakeholders to work together to address health-related issues and promote well-being to achieve positive health impact and outcomes. (who.int/publications/i/item/9789240010529)

Compliance Training: Measures taken to assure safe and healthful working conditions through research, information, education and training in the field of occupational safety and health.
(Adapted from osha.gov/sites/default/files/publications/osha2254.pdf.)

Critical Thinking: Scrutinizing, differentiating and appraising information as well as reflecting on information to make judgments that will inform clinical decisions. (adea.org/adeacci/resources/critical-thinking-skills-toolkit/pages/overview-of-critical-thinking-skills.aspx)

Culturally Aware (Cultural Humility): A lifelong process of self-reflection, self-critique and commitment to understanding and respecting different points of view, and engaging with others humbly, authentically and from a place of learning. (adea.org/diversitytoolkit)

Dental Appliance: A device (restoration or prosthesis) used to improve function or to provide therapeutic benefit. (Adapted from: [1.] Definition of appliance. In: Ireland, R. ed., *A Dictionary of Dentistry*. OUP Oxford, 2010. p. 23. Retrieved 28 Jun. 2022, from oxfordreference.com/view/10.1093/acref/9780199533015.001.0001/acref-9780199533015-e-329 and [2.] The glossary of prosthodontic terms. *J Prosthet Dent*, 2005;94(1):10–92. doi.org/10.1016/j.prosdent.2005.03.013)

Dental Hygiene Care Plan: An organized presentation or list of interventions to promote the health or prevent disease of the patient's oral condition. The plan is designed by the dental hygienist and consists of services that the dental hygienist is educated and licensed to provide. (American Dental Hygienists' Association. Standards for Clinical Dental Hygiene Practice, 2016. adha.org/practice.)

Dental Hygiene Diagnosis: The identification of an individual's health behaviors, attitudes and oral health care needs for which a dental hygienist is educationally qualified and licensed to provide. The dental hygiene diagnosis requires evidence-based critical analysis and interpretation of assessments in order to reach conclusions about the patient's dental hygiene treatment needs.

The dental hygiene diagnosis provides the basis for the dental hygiene care plan. (American Dental Hygienists' Association. ADHA Policy Manual, June 2020. p. 35.
adha.org/sites/default/files/ADHA_Policy_Manual.pdf)

Dental Hygiene Process of Care: The purpose of the dental hygiene process of care is to provide a framework where the individualized needs of the patient can be met, and to identify the causative or influencing factors of a condition that can be reduced, eliminated or prevented by the dental hygienist. There are six components to the dental hygiene process of care: assessment, dental hygiene diagnosis, planning, implementation, evaluation, and documentation. (American Dental Hygienists' Association. ADHA Policy Manual, June 2020. p. 35.
adha.org/sites/default/files/ADHA_Policy_Manual.pdf)

Dental Prosthesis: An artificial replacement (prosthesis or restoration) of one or more teeth (up to the entire dentition in either arch) and associated dental / alveolar structures. Dental prostheses usually are subcategorized as either fixed dental prostheses or removable dental prostheses and include maxillofacial prostheses. (Adapted from: [1.] Competencies for Entry into the Allied Dental Professions, Glossary of Terms. *J Dent Educ*, 2011;75(7):941–8.
adea.org/uploadedFiles/ADEA/Content_Conversion_Final/about_adea/governance/ADEA_Competencies_for_Entry_into_the_Allied_Dental_Professions.pdf and [2.] The glossary of prosthodontic terms. *J Prosthet Dent*, 2005;94(1):10–92. doi.org/10.1016/j.prosdent.2005.03.013)

Documentation: The complete and accurate recording of all collected data, treatment planned and provided, recommendations, referrals, prescriptions, patient/client comments and related communication, treatment outcomes and patient satisfaction and other information relevant to patient care and treatment. (American Dental Hygienists' Association. ADHA Policy Manual, June 2020. p. 36. adha.org/sites/default/files/ADHA_Policy_Manual.pdf)

Eco-friendly: Not harmful to the environment.
(oxfordlearnersdictionaries.com/us/definition/english/eco-friendly/)

Emotionally Safe (Wellness): A dynamic state of physical, mental and social well-being.
(dictionary.apa.org/wellness)

Equitable: Providing care/treatment that does not vary in quality because of personal characteristics and preferences, socioeconomic status, geographic location and/or other systemic inequities. (Adapted from ADEA Faculty Diversity Toolkit, adea.org/diversitytoolkit and Oral health in America 2021: Making a case for curricular change. *J Dent Educ* 2022;86(6):637-48. doi.org/10.1002/jdd.12929)

Ethical Behavior: Moral standards of conduct. (Bird DL, Robinson DS. *Modern Dental Assisting*. 13th Ed. Elsevier Health Sciences, 2021)

Evaluation: Using evidence-based decisions, the process of assessing, reviewing, modifying/discontinuing and documenting the outcomes of treatment and interventions provided for clients. (American Dental Hygienists' Association. ADHA Policy Manual, June 2020. p. 37. adha.org/sites/default/files/ADHA_Policy_Manual.pdf and Competencies for Entry into the Allied Dental Professions, Glossary of Terms. *J Dent Educ*, 2011;75(7):941–8.
adea.org/uploadedFiles/ADEA/Content_Conversion_Final/about_adea/governance/ADEA_Competencies_for_Entry_into_the_Allied_Dental_Professions.pdf.)

Evidence-based Care: The conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual clients. The practice of evidence-based dental hygiene requires the integration of individual clinical expertise and client preferences with the best available external clinical evidence from systematic research. (American Dental Hygienists' Association. Standards for Clinical Dental Hygiene Practice, revised 2016. adha.org/resources-docs/2016-Revised-Standards-for-Clinical-Dental-Hygiene-Practice.pdf.)

Expanded Functions: Specific intraoral functions delegated to an allied dental professional that requires increased skill and training. (Bird DL, Robinson DS. *Modern Dental Assisting*. 13th Ed. Elsevier Health Sciences, 2021)

Fabrication: The building, making or constructing of a restoration. (The glossary of prosthodontic terms. *J Prosthet Dent*, 2005;94(1):10–92. doi.org/10.1016/j.prosdent.2005.03.013)

Health Literacy: The degree to which individuals have the capacity to obtain, process and understand basic health information needed to make appropriate health decisions. (Health Resources & Services Administration. hrsa.gov/about/organization/bureaus/ohe/health-literacy/index.html#:~:text=Health%20literacy%20is%20the%20degree,Minority%20populations.)

Humanistic Care: Care characterized by a respectful and compassionate relationship among all members of the health care team and their patients. It reflects attitudes and behaviors that are sensitive to the values and the cultural and ethnic backgrounds of others. (Gold Foundation. Definition of humanism. gold-foundation.org/definition-of-humanism)

Informatics: The science of how to use data, information and knowledge to improve human health and the delivery of health care services. (AMIA. Informatics: Research and Practice. amia.org/about-amia/why-informatics/informatics-research-and-practice#:~:text=Informatics%20is%20the%20science%20of,component%20of%20the%20association's%20work.)

Intraprofessional: Two or more oral health professions learning and providing patient care together, in a fashion that promotes lifelong collaboration. (American Dental Education Association. Intraprofessional Dental Education: Where Do We Stand? adea.org/intraprofessional_education.aspx.)

Interprofessional Team (Collaborative Practice): When multiple health workers from different professional backgrounds work together with patients, families, careers and communities to deliver the highest quality of care. (American Dental Education Association. Interprofessional Education and Practice—An Imperative to Optimize and Advance Oral and Overall Health. adea.org/policy/publications/ipe.)

Intervention: Dental hygiene services rendered to clients as identified in the dental hygiene care plan. These services may be clinical, educational or health promotion-related. (American Dental Hygienists' Association. ADHA Policy Manual, June 2020. adha.org/sites/default/files/ADHA_Policy_Manual.pdf.)

Learning Platforms: An integrated set of interactive online services that provide the educator and learner with information, tools and resources to support and enhance educational delivery and management. (Hill P. What is a learning platform? May 4, 2012. eliterate.us/what-is-a-learning-platform.)

Outcome: A result derived from a specific intervention or treatment. (American Dental Hygienists' Association. Standards for Clinical Dental Hygiene Practice, 2016. adha.org/practice.)

Person-centered Care: Places the person in the center of the care rather than the disease. Person-centered care respects the patient's values, preferences, needs and beliefs, emphasizing the individual's freedom of choice while promoting emotional and physical comfort. (Waliji MF, Karimbux NY, Spielman AI. Person-centered care: opportunities and challenges for academic dental institutions and programs. *J Dent Educ*;2017;81(11):1265-72. <https://doi.org/10.21815/JDE.017.084>.)

Quality Assurance: The systematic monitoring and evaluation of the various aspects of a project, service or facility to ensure that standards of quality are being met. (Adapted from Merriam Webster [merriam-webster.com/dictionary/quality%20assurance](https://www.merriam-webster.com/dictionary/quality%20assurance) and Zwemer T. *Boucher's Clinical Dental Terminology: A Glossary of Accepted Terms in all Disciplines of Dentistry*. Mosby-Year Book. 1993.)

Referral: An act of referring someone or something for consultation, review or further action; the directing of a patient to a medical specialist by a primary care physician; or a person whose case has been referred to a specialist doctor or a professional body. (Oxford Languages. [google.com/search?q=referral&rlz=1C1GCEU_enUS821US821&oq=Referral+&ags=chrome.0.0i271j69i57j69i59j0i433i512i4j0i512j0i433i512j0i512.2113j0j7&sourceid=chrome&ie=UTF-8](https://www.google.com/search?q=referral&rlz=1C1GCEU_enUS821US821&oq=Referral+&ags=chrome.0.0i271j69i57j69i59j0i433i512i4j0i512j0i433i512j0i512.2113j0j7&sourceid=chrome&ie=UTF-8).)

Reflection/Reflective (Reflect): A process of exploring and examining ourselves, our perspectives, attributes, experiences and actions/interactions. It helps us gain insight to move forward and merges the mental capabilities of critical thinking and problem-solving, resulting in higher level, clinical decision-making skills. (Adapted from <https://www.cla.purdue.edu/academic/english/icap/assessment/purpose.html#:~:text=Reflection%E2%80%94%94%20a%20process%20where%20students,that%20are%20packed%20with%20content>.)

Risk Factor: An increase in the chance of developing a disease. (Adapted from National Cancer Institute. *Dictionary of Cancer Terms*. [cancer.gov/publications/dictionaries/cancer-terms/def/risk-factor](https://www.cancer.gov/publications/dictionaries/cancer-terms/def/risk-factor).)

Service-based Activities: These include any activity that involves providing professional services or services of a specific expertise to people who may not otherwise have access to those services. They are performed within the community setting. (Adapted from American Student Dental Association. Community outreach and community service. [asdanet.org/index/programs-events/community-outreach](https://www.asdanet.org/index/programs-events/community-outreach) and Burch S. Strategies for service-learnig assessment in dental hygiene. *J Dent Hyg*. 2013;87(5):265-70. [jdh.adha.org/content/87/5/265](https://www.jdh.adha.org/content/87/5/265).)

Social Determinants of Health (SDOH): The conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality-of-life outcomes and risks. (U.S. Department of Health and Human Services. Office of Disease Prevention and Health Promotion. [health.gov/healthypeople/priority-areas/social-determinants-health](https://www.health.gov/healthypeople/priority-areas/social-determinants-health).)

Sustainable Practice (System): A system that improves, maintains or restores health, while minimizing negative impacts on the environment and leveraging opportunities to restore and improve it, to the benefit of the health and well-being of current and future generations. (World Health Organization. Sustainability Practices at WHO. [who.int/about/policies/sustainability](https://www.who.int/about/policies/sustainability).)

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Resources

- American College of Prosthodontists. Digital Dentistry Curriculum Access. [prosthodontics.org/prosthodontics.org/acp-publications/digital-dentistry-curriculum-access](https://prosthodontics.org/acp-publications/digital-dentistry-curriculum-access).
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- American Dental Hygienists' Association. ADHA Emphasizes Critical Role of Hygienist in Dental Hygiene Diagnosis. Chicago: ADHA, 2016. adha.org/resources-docs/ADHA_Diagnosis_WhitePaper_Press_Release.pdf.
- American Dental Hygienists' Association. Standards for Clinical Dental Hygiene Practice. Revised 2016. adha.org/resources-docs/2016-Revised-Standards-for-Clinical-Dental-Hygiene-Practice.pdf.
- American Dental Hygienists' Association. Transforming Dental Hygiene Education and the Profession for the 21st Century. Chicago: ADHA, 2016. adha.org/resources-docs/Transforming_Dental_Hygiene_Education.pdf.
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