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**DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF DENTAL EXAMINERS**

**NOTICE OF INTENT TO ACT UPON A REGULATION:
PUBLIC HEARING NOTICE FOR THE ADOPTION OF
PROPOSED PERMANENT REGULATIONS BY THE NEVADA STATE
BOARD OF DENTAL EXAMINERS**

The Nevada State Board of Dental Examiners will hold a public hearing for the purpose of adopting a regulation on Friday, May 22, 2026, at 9:30 am Nevada State Business Center, 3300 W Sahara Ave, Suite 400, Las Vegas, NV 89102. The purpose of the hearing is to receive comments from all interested persons regarding the adoption of regulations that pertain to chapter 631 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.0603:

1. The need for and the purpose of the proposed regulation or amendment.

The purpose of regulation is to clarify the supervising and authorizing roles of the dental team.

2. If the proposed regulation is a temporary regulation, the terms or the substance of the proposed regulation to be adopted, amended or repealed, or a description of the subjects and issues involved.

Not applicable; this is not a temporary regulation.

3. If the proposed regulation is a permanent regulation, a statement explaining how to obtain the approved or revised text of the proposed regulation.

The proposed regulation is available on the website of the Nevada State Board of Dental Examiners; it is also available at the office of the Nevada State Board of Dental Examiners located at 2651 N. Green Valley Parkway, Suite 104, Henderson, Nevada 89014. It will also be sent to the State Library, Archives and Public Records, 100 Stewart Street, Carson City, Nevada, 89701.

4. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately and in each case must include: (a) both adverse and beneficial effects; and (b) both immediate and long-term effects.

Reported adverse effects included potential increased liability costs.

Reported beneficial effects included increased service capacity and improved appointment availability.

There would be no economic effect on the public. There is no adverse effect for the public.

5. The methods used by the agency in determining the impact on a small business.

The Nevada State Board of Dental Examiners emailed all licensed dental professionals in the State of Nevada requesting their feedback on the proposed regulations. The Board provided an electronic form to collect the feedback on April 2, 2026, and closed the form on April 24, 2026.

6. The estimated cost to the agency for enforcement of the proposed regulation.

No additional costs are anticipated.

7. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

There is no federal agency with dental profession licensing oversight, and thus no federal and state conflicts of law exist.

8. If the regulation is required pursuant to federal law, a citation and description of the federal law.

This regulation is not required by federal law.

9. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

Not applicable; federal law does not govern state professional occupational licensing.

10. Whether the proposed regulation establishes a new fee or increases an existing fee.

No fee is currently assigned to the permit.

11. If the proposed regulation is a temporary regulation, each address at which the text of the regulation may be inspected and copied.)

Not applicable; this is not a temporary regulation.

Persons wishing to comment upon the action of the Nevada State Board of Dental Examiners may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in written form by completing the [Public Comment Submission Form](#) or by emailing nsbde@dental.nv.gov. Written and online form submissions must be received by the Nevada State Board

of Dental Examiners on or before noon on Thursday, May 21, 2026. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Nevada State Board of Dental Examiners may proceed immediately to act upon any written submissions.

A copy of this notice and the regulation to be Adopted will be on file at the State Library, Archives and Public Records, 100 Stewart Street, Carson City, Nevada, for inspection by members of the public during business hours. Additional copies of the notice and the regulation to be Adopted will be available at the Nevada State Board of Dental Examiners for inspection and copying by members of the public during business hours. This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations, which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at <http://www.leg.state.nv.us/>. Copies of this notice and the proposed regulation will also be mailed to members of the public at no charge upon request.

Upon adoption of any regulation, the agency, if requested to do so by an interested person, either before adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption and incorporate therein its reason for overruling the consideration urged against its adoption.

This Notice of Intent to Act and Public Hearing has been sent to/posted at the following locations:

- 1) Nevada State Board of Dental Examiners, 2651 N. Green Valley Parkway, Henderson, Nevada 89014 - www.dental.nv.gov
- 2) Legislative Counsel Bureau - www.leg.state.nv.us
- 3) State Library and Archives - www.nsla.nv.gov
- 4) Green Valley Library, 2797 N. Green Valley Parkway, Henderson, Nevada 89014

NAC 631.210 Dental hygienists: Authorization to perform certain services; referral of patient to authorizing dentist for certain purposes. [NRS 631.030; 631.215; 631.311; 631.313]

1. A dentist who is licensed in this State may authorize a dental hygienist in his or her employ to perform the following acts before a patient is examined by the dentist, ***without the supervision of a dentist:***

(a) Expose radiographs.

(b) Conduct an assessment of the oral health of the patient through medical and dental histories, radiographs, indices, risk assessments and intraoral and extraoral procedures that analyze and identify the oral health needs and problems of the patient.

(c) After conducting an assessment pursuant to paragraph (b), develop a dental hygiene care plan to address the oral health needs and problems of the patient.

(d) Take impressions for the preparation of diagnostic models.

↳ The dental hygienist must obtain authorization from the licensed dentist of the patient on whom the services authorized pursuant to this subsection are to be performed.

2. A dentist who is licensed in this State may, ***at their discretion***, authorize a dental hygienist in his or her employ to ***perform any duty, service, and/or task that is within the scope of their training and experience and within the definition of dental hygiene at NRS 631.030, without the supervision of a dentist, including:***

(a) Remove stains, deposits and accretions, including dental calculus.

(b) Smooth the natural and restored surface of a tooth by using the procedures and instruments commonly used in oral prophylaxis, except that an abrasive stone, disc or bur may be used only to polish a restoration. As used in this paragraph, “oral prophylaxis” means the preventive dental procedure of scaling and polishing which includes the removal of calculus, soft deposits, plaques and stains and the smoothing of unattached tooth surfaces in order to create an environment in which hard and soft tissues can be maintained in good health by the patient.

(c) Provide dental hygiene care that includes:

(1) Assessment of the oral health of patients through medical and dental histories, radiographs, indices, risk assessments and intraoral and

extraoral procedures that analyze and identify the oral health needs and problems of patients.

(2) Implementation of a dental hygiene care plan to address the oral health needs and problems of patients described in subparagraph (1).

(3) Evaluation of oral and periodontal health after the implementation of the dental hygiene care plan described in subparagraph (2) in order to identify the subsequent treatment, continued care and referral needs of the patient.

(d) Take the following types of impressions:

(1) Those used for the preparation of diagnostic models;

(2) Those used for the fabrication of temporary crowns or bridges; and

(3) Those used for the fabrication of temporary removable appliances, provided no missing teeth are replaced by those appliances.

(e) Perform subgingival curettage.

(f) Remove sutures.

(g) Place and remove a periodontal pack.

(h) Remove excess cement from cemented restorations and orthodontic appliances. A dental hygienist may not use a rotary cutting instrument to remove excess cement from restorations or orthodontic appliances.

(i) Train and instruct persons in the techniques of oral hygiene and preventive procedures.

(j) Recement and repair temporary crowns and bridges.

(k) Recement permanent crowns and bridges with nonpermanent material as a palliative treatment.

(l) Place a temporary restoration with nonpermanent material as a palliative treatment.

(m) Administer local intraoral chemotherapeutic agents in any form except aerosol, including, but not limited to:

(1) Antimicrobial agents;

(2) Fluoride preparations;

(3) Topical antibiotics;

(4) Topical anesthetics *not otherwise considered minimal sedation*

under the definition of NRS 631.078; and

(5) Topical desensitizing agents.

(n) Apply pit and fissure sealant to the dentition for the prevention of decay.

(o) Place and secure orthodontic ligatures.

(p) Fabricate and place temporary crowns and bridges.

(q) Fit orthodontic bands and prepare teeth for orthodontic bands if the bands are cemented or bonded, or both, into the patient's mouth by the dentist who authorized the dental hygienist to perform this procedure.

(r) Perform nonsurgical cytologic testing.

- (s) Apply and activate agents for bleaching teeth with a light source.
- (t) Use a laser that has been cleared by the Food and Drug Administration to perform intrasulcular periodontal procedures or tooth whitening procedures if:
 - (1) The use of such a laser for those purposes is within the scope of the education, experience and training of the dental hygienist;
 - (2) Before operating the laser, the dental hygienist has provided proof to the **authorizing** dentist that the dental hygienist has successfully completed a course in laser proficiency that:
 - (I) Is at least 6 hours in length; and
 - (II) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#); and
 - (3) The **authorizing** dentist has successfully completed a course in laser proficiency that:
 - (I) Is at least 6 hours in length; and
 - (II) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#).

(u) any other task the dentist deems delegable consistent with the limitations of subsection 3 of NRS 631.313 for which a hygienist has been educated under their dental hygiene degree program.

↪ If an employing dentist does not use their discretion to authorize performance of these tasks outside their supervision, these tasks may still be performed by the dental hygienist under the dentist's supervision.

3. (a) It is presumed without the need of a separate written agreement that an employing dentist authorizes a dental hygienist in this employment to complete all the tasks set forth in subsection 1 and paragraphs (a) to (u) of subsection 2, so long as each individual patients clinical records clearly indicate when a dental hygienist performed one or more of the authorized tasks.

(b) If an employing dentist ~~may~~ elects to authorize some of the tasks set forth in subsection 1 and paragraphs (a) to (u) of subsection 2 and simultaneously elects to supervise some of the tasks set forth in subsection 1 and paragraphs (a) to (u), any distinction in which tasks are authorized versus which require dentist supervision must be set forth in a document provided to the dental hygienist and maintained by the dentist for the duration of the hygienist's employment and for 5 years thereafter. There must also be documentation demonstrating the hygienist was knowingly apprised of any authorization limitations.

(c) An employing dentist may elect to authorize any of the tasks set forth in subsection 1 and paragraphs (a) to (u) of subsection 2, but with conditions such as, but not limited to, when the dentist must be called to evaluate or assist or limitations

on authorization based on level of patient periodontic disease presentation or health comorbidities. Any authorizations subject to conditions must be set forth in a document provided to the dental hygienist and maintained by the dentist for the duration of the hygienist's employment and for 5 years thereafter. There must also be documentation demonstrating the hygienist was knowingly apprised of any authorization limitations.

(d) For any task the dentist authorizes instead of supervises, a dental hygienist should obtain their own malpractice insurance as vicariously liability principals may be affected by authorization in lieu of supervision.

4. Any tasks considered restorative dental hygiene within the meaning of NRS 631.101 cannot be performed with authorization alone in the absence of a dentist's supervision, unless the hygienist has a special endorsement to practice restorative dental hygiene. If the hygienist has a special endorsement to practice restorative dental hygiene, he or she may do with the dentist's documented authorization.

5. Before performing any of the services set forth in this subsection, the dental hygienist must obtain authorization from the licensed dentist of the patient on whom the services are to be performed, and the patient must have been examined by that dentist not more than 18 months before the services are to be performed. After performing any of the services set forth in this subsection, the dental hygienist shall refer the patient to the authorizing dentist for follow-up care or any necessary additional procedures that the dental hygienist is not authorized to perform.

6. ~~If a dentist who is licensed in this State has in his or her employment and under his or her supervision a dental hygienist who has:~~

~~—(a) Successfully completed a course of continuing education in the administering of local anesthetics or nitrous oxide-oxygen analgesia, or both, which has been approved by the Board; or~~

~~—(b) Graduated from an accredited program of dental hygiene which includes the administering of local anesthetics or nitrous oxide-oxygen analgesia, or both, in its curriculum, obtained a minimal anesthesia permit consistent with paragraph (d) of subsection 1 of NAC 631.2213,~~

~~↳ the dentist may authorize the dental hygienist to the *in the administration of* local anesthetics or nitrous oxide-oxygen analgesia, or both, *at a site-permitted dental office or facility, consistent with subsection 2 of NAC 631.2213.* as appropriate, if the dental hygienist has received from the Board a certificate or minimal sedation permit certifying the hygienist for this level of administration. The dental hygienist must obtain the authorization from the licensed dentist of the patient on whom the services are to be performed. (omitted and all moved to anesthesia regulation; see (10) below)~~

7. *Not including topical chemotherapeutic agents that can be administered by a dental hygienist with a dentist's authorization, a dental hygienist in a dental office or health-care facility may, with either written dentist authorization or dentist supervision at the dentist's discretion, administer non-topical local intraoral chemotherapeutic agents to treat periodontal pockets and gingivitis. and, if he or she has complied with paragraph (a) or (b) of subsection 5 and may administer local anesthetics or nitrous oxide-oxygen analgesia, or both, as appropriate, if he or she first:*

~~— (a) Obtains written authorization from the licensed dentist of the patient to whom the local anesthetics, nitrous oxide-oxygen analgesia or local intraoral chemotherapeutic agents are to be administered.; and~~

~~— (b) Submits to the Secretary-Treasurer a written confirmation from the director of the health care facility that~~

(a) The dental office of facility where the local chemotherapeutic agent will be provided must have the necessary emergency supplies, equipment, and auxiliary personnel to safely provide local intraoral chemotherapeutic agents are administered.

(b) A dental hygienist may also provide local intraoral chemotherapeutic agents in accordance with facility rules and policies at a medical facility as defined in NRS 449.0151.

8. The Board may authorize a dental hygienist to perform the services set forth in subsection 1 and paragraphs (a) to ***(u)***, inclusive, of subsection 2 without ***either*** supervision by ***or the authorization of*** a dentist ~~and without authorization from the~~ licensed dentist of the patient on whom the services are to be performed, at a health facility, a school or a place in this State approved by the Board after the Board:

(a) Issues a public health special endorsement of the dental hygienist's license consistent with subsections 1 and 2 of NRS 631.287;

(b) the specially endorsed dental hygienist identifies the public health dental hygiene program with which they will be employed or affiliated; and

(c) Approves the application of a public health dental hygiene program that includes the treatment protocols of the program to submitted by the dental hygienist, which includes and an explanation of the methods that the dental hygienists employed by or affiliated with the public health hygiene program will use to:

(1) Treat patients; and

(2) Refer patients to a dentist for:

(I) Follow-up care;

(II) Diagnostic services; and

(III) Any service that the dental hygienist is not authorized to perform.

9. The Board may revoke the authorization described in subsection 6 if the:

- (a) Dental hygienist fails to renew his or her license or it is cancelled, suspended or revoked;
 - (b) Board receives a complaint filed against the dental hygienist;
 - (c) Dental hygienist commits an act which constitutes a cause for disciplinary action; or
 - (d) Dental hygienist violates any provision of this chapter or [chapter 631](#) of NRS.
- ↪ Nothing in this subsection prohibits a dental hygienist from reapplying for authorization to perform the services described in subsection 6 if the Board revokes the authorization pursuant to this subsection.

10. As used in this section:

- (a) “Health care facility” has the meaning ascribed to it in [NRS 162A.740](#).
- (b) “Health facility” has the meaning ascribed to it in subsection 6 of [NRS 449.260](#).
- (c) “School” means an elementary, secondary or postsecondary educational facility, public or private, in this State.
- (d) “Public health dental hygiene program” has the meaning ascribed to “public health program” as defined in paragraph (b) of subsection 5 of NRS 631.34583.***
- (e) All requirements and limitations related to a dental hygienist providing minimal sedation, including but not limited to, local sedation or nitrous oxide, are referred to in paragraph (b) of subsection 2 of NRS 631.215, NRS 631.265, and subsections 2 and 4 of NAC 631.2213***