Orthodontic Procedures Policy

Council Approved: November 2024

Public Interest Statement

The Orthodontic Procedures Policy ensures that dental hygienists have the necessary education and skills to perform this additional authorized practice, thereby enhancing public safety and confidence in the profession.

Purpose

Pursuant to section 23 5(c) of the *Dental Disciplines Act*, dental hygienists can perform orthodontic procedures consistent with an approved education program in dental hygiene.

Pursuant to the provincial dental hygiene competencies a dental hygienist may perform orthodontic procedures including fabricating and/or placing orthodontic appliances (in collaboration with dentists, orthodontists, etc. and consistent with approved orthodontic training)

Scope of this Policy

This policy is to provide clarity on the (1) interpretation of legislative requirements in performing orthodontic procedures, (2) authorization to perform orthodontic procedures, (3) approved orthodontic education programs.

Policy

- 1. Interpretations of Legislative Requirements
 - a. Supervision of performing orthodontic procedures is not required however, as noted above, the procedures must be provided in collaboration with a dentist or orthodontist. A dentist or orthodontist may determine the degree of supervision for performing orthodontic procedures, if any.
 - b. Permitted clinical orthodontic procedures include:
 - placement and removal of separators
 - preliminary placement of fixed appliances prior to adjustment by a dentist orthodontist
 - preliminary placement of removable appliances prior to adjustment by a dentist or orthodontist
 - preliminary fitting of bands
 - direct bonding of attachments following prescription of the dentist and prior to final check by the dentist or orthodontist
 - direct or indirect bonding of brackets following the prescription of the dentist and prior to final check by the dentist orthodontist
 - cementation of bands and appliances prior to final check by the dentist or orthodontist
 - placement and removal of archwires which have been formed by a dentist or orthodontist
 - placement and removal of archwire accessories and ligatures
 - removal of bands and bonded metal attachments
 - c. Sufficient documentation must demonstrate that the dentist or orthodontist has delegated the performance of permitted orthodontic procedures and the dental hygienist is following the treatment plan determined by the dentist or orthodontist.
- 2. Authorization to Perform Orthodontic Procedures is based on a combination of:
 - a. Appropriate education related to the performance of this authorized practice;
 - i. Appropriate education is the acquisition of the competencies (knowledge, skills, and judgment) required to perform orthodontic procedures at an entry-level standard of

competence.

- ii. Appropriate education provides sufficient theoretical foundation and clinical experience for the practitioner to practice in a competent, legal, ethical and professional manner.
- b. The length of time that has lapsed since an applicant has successfully completed their education related to orthodontic procedures; and
- c. The length of time passed since the applicant last performed orthodontic procedures on a regular basis.
- 3. Approved Orthodontic Programs

Course Competencies in the performance of orthodontic procedures must meet the criteria outlined in Appendix A in order for the CDHS to determine if it can be deemed appropriate education.

Registrant Responsibilities & Compliance

- Registrants must apply to the CDHS to have the orthodontic authorized practice added to their licensure.
- Registrants must not perform orthodontic procedures of a permanent nature until they have been notified in writing that they have been authorized by the CDHS.
- Registrants must remain current in their competence of performing orthodontic procedures.

Non-Compliance

• Performing orthodontic procedures without obtaining authorization from the CDHS is considered unlawful and may result in disciplinary or legal action.

	Theoretical course content must include:	Pre-clinical and clinical course content must include:
1.	Classifications of malocclusion	1. Taking intra-oral and extra-oral photographs
2.	Common etiologies of malocclusion	2. Patient/ Client placement for exposure of extra-oral
3.	Goals of orthodontics and indications for treatment	radiographs (hand/wrist, cephalometric, panoramic)
4.	The four stages of comprehensive treatment	3. Placement and removal of separators
5.	Treatment mechanics:	4. Placement and removal of oral isolation devices in
	a. Mechanics of orthodontic/ orthopaedic/	preparation for direct bonding procedures
	surgical movement	5. Manipulation and application of materials for bonding
	b. General mechanics of appliance action	and banding procedures
	c. Fixed appliances and their mechanics of	6. Cement bands and appliances prior to final check by
	action	the dentist
	d. Band and bond structure	7. Removal of banding cement and bonding adhesive
	e. Properties of archwires	with hand or power instruments
	f. Fixed and removable appliances and their	8. Preparation of the teeth for banding and direct
	mechanics of action	bonding procedures
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6.	Diagnostic records: a. Orthodontic evaluation	 Placement and indirect or direct bonding of ortho brackate and bondable attachments. Checking
		brackets and bondable attachments. Checking
	b. Photographs	integrity of bands, bonds, attachments, etc. 10. Placement and removal of archwires which have beer
	c. Radiographs	
	d. Orthodontic impression taking	formed by a dentist
	e. Centric occlusion wax bite	11. Trim and/or bend distal ends of archwires
	f. Model trimming	12. Placement and removal of archwire accessories and
	g. Bitefork and facebow registration	ligatures: individual or chain elastomeric ligatures, wir
_	h. Mounting articulated models	ligatures (separate and continuous) and self-ligation
7.	Clinical procedures:	mechanisms
	a. Separation	13. Application of non-medicinal material such as wax or
	b. Banding and debanding	lip bumper to reduce ortho component irritation
	c. Bonding and debonding	14. Removal of bands and bonded metal attachments,
	d. Archwires	utilizing hand instruments
	e. Ligatures	15. Provide patient/ client instruction regarding:
	f. Self-ligating brackets	a. the care and use of orthodontic appliances
	g. Power products and accessories	b. oral hygiene and disease control
	h. Checking appliance integrity and initial try-	c. elastic placement
	in of appliances including:	d. proper eating habits and patient/ client
	i. Determining the preliminary fit of	cooperation
	removable appliances prior to	e. orthodontic emergencies
	final fitting and/or adjustment by	16. Determining the preliminary fit of removable
	a dentist	appliances prior to final fitting and/or adjustment by
	ii. Determining the preliminary fit	dentist
	of bands prior to final fitting	17. Determining the preliminary fit of bands prior to final
	and/or cementation by a dentist	fitting by a dentist and cementation by a dentist or
	iii. Determining the preliminary fit of	RDH
	fixed appliances prior to	18. Determining the preliminary fit of fixed appliances
	adjustment and cementation by	prior to adjustment and cementation by a dentist
	a dentist	
8.	Patient/ Client instruction:	
	a. The care and use of orthodontic appliances	
	b. Oral hygiene and disease control	
	c. Elastic placement	
	d. Proper eating habits and patient/ client	
	cooperation	

	e. Orthodontic emergencies		
9.	Infection prevention and control in orthodontics		
Addition	al requirements:		
1.	There must be evidence that course participants receive sufficient experience in both the pre-clinical and clinical settings to		
	attain competence. The clinical session must be a minimum of 24 hours including instruction, practice, and evaluation.		
2.	The orthodontic course must be delivered as a component of an accredited dental hygiene program or as a continuing		
	education course delivered by:		
	a. An accredited faculty of dentistry,		
	b. An accredited dental hygiene program, or		
	c. An accredited dental assisting program.		
3.	The orthodontic program must be taught by oral health practitioners who are registered/licensed in good standing and		
	authorized to provide orthodontic procedures in the jurisdiction where they hold registration/licensure. In accordance with		
	the Dental Disciplines Act, persons teaching clinical courses in Saskatchewan must be registered with the appropriate		
	regulatory authority (e.g., CDHS, CDSS).		
4.	The orthodontic program must be held in a properly equipped dental environment which will permit the course		
	participants to use the techniques being taught to achieve an acceptable entry-level of competence for the performance		
	of orthodontic procedures.		
5.	There must be evidence of appropriate evaluation in both the theory (written examination) and clinical components.		

