



Finger Lakes Dental Care

Hygienist

*Empowering a dedicated team to promote healthy lifestyles
in our communities. We are changing the way people feel
about going to the dentist.*

Dental Hygienist Job Description

Purpose: To provide the patient with a thorough prophylaxis and to determine and treat the periodontal condition of the patient. To be a partner with the Doctor to provide the highest level of direct clinical care. The Dental Hygienist will constantly educate, develop rapport with patients and will become a patient ally in the practice. Our Hygienists will abide by our stands of care and adhere to our Core Values.

As a Hygienist, the care you provide to our patients is paramount. You are a very trusted provider for our practice. Your role is crucial for the retention of patients and the success that our practice has.

Our Ideal Hygienist is:

- On Time
- Organized
- Helpful
- Sincere
- Great with patient education
- Helps with sterilization
- Thorough and detail oriented
- Respectful of the patient's and Doctor's time
- Does post-op calls
- Helps patients feel comfortable and confident with their dental care
- Passionate about their job
- Looks ahead at the schedule to keep everyone on time
- Communicates well with patients and team members
- Up to date on infection control measures
- Current with CE and educated about the most advanced Hygiene techniques
- Team Player
- Engaged
- Embraces the ever-changing use of technology
- Open to feedback
- Flexible

We expect our Dental Hygienist to embrace our Core Values, they are as follows:

WHO Can Patients Confidently Trust?

- **When in Doubt, Do the Right Thing:** When we make a mistake, we will make it right, no matter what the consequence. We will always do what is in the best interest of the patient. We will always do what is in the best interest of our team as a whole vs one individual.
- **Humility:** We will readily admit when we are wrong. We will own our mistakes and shortcomings. We will laugh at ourselves, realizing that no one is perfect. We will strive to be modest with each other, not being boastful or brag.
- **Organized & Efficient:** We will perform our responsibilities on time and correctly. We will multi-task when needed. We will ask for training and further education if we feel we cannot continually be organized & efficient in our role. We will not forget parts of our job and suggest that we don't have enough time to accomplish our job duties.
- **Customer Service:** We will treat people with kindness, dignity, courtesy, sincerity and respect. We will intently listen to our patients and deliver upon what we say we will do. We will happily treat every patient interaction and concern with efficiency, knowledge and fairness. We will be as accommodating as possible. We will not practice Customer Service like the typical medical/dental office. We will exceed expectations, doing everything we can to help our patients. We all realize we are in business to serve our patients.
- **Professional Excellence:** We will strive for continual professional and personal improvement. We will give our best every day. We will never stop learning, never stop trying to improve on every level. We will make strides to constantly improve ourselves and our ability to serve our patients. We will not settle for complacency. We will try and be better than we were yesterday. We will try and make people around us better.
- **Compassion:** We will be truly concerned about the well-being of our co-workers and our patients, always showing them respect. We will listen intently when someone confides in us. We will be sensitive and concerned for others feelings. We will show empathy with patients if they have struggles like high anxiety, lack of money and/or lack of perceived needs for treatment. We will always listen first. We will constantly try to put ourselves in the other person's shoes, trying to see the situation from their perspective.
- **Team Player:** We will always strive to be positive, dependable, helpful and making ourselves available to others. We will look past our personal position for the betterment of the team. We will seek out others to help when able. We will readily accept offered help when it will benefit the office as a whole. We will strive to be the type of person the rest of the team wants to be around. We will be as reliable and dependable as possible with missing time from work. We will be someone that can routinely be counted on to do not only our job, but to help accomplish the tasks of others.

Hygiene Patient Protocol

1. **Day Before:** The Hygienists will check to see when the last BWX and/or PAN was completed and what insurance will allow. Also check fluoride and sealant coverage for children. Outstanding treatment will also be noted at this time.
2. **Keep patient pictures updated** and matched with their account. We do this so we can greet the patient by name when they arrive. It also allows us to easily greet our patient in the waiting room.
3. **The Front Desk team** will greet the patient and check to see if all their demographic information is up to date.
4. **The Clinical team** member will greet the patient by name, introduce themselves and walk the patient back to the treatment room.
5. **Update Medical History** with the patient or review medical history updated form.
6. **Blood Pressure Check** – Ask the patient if they have any BP problems or concerns. If BP is high, gently discuss whether they are aware and suggest they see their primary care doctor in regards to monitoring. If it is the 2nd time their BP is high, generate a letter to their primary care doctor to make them aware of our concern and our advice to the patient to schedule an appt.
7. **X-Rays** – Always ask permission. BWX and Pas need to be done at least every 2 years and PAN every 5 years. See the x-ray refusal protocol.
8. **Review Outstanding Treatment.** Don't assume patients know and have decided not to complete treatment. Always ask and review outstanding treatment because people will buy what they value.
9. **Intra-Oral & Extra-Oral Cancer Screenings**
10. **Clinical Exam** – Evaluate for any possible restorative needs
11. **Perio Charting** – Educate your patient on periodontal condition and recommend treatment as needed
12. **Ask their Doctor preference.** Be aware of their non-verbal signs and their verbal response.
13. **Send Slack to everyone** including personal and dental details. Such as: lost job, marriage, divorce, tooth pain, etc.
14. **Start prophylaxis.**
15. **Patient Education** – Home care instructions, preventative services, restorative needs, periodontal needs, etc.
16. **Polish & Floss.**
17. **Send Slack** when ready for Doctor exam.

18. **After Doctor exam** record any proposed treatment in the chart. Phase treatment out, if needed.
19. **Perform any recommended preventative services.** Such as: sealants, fluoride, desensitizing treatments.
20. **Confirm all treatment is correctly linked to the appointment.** Make sure to change providers when needed.
21. **Hygienist Handoff to the Doctor:** Give some personal information, if the patient has not met the doctor before introduce the Doctor, remind the Doctor which Doctor the patient last saw, have the route sheet on the counter with any outstanding treatment to be reviewed by the Doctor, mention the outstanding treatment suggested at this time. Make sure to fill out the router with today's procedures and any new recommended treatment.
22. **Complete route slip and have Doctor sign off.**
23. **Finish prophylaxis.**
24. **Schedule** their 3, 4 or 6 month recall appointment.
25. **Give patient toothbrush goodie bag.**
26. **Collect payment,** if needed.

***** This list can be completed in any order – everything must be completed. *****

27. Hygienist handoff to Front Desk – When Treatment Is Needed

- a. Show the router to the treatment coordinator for treatment proposal.
- b. Let Front Desk team member know where the patient will be in the treatment room or the consult room.
- c. Before bringing the patient to the front desk for fees go ask them if they are ready. If they are not ready, have the patient sit in the waiting room.
- d. The Front Desk team member will walkout the patient and print out the treatment sheet with the options and fees.

28. Hygienist handoff to Front Desk – When NO Treatment Is Needed

- a. Using the patient's name, review with the Front Desk team member what was done today in LAYMEN'S TERMS
- b. If the patient has outstanding treatment, tell the Front Desk team member that they are waiting or ready to schedule so they don't ask to schedule again.
- c. Let the Front Desk team member know whether or not the next recare appointment has been scheduled.

Duties of the Hygienist include, but are not limited to:

- Review patient's chart and outstanding treatment needed, prior to daily morning huddle
- Review the need for Medical History updates.
- Adult and child prophylaxis
- Quad Scaling & Root Planning
- Periodontal Procedures:
 - Perio Maintenance Appts.
 - Use of Ultrasonic Scaler
 - Perio Charting
 - Education
- Fluoride application
- Keeping operatory stocked with necessary supplies
- Instrument cleaning, sharpening, sorting and sterilizing
- Keep up to date with and practice current infection control measures
- Clean traps in operatory once per week
- Operatory set-up and breakdown
- Oral facial exams
- Keep x-rays up to date, informing patient of our x-ray refusal protocol if refused
- Intra-oral camera and extra-oral photos taken when needed
- Place sealants
- Patient education and oral hygiene instruction
- See emergency patients as needed
- Help other hygienists stay on time as needed
- Inform doctor of suspicious lesions
- Complete all paperwork and charting as needed, in a timely fashion
- Administer anesthesia for her own patients as well as for the Doctors when needed
- Update Medical History at each and every appointment
- Update general charting
- Complete and thorough note documentation in a timely manner
- Obtain proper consent prior to SRP, sealants and nitrous
- Update patient photos as needed
- Schedule patient recall appointments
- Assist Doctor as needed
- Establish a rapport with all patients and validate treatment recommendations made by the Doctor
- Other duties as assigned by team leaders
- Check PMP online with prescribing narcotics
- Send electronic prescriptions
- Use iPad for consent documents and medical history updates
- Sorting, restocking and checking expiration dates of everything in the Hygiene closet
- Stay up-to-date with inter-office communication – Slack
- Attend bi-weekly Hygiene meetings

- Attend quarterly full team meetings
- Attend CE/meetings/lectures with consultants
- Complete the required CE for licensure and FLDC
- Complete the required CPR course
- Stay in compliance with HIPAA and OSHA regulations
- Help complete quarterly ROCKS
- Participate in monthly check ins and quarterly reviews
- Discuss basic insurance coverage with patients
- Take patient payments

Non-Negotiable Standards of Care: Dental Hygienist

1. Beginning of Day and Morning Huddle

- Arrive 30 minutes prior to first scheduled patient.
- Room set up according to standardized protocol.
- Make sure room is stocked for the day.
- Double check that routers and schedule are correct for the day.
- Be prepared for morning meeting 10 minutes prior to first patient.
- Check Sterilization for any clean instruments of yours from the day prior.
- Have a good attitude and be prepared for the day ahead!

2. Pre-Appointment Upon Patient Arrival

- Greet patient within 5 minutes of arrival by first name, be sure to introduce yourself if you've never met.
- For children – discretely ask patient's parent for any medical changes, dental concerns and permission for treatment today. If necessary, pull the parent aside or to the operatory to protect their privacy.
- Seat patient in operatory.
- Adjust headrest for patient comfort, offer pillow if needed.
- Ask 3 non-dental related questions.
- Update medical history – Ask for updates to medications, surgeries, allergies.
- Place patient bib on patient.
- Take blood pressure. If high, per most recent guidelines, ask when the last time they have seen a PCP. If this is the 2nd appointment in a row that the patient has high blood pressure, we need to send a letter to their PCP.
- Confirm consent forms are signed, if needed.
- Ask the patient if they have a Doctor preference for their exam.
- Ask the patient if they have any troubles or concerns with their teeth.
- Give an overview of the appointment and what be completed today.
- Begin chart note – add blood pressure to medical tab as soon as blood pressure is completed.
- Alert the Doctor for an exam as soon as necessary x-rays, perio charting and OCS has been completed.

3. Radiographs

- Always get permission for a legal guardian for x-rays on minors.
- PAN taken once every 3 years (or up to 5 years depending on insurance coverage) and on ALL new patients.
- 4 BWX and 3 Anterior PAs taken every year on all patients starting at age 16.
- 7 Vertical BWX or 4 BWX & 3 Anterior PAs taken on all Perio patients.
- When recommending or performing periodontal treatment current x-rays are required (within the past year for BWX and within 3-5 years for PAN).
- PAs taken as needed on implants and endo treatment teeth or when endo treatment is being proposed.
- BWX start at age 5 on pediatric patients, or sooner if indicated. We recommended getting 4 BWX as soon as physically possible for the pediatric patient.
- PANs start at age 7 for pediatric patients, or sooner if indicated.
- 1 PA and 1 BWX are taken on emergency patients.
- PAN BWXs are to be used as a last resort if traditional BWXs are not possible.
- On all BWX the height of the crestal bone (implants included) and all restoration margins must be visible. If the bone height is not visible on horizontal BWX then vertical BWX must be taken.
- Premolar BWX should show the distal of the canines (if possible).
- Molar BWX should show the distal of the terminal molars (if possible).
- Patients will NOT be allowed to schedule back in hygiene if BWX are not done after the 2-year mark and if a PAN is not done after the 5-year mark. (See x-ray refusal protocol.)

4. Periodontal Charting

- Perio Charting must be performed yearly on every patient starting at age 18 (or earlier if there are perio concerns).
- Perio Charting must be performed at EVERY appointment for perio mx.
- Perio Charting must be current before performing Quads. Current is defined as within the last year.
- Perio Charting must include:
 - 6 points of measurement on each tooth
 - Pocket Depths
 - Recession/Gingival Margin
 - Bleeding
 - Furcation

- Mobility

- Doctors will spot probe only at NP exams in their chair. If the patient is seen in the Doctor's schedule first for a NP exam and they obviously need quads, they will be scheduled right away for quads. It will be at the first quads appointment that the Perio Charting will be done. If the Doctors are unsure about the perio diagnosis then the patient will be scheduled for a NP prophy with Perio Charting and perio will be diagnosed and treatment planned from the Hygiene chair.

5. Periodontal Treatment Guidelines

- Healthy: 0-3 mm pockets with NO bleeding on probing. Simple prophy, recommend 6-month D1110 recall appointments.
- Gingivitis/Class I: 3-5 mm pockets with bleeding on probing and supragingival calculus. No interproximal calculus on BWX, no bone loss, Lamina Dura still intact. All pocketing is due to inflammation, not attachment loss. Two-visit prophy followed by 1 year of 4-month D1110 recare and re-evaluate recall frequency after 1 year.
- Class II: 4-6 mm pockets with bleeding on probing and mild/moderate calculus visible on BWX. 4 quads SRP with 2 years of 3-month D4910 recall. Evaluate for SRP again every 3-5 years.
- Class III: 5-7 mm pockets with bleeding on probing and moderate/heavy calculus visible on BWX. 4 quads SRP with lifetime 3-month D4910 recall and then referral if not maintained. Evaluate for SRP again every 2-3 years.
- Class IV: 6-10 mm pockets or higher with bleeding on probing. Referral immediately, unless extractions are part of the treatment plan.
- Class V: Refractory. Refer immediately, unless extractions are part of the treatment plan.

6. Scaling and Root Planning (SRP)

- All SRP patients are to be anesthetized with local anesthetic or topical (unless the patient requests not to be).
- The ultrasonic scaler will be used for roughly 80% of the gross scaling. The hand scalers will be used for the remaining 20% of fine scaling.
- All SRP patients will have x-rays taken after scaling is complete to evaluate for residual deposits.
- All SRP patients are required to have a 4-6 week follow-up perio mx. for evaluation of healing and a fine scaling and polish.
- Perio patients will be put on a 3-4-month D4910 recall until tissue improves.
- With perio is consistently stable the patient may eventually be able to move to a 6-month perio mx. recall.
- Perio patients will ALWAYS be perio patients. The D4910 code will always be used, we will not bill out prophy codes.

- We will only charge out for perio mx if a patient has had SRP in all 4 quadrants (localized or full quad).
- Patients will not be able to schedule a prophylaxis if SRP has been recommended and they refuse – unless they have been seen by a Periodontist.

7. Oral Cancer Screen (OCS)

- A thorough intra-oral and extra-oral cancer screening and oral facial exam will be done on every patient at every visit.
- Any suspicious lesions will be evaluated by the Doctor and referred to an Oral Surgeon if necessary.

8. Clinical Exam

- A thorough clinical exam will be done by the Hygienist prior to the Doctor coming in for an exam.
- The clinical exam will evaluate: caries, fractures, broken teeth, fistulas, margins of restorations, perio concerns and soft tissue lesions.

9. Intra-Oral and Extra-Oral Photos

- Intra-Oral photos are to be taken for: broken teeth, obvious clinical concerns, or teeth we are recommending sealants.
- Photos are to be used for patient education purposes, for the Doctor exam and insurance purposes.
- Extra-Oral photos are to be taken on every new patient and on any patient who may be considering any orthodontic or cosmetic treatment.
- Extra-Oral photos are to be taken when an ortho consult is needed so that the Doctor can review the case to see if the patient is a candidate for ortho BEFORE the consult is scheduled.
- Intra-Oral and/or Extra-Oral photos are to be taken of any suspicious soft tissue lesion for referral and follow-up purposes.

10. Patient Education

- A CAMBRA assessment will be done on every new patient and as an adjunct to patient education as needed on existing patients.
- The results of the CAMBRA assessment will be shared with the patient along with the recommendations for their risk level.
- All patients will receive thorough and relevant patient education instruction for in office preventative procedures.
- All patients will receive thorough and relevant patient education instruction for at home products.

- All patients will receive thorough and relevant patient education instruction for any needed restorative, ortho, surgical, endodontic, removable appliance, or periodontal treatment.
- Models and/or videos are available (and encouraged) to be used as needed for patient education purposes.
- Personalized home care recommendation cards are available to be filled out for each patient.

11. Hygiene to Doctor Handoff

- The Hygienist will make sure any x-rays or photos are pulled up and ready to be viewed prior to the Doctor entering the room.
- The Hygienist will introduce the patient to the Doctor and the Doctor to the patient using names.
- The Hygienist will give the Doctor an overview of what was done in the appointment, what concerns there are, what possible treatment options were discussed and any preventative recommendations that were made.
- The Hygienist will make sure the router is complete and correct for the Doctor to sign.
- The Hygienist will need to make sure any treatment needs are: clearly stated on the router, correctly assigned with time units needed and entered into the chart.

12. Scaling

- Scaling is to be performed thoroughly and completely.
- All supragingival and subgingival deposits are to be removed. When in doubt, take a follow-up x-ray to confirm.
- If a Hygienist is unable to remove all deposits, then the patient will be scheduled for a second prophy or perio treatment as needed.
- Desensitizing medicaments, topical anesthetic, or local anesthetic will be used as needed for patient comfort.
- Use of the ultrasonic scaler is preferred for adequate biofilm removal (if the patient allows).

13. Polishing

- Any time we are billing out a prophy a patient must receive polishing. This includes patients who received a supra-gingival debridement on prior to quads or the first visit of a two visit prophy.
- We will only use FINE grit polish with polishing anterior porcelain crowns.

14. Dental Hypersensitivity

- The Hygienist will educate the patient on the cause of the hypersensitivity and recommend appropriate preventative services.
- Fluoride varnish is recommended at each preventative appointment.

- Super Seal can be applied as needed at no charge.
- Brush & Bond can be applied to class V areas for a fee of \$25 per tooth and \$5 for each tooth after. The fee for the entire mouth is \$125.

15. Sealants

- Sealants are recommended on patients regardless of age or insurance coverage.
- We guarantee our sealants for 3 years. If they need to be touched up prior to the 3-year mark, we will do that at no charge.

16. Fluoride

- Fluoride Varnish is recommended on all patients regardless of age or insurance coverage.
- A Fluoride Varnish will be done at no charge for all perio mx procedures.
- If a patient is being seen for sealants only (not at a prophy appointment) we will do a Fluoride Varnish for them at no charge.

17. New Patient Experience

- Every new patient must be brought back promptly upon arrival.
- Green patient and introduce yourself.
- Every new patient must receive a tour of the office.
- The Hygienist will ask the patient how they found our office and ask personal questions to build trust and get to know the patient.
- Every new patient must get a NP folder with information about our office and providers. The Hygienist will review this folder with the patient.
- When handing the patient off to the Doctor the Hygienist will introduce the patient and Doctor to each other. The Hygienist will also be very detailed in relaying the dental history, dental needs and the personal history of the patient.

18. Post-Appointment Dismissal

- Phase treatment recommendations with priorities after exam.
- Confirm all procedures and providers are correct for today's appointment.
- Go over post-op instructions.
- Scheduled recare appointment and write out appointment card.
- Complete route slip and have the Doctor sign off.
- No debris on the patient's face.
- For children – if the child had no cavities, they will receive a 'No Cavity Club' coupon for a slice of pizza.
- Provide patient with a goodie bag with a toothbrush, samples of toothpaste and floss and any other applicable dental aides.

- Take patient to front desk and do proper handoff using the patient's name, recap today's treatment in simple verbiage, what the next appointment will be with time units and whether recare appointment(s) have been scheduled.
- Thank patient and dismiss yourself.
- Complete treatment note.
- Breakdown room.
- Bring instruments to sterilization.
- Set-up room for next appointment.

19. End of Day

- All chart notes completed and accurate for patients seen.
- Production and notes are correct.
- Message sent that production and notes are complete.
- General charting is completed on any new patients seen.
- Task manager check and any tasks completed from day prior.
- Post-op texts for any SRP from day prior/letters sent to PCP for new perio patients.
- X-ray unit off/Nomad returned to its neutral location.
- Operatory is clean, common housekeeping duties completed.
- All instruments are brought to sterilization.
- Operatory is wiped down, stocked and set up for morning patient.
- 12 o'clock is emptied out, all loose instruments and Rinns are put away.
- Run suction lines with Slug.
- Trap changed once per week.
- Change out handpiece once per week.
- Change garbage if needed.
- Double check tomorrow's schedule/time of first patient, schedule prepared for morning meeting.
- Unplug any fans or space heaters.
- Sign End of Day Checklist and give to team lead.
- Log off of Open Dental & Slack, shut down and turn off computer and monitor.
- Clock-out & check for ANY TIME CLOCK ERRORS
- Set alarm if last one out of the building.
- Turn off pumps if last one out of the building.

Dental Hygienist End of Day Checklist

- 🍏 All Chart notes completed and accurate for patients seen
- 🍏 Production and notes are correct
- 🍏 Message sent that production and notes are complete
- 🍏 General charting is completed on any new patients seen
- 🍏 Task manager checked and any tasks completed from day prior
- 🍏 Post-op tests for any SRP from day prior/letters sent to PCP for new perio patients
- 🍏 X-ray unit off/Nomad returned to its neutral location
- 🍏 Operatory is clean, common housekeeping duties done
- 🍏 All instruments are brought to sterilization
- 🍏 Operatory is wiped down, stocked and set up for morning patient
- 🍏 12 o'clock is emptied out, all loose instruments and Rinns are put away
- 🍏 Run suction lines with Slug
- 🍏 Trap changed once per week – Date: _____
- 🍏 Change out handpiece once per week
- 🍏 Change garbage if needed
- 🍏 Double check tomorrow's schedule/time of first patient – schedule prepared for morning huddle
- 🍏 Unplug any fans or space heaters
- 🍏 Sign End of Day checklist and give to team lead
- 🍏 Log off of Open Dental & Slack, computer & monitor off
- 🍏 Turn off pumps and set alarm if last one here
- 🍏 Clock-out – check for ANY TIME CLOCK ERRROS

Hygienist Signature: _____

Did you win the day by running on time? YES or NO

Comments?

Our Core Values:

When in Doubt do the Right Thing, Humility, Organized & Efficient, Customer Service, Professional Excellence, Compassion, Team Player

Dental Hygienist Accountability Agreement

I _____, understand that my responsibilities as Dental Hygienist include, but are not limited to the duties listed on the following documents:

1. Hygiene Patient Protocol
2. Duties of a Dental Hygienist
3. Non-Negotiable Standards of Care
4. End of Day Protocol

As a Dental Hygienist I understand that I will be expected to maintain the standards and protocols defined in the documents listed above. I understand that I am a provider for this practice and will always hold myself to the highest level of standard.

Additionally, I am aware of Finger Lakes Dental Care's Core Values as listed below and will stive to conduct myself in a manner consistent with these values:

Finger Lakes Dental Care's Core Values

When in Doubt, Do the Right Thing Humility Organized & Efficient Customer Service Professional Excellence Compassion Team Player
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Team Member Signature: _____ Date: _____

Office Manager Signature: _____ Date: _____