**TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING**

**CHAPTER 5 DENTISTRY (DENTISTS, DENTAL HYGIENISTS, ETC.)**

**PART 61 DENTAL THERAPISTS, LICENSURE AND CERTIFICATION**

**16.5.61.1** **ISSUING AGENCY:** New Mexico Board of Dental Health Care.

[16.5.61.1 NMAC - N, xx/xx/2020]

**16.5.61.2 SCOPE:** The provisions of 16.5.61 NMAC apply to all applicants for licensure as a dental therapist.

[16.5.61.2 NMAC - N, xx/xx/2020]

**16.5.61.3 STATUTORY AUTHORITY:** 16.5.61 NMAC is promulgated pursuant to the Dental Health Care Act, Section 61-5A-13.1-3 NMSA 1978 .

[16.5.61.3 NMAC - N, xx/xx/2020]

**16.5.61.4 DURATION:** Permanent.

[16.5.61.4 NMAC - N, xx/xx/2020]

**16.5.61.5 EFFECTIVE DATE:** xx/xx/2020, unless a later date is cited at the end of a section.

[16.5.61.5 NMAC - N, xx/xx/2020]

**16.5.61.6 OBJECTIVE:** To establish the requirements for application for licensure as a dental therapist.

[16.5.61.6 NMAC - N, xx/xx/2020]

**16.5.61.7 DEFINITIONS:** “dental therapy post-graduate clinical experience” means a clinical education program as defined in Section 61-5A-13.1-3 NMSA 1978 to provide advanced training for dental therapists in patient treatment and management.

[16.5.61.7 NMAC - N, xx/xx/2020]

**16.5.61.8 PREREQUISITE REQUIREMENTS FOR DENTAL THERAPIST LICENSE:** Each applicant for a license to practice dental therapy must possess the following qualifications:

**A.** licensed as a dental hygienist in New Mexico;

**B.** graduated and received a degree from an accredited dental therapy education program as defined in Section 61-5A-13.1 NMSA 1978;

**C.** passed a clinical examination approved by the board; the results of the clinical examination are valid in New Mexico for a period not to exceed five years:

**(1)** the applicant shall apply directly to a board accepted examining agent for examination, and

**(2)** results of the clinical examination must be sent directly to the board office.

[16.5.61.8 NMAC - N, xx/xx/2020]

**16.5.61.9 DOCUMENTATION REQUIREMENTS:** Each applicant for a license must submit the required fees and following documentation:

**A.** completed application signed and notarized with a passport quality photo taken within six months; applications are valid for one year from the date of receipt;

**B.** official transcripts or an original letter on letterhead with an embossed seal verifying successfully passing all required courses from the dental therapy education program, to be sent directly to the board office from the accredited program;

**C.** a copy of clinical examination score card;

**D.** proof of having taken a course in infection control technique or graduation from a dental therapy program within the past 12 months;

**E.** proof of current basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification accepted by the American heart association, the American red cross; or the American safety and health institute (ASHI); cannot be a self-study course;

**F.** the board may deny, stipulate, or otherwise limit a license if it is determined the applicant is guilty of violating any of the provisions of the act, the Uniform Licensing Act, the Impaired Dentists and Hygienists Act, these rules, or if it is determined that the applicant poses a threat to the welfare of the public;

**G.** verification of licensure in all states where the applicant holds or has held a license in good standing to practice dental therapy, or other health care profession; verification must be sent directly to the office from the other state(s) board, must include a seal, and must attest to the status, issue date, license number, and other information contained on the form.

[16.5.61.9 NMAC - N, xx/xx/2020]

**16.5.61.10 LICENSURE PROCEDURE:** Upon receipt of a completed application, including all required documentation and fees, the secretary-treasurer or the delegate of the board will review and may approve the application. The board shall formally accept the approval of the application at the next scheduled meeting.

**A.** Initial dental therapist licenses are issued for a period not to exceed three years, as defined in Section of 16.5.63.8 NMAC.

**B.** Any application that cannot be approved by the delegate of the board will be reviewed by the entire board at the next scheduled meeting.

[16.5.61.10 NMAC - N, xx/xx/2020]

**16.5.61.11 DENTAL THERAPY POST-GRADUATE CLINICAL EXPERIENCE:** A dental therapist shall qualify to perform the procedures as stated in Section 61-5A-13.2 NMSA 1978 under general supervision, upon successful completion of a dental post-graduate clinical experience and submission to the board office of the following documentation .

**A.** a current active license in good standing to practice dental therapy in New Mexico;

**B.** proof of successful completion from a dental therapy post-graduate clinical experience which;

**(1)** meets criteria in 16.xx.xx and has been approved by the board of dental health care;

**(2)** is sanctioned by a regionally accredited educational institution with a program

accredited by the commission on dental accreditation; and

**(3)** provides advanced training:

**(a)** of at least 2000 hours following completion of a CODA accredited

dental therapy education program: or

**(b)** of at least 1500 hours following completion of a CODA accredited

dental therapy education program and applicant can document active practice experience as a dental hygienist for five years or more.

**C**. There is no fee associated for filing this documentation.

**D.** The board will re-issue the dental therapy license with a designation of the completion of the post graduate clinical experience.

[16.5.61.11 NMAC - N, xx/xx/2020]

**HISTORY OF 16.5.61 NMAC: [RESERVED]**