

## Primary Dental Health Aide I/II Preceptorship Checklist

PDHA NAME: \_\_\_\_\_ CLINIC: \_\_\_\_\_ DATE: \_\_\_\_\_

Certification Seeking: ☐ PDHA I    ☐ PDHA II

**Procedures/Skillsets to complete:**

**Required for all:** ☐ Fluoride Application    ☐ OHI    ☐ Diet Education

**Optional Skillsets for PDHA II:**

- ☐ Dental Radiology
- ☐ Sealants
- ☐ Dental Prophylaxis
- ☐ Atraumatic Restorative Treatment (ART)

**Purpose:**

This checklist is to record the number of procedures performed by a PDHA in order to verify the fulfillment of the minimum requirements (for certification of skillset being performed) set forth in the Community Health Aide Program Certification Board Standards and Procedures. Each procedure must be completed under the direct supervision of an appropriate supervisor. A dental hygienist can assist with direct supervision of fluoride application, OHI, diet education, dental prophylaxis, sealant and dental radiology procedures. A dentist, DHAT, or DHATP can supervise all PDHA procedures.

**Directions:** Preceptor will directly observe and determine if the PDHA has performed the procedure satisfactorily (S) or unsatisfactorily (U). If a "U" is given for the first try, the PDHA may attempt procedure as many times as needed. The preceptor should initial the line item, once the skill is completed successfully. SATISFACTORY PERFORMANCE should only be initialed and dated when the PDHA can perform the procedure without assistance; however, training material can be used for reference. Satisfactory performance means that the PDHA demonstrated the procedure well enough to be entrusted to do it in a daily work situation. This tally sheet may be signed off at the clinic by an authorized supervising provider. When the checklist is complete, it should be filed by the Tribal Health Organization in the PDHA's personnel records.

| PDHA I/II PROCEDURES         | Reference Number | S/U | Comments | Preceptor Initials | Date |
|------------------------------|------------------|-----|----------|--------------------|------|
| Topical Fluoride application |                  |     |          |                    |      |
| Topical Fluoride application |                  |     |          |                    |      |
| Topical Fluoride application |                  |     |          |                    |      |
| Topical Fluoride application |                  |     |          |                    |      |
| Topical Fluoride application |                  |     |          |                    |      |
| Topical Fluoride application |                  |     |          |                    |      |



|                              |  |  |  |  |  |
|------------------------------|--|--|--|--|--|
| Diet Education adult patient |  |  |  |  |  |
| Diet Education adult patient |  |  |  |  |  |
| Diet Education adult patient |  |  |  |  |  |
| Diet Education adult patient |  |  |  |  |  |
| Diet Education adult patient |  |  |  |  |  |
| Diet Education               |  |  |  |  |  |
| Diet Education               |  |  |  |  |  |
| Diet Education               |  |  |  |  |  |
| Diet Education               |  |  |  |  |  |
| Diet Education               |  |  |  |  |  |
| 40 hours of relevant work    |  |  |  |  |  |

| PDHA II SEALANT SKILLSET          | Reference Number | S/U | Comments | Preceptor Initials | Date |
|-----------------------------------|------------------|-----|----------|--------------------|------|
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant – molar tooth             |                  |     |          |                    |      |
| Sealant on child < 7 years of age |                  |     |          |                    |      |
| Sealant on child < 7 years of age |                  |     |          |                    |      |
| Sealant on child < 7 years of age |                  |     |          |                    |      |
| Sealant on child < 7 years of age |                  |     |          |                    |      |
| Sealant on child < 7 years of age |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |
| Sealant on second molar           |                  |     |          |                    |      |

| PDHA II DENTAL PROYPHYLAXIS SKILLSET                                 | Reference Number | S/U | Comments | Preceptor Initials | Date |
|----------------------------------------------------------------------|------------------|-----|----------|--------------------|------|
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Child Dental Prophylaxis                                             |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Adult Dental Prophylaxis with coronal or clinically visible calculus |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |
| Dental Prophylaxis                                                   |                  |     |          |                    |      |

[illegible]

[illegible]