

Dental Practice Regulation 2004

[2004-551]



New South Wales

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The provisions displayed in this version of the legislation have all commenced.

Authorisation

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Dental Practice Regulation 2004



New South Wales

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Dental Practice Regulation 2004



New South Wales

Her Excellency the Governor, with the advice of the Executive Council, has made the following Regulation under the [Dental Practice Act 2001](#).

MORRIS IEMMA, M.P., Minister for Health

Part 1 Preliminary

1 Name of Regulation

This Regulation is the [Dental Practice Regulation 2004](#).

2 Commencement

This Regulation commences on 15 August 2004.

3 Definition

(1) In this Regulation:

the Act means the [Dental Practice Act 2001](#).

(2) In this Regulation, a reference to a Form is a reference to a Form in Schedule 4.

4 Notes

Notes included in this Regulation do not form part of this Regulation.

Part 2 Registration of dentists and dental auxiliaries

5 Qualifications for registration as a dentist

For the purposes of section 8 (1) (a) of the Act, the qualifications listed in Schedule 1 are prescribed as necessary qualifications for registration as a dentist.

6 Dental hygienist activities—section 19

For the purposes of section 19 (3) of the Act, the following activities, where carried out in the course of carrying out restricted dental practices and not involving the cutting of oral or dental tissue, are, to the extent that the activities constitute restricted dental practices,

prescribed as authorised activities for dental hygienists:

- (a) the irrigation of the mouth,
- (b) the insertion and removal of surgical packs,
- (c) the application and removal of rubber dams,
- (d) the polishing of restorations,
- (e) simple prophylaxis,
- (f) the topical application of sealants, fluoride solutions and medicaments,
- (g) the scaling of supra-gingival and sub-gingival calculus deposits from the teeth,
- (h) root planing,
- (i) the removal of sutures,
- (j) the selection of orthodontic bands,
- (k) the removal of orthodontic archwires, bands and attachments,
- (l) dental radiography for dental examination,
- (m) the taking of simple impressions for study casts,
- (n) the giving of supraperiosteal or mandibular nerve block injections of local anaesthetics not involving, in either case, any other regional, intra-osseous or intra-ligamental anaesthesia.

7 Dental therapist activities—section 19

For the purposes of section 19 (3) of the Act, the following activities are, to the extent that the activities constitute restricted dental practices and involve dental treatment of children who are under the age of 18 years, prescribed as authorised activities for dental therapists:

- (a) dental examination,
- (b) the cleaning and polishing of teeth and restorations,
- (c) the topical application of sealants, fluoride solutions and medicaments,
- (d) the removal of dental calculus not involving surgical techniques requiring incisions,
- (e) the application of topical anaesthetics,
- (f) the giving of supraperiosteal or mandibular nerve block injections of local anaesthetics not involving, in either case, any other regional, intra-osseous or intra-ligamental

anaesthesia,

- (g) the extraction of primary or permanent teeth not involving either surgical techniques or incisions,
- (h) the pulp capping of primary or permanent teeth and the pulpotomy of deciduous teeth,
- (i) the restoration of primary or permanent teeth, excluding any indirect procedure,
- (j) dental radiography for dental examination,
- (k) the taking of study model impressions and their pouring up at the written request of a dentist.

8 Qualifications for registration as a dental hygienist

For the purposes of section 21 (1) (a) of the Act, the qualifications listed in Schedule 2 are prescribed as necessary qualifications for registration as a dental hygienist.

9 Qualifications for registration as a dental therapist

For the purposes of section 21 (1) (a) of the Act, the qualifications listed in Schedule 3 are prescribed as necessary qualifications for registration as a dental therapist.

Part 3 Election of members of Board

10 Manner of conduct of election

For the purposes of section 108 (1) (a) of the Act, the election of elected members of the Board is to be held and conducted in the manner set out in this Part.

11 Elections of elected members

- (1) An election of elected members of the Board is to be held so that the results of the election are declared at least one month before the expiry of the term of the elected members of the Board under clause 3 of Schedule 7 to the Act.
- (2) In every fourth calendar year after the calendar year in which the election referred to in subclause (1) is held, an election of elected members is to be held so that the results of the election are declared at least one month before the day that is the anniversary of the election referred to in subclause (1).

12 Returning Officer

The Electoral Commissioner for New South Wales appointed under the [Parliamentary Electorates and Elections Act 1912](#) is to be the Returning Officer at an election.

13 Notice of election

- (1) The Returning Officer must, as soon as practicable after being notified in writing by the Minister that an election is required to be held, cause to be published in the Gazette and in at least one daily newspaper published and circulated in New South Wales a notice that:
 - (a) states that an election is to be held, and
 - (b) invites nominations from registered dentists to fill the vacancies for elected members of the Board, and
 - (c) advises where nomination forms may be obtained, and
 - (d) fixes the close of nominations, and
 - (e) fixes the close of the roll, and
 - (f) fixes the close of the ballot.
- (2) A notice referred to in subclause (1) must be published at least 60 days before the polling day for the election to which it relates.
- (3) The Returning Officer may, by a notice published in accordance with subclauses (1) and (2), fix a later time and date for the close of nominations for an election than those fixed by a previous notice published in relation to the election.

14 Nominations

- (1) A nomination must be made in writing in Form 1 and must set out the following particulars:
 - (a) the full name of the candidate nominated,
 - (b) the residential address of that candidate,
 - (c) an endorsement of that candidate's consent to his or her nomination,
 - (d) the full names, residential addresses and signatures of at least 2 nominators, being registered dentists other than that candidate.
- (2) A candidate may withdraw his or her nomination for an election by notification in writing delivered to the Returning Officer at any time until the close of nominations for the election.

15 Candidate information sheet

- (1) A candidate for election may, at any time before the close of nominations for the election, submit to the Returning Officer a statutory declaration in or to the effect of Form 2, containing information intended for inclusion in a candidate information sheet

referred to in subclause (2).

- (2) As soon as practicable after the close of nominations for an election, the Returning Officer must, if clause 16 (2) requires that a poll be taken, draw up a candidate information sheet consisting of the information in the statutory declarations, if any, submitted to the Returning Officer by candidates pursuant to subclause (1).
- (3) Despite subclause (2), the Returning Officer may, when drawing up a candidate information sheet, omit or alter such of the information contained in a statutory declaration submitted to the Returning Officer pursuant to subclause (1) as appears necessary or desirable to prevent the sheet containing information that is:
 - (a) inappropriate for inclusion in a candidate information sheet, or
 - (b) misleading in a material particular, or
 - (c) of an amount that is excessive having regard to the limitation on the amount of information indicated in Form 2.
- (4) Information concerning candidates must appear on a candidate information sheet referred to in subclause (2) in the same order in which the candidates are listed on the ballot-paper relating to them.

16 Procedure on close of nominations

- (1) If, after the close of nominations, there is not a greater number of persons nominated than are required for election, the Returning Officer is to declare those persons duly elected.
- (2) If, after the close of nominations, the number of persons nominated is greater than the number required for election, a poll must be taken.
- (3) If, after the close of nominations for an election and before the polling day, any candidate dies, the Returning Officer must, in accordance with this Part, invite fresh nominations and fix another date for the poll.

17 Closing of roll

- (1) If, by the close of nominations, the Returning Officer has received more than the required number of nominations, the Returning Officer must immediately notify the Registrar that a ballot is to be held and that the Returning Officer requires the Registrar to deliver to the Returning Officer within 7 days after the close of the roll:
 - (a) a roll on which a certificate in or to the effect of Form 3 is endorsed and which contains:
 - (i) the name of each person whose name is entered in the Dentists Register, and
 - (ii) an address, nominated by the person, to which a ballot-paper in respect of an

election may be sent to the person, and

(b) a label for each person whose name is entered in the Dentists Register as at the close of the roll, of a size suitable for fixing to an envelope, upon which the name and address of that person is written.

(2) The Registrar is to comply with a requirement of the Returning Officer under subclause (1).

18 Taking of poll

(1) Where a poll is to be taken, the Returning Officer must:

(a) hold a ballot, in the manner prescribed for the purposes of section 82A of the *Parliamentary Electorates and Elections Act 1912*, to determine the order in which the candidates' names are to be entered on the ballot-paper, and

(b) cause ballot-papers in or to the effect of Form 4 to be drawn up in the manner prescribed by section 83 of the *Parliamentary Electorates and Elections Act 1912*, and

(c) cause the ballot-papers to be printed, and

(d) cause any candidate information sheet drawn up under clause 15 (2) relating to the candidates to be printed.

(2) The Returning Officer must, not later than 20 days before the date fixed for a poll, post to the address, nominated in the roll referred to in clause 17 (1), of each dentist registered at the date of the close of nominations to which the poll relates:

(a) a ballot-paper printed in accordance with subclause (1) and initialled by the Returning Officer, and

(b) a business reply envelope addressed to the Returning Officer, and

(c) where appropriate, a candidate information sheet referred to in clause 15 (2) relating to the candidates included in the poll.

(3) A business reply envelope referred to in subclause (2) must contain on the rear flap spaces for the insertion of a voter's name, address and signature.

(4) A dentist who has been forwarded a ballot-paper and a business reply envelope under subclause (2) and who wishes to vote must complete the ballot-paper in accordance with the directions printed on the ballot-paper and must send or deliver to the Returning Officer the ballot-paper enclosed and sealed in the business reply envelope addressed to the Returning Officer.

(5) The Returning Officer may, on written application made to the Returning Officer, and if satisfied that a ballot-paper has been lost or destroyed, supply a duplicate ballot-

paper to the person to whom the lost or destroyed ballot-paper was issued.

(6) An election is not invalid because:

- (a) a person whose name is on the Register did not receive a ballot-paper, or
- (b) the Returning Officer did not receive a ballot-paper sent to the Returning Officer.

19 Examination of envelopes

- (1) The Returning Officer must, as soon as practicable after the receipt of a business reply envelope purporting to contain a ballot-paper, examine the envelope for the purpose of deciding whether to accept or reject the envelope.
- (2) The Returning Officer is to reject a business reply envelope purporting to contain a ballot-paper issued in respect of an election if:
 - (a) the business reply envelope does not have legibly marked on its rear flap the name, address and signature that appear to the Returning Officer to be those of a registered dentist, or
 - (b) the business reply envelope is not sealed, or
 - (c) the business reply envelope is not received by the Returning Officer at or before the time stated on ballot-papers issued in respect of the election as the time at or before which the business reply envelope is to be so received.

20 Dealing with ballot-papers

- (1) On the day fixed for the poll, the Returning Officer must:
 - (a) open all the business reply envelopes received (except those envelopes rejected under clause 19 (2)) and extract the ballot-papers and, without unfolding them, place the ballot-papers in the ballot-box, and
 - (b) mix the ballot-papers and draw the ballot-papers at random, and
 - (c) unfold the ballot-papers and count, in accordance with clause 21, the votes recorded on the ballot-papers (except any ballot-papers rejected under subclause (2)).
- (2) The Returning Officer is to reject a ballot-paper as being informal if:
 - (a) the ballot-paper contains any matter by which the voter may be identified, or
 - (b) the ballot-paper is not completed in accordance with the directions printed on the ballot-paper.
- (3) Each candidate may appoint, in writing, a scrutineer to represent that candidate.

- (4) A scrutineer appointed in accordance with subclause (3) may be present during the examination, opening and counting of votes by the Returning Officer.

21 Method of voting and counting

- (1) At an election a voter is:
- (a) required to record a vote for 5 candidates, and
 - (b) permitted to record a vote for as many more candidates as the voter pleases, so as to indicate, in such manner as is required by this Part, the candidates for whom the voter votes and the order of the voter's preference for them.
- (2) Ballot-papers must be counted, and the candidates who are elected determined, by the Returning Officer according to an optional multi-preferential system in which the first, second, third, fourth and fifth preference votes (represented by the numbers "1", "2", "3", "4" and "5", respectively, marked on the ballot-paper) are regarded as primary votes.

22 Report of election

When the Returning Officer first ascertains the result of an election, the Returning Officer must furnish a report, in writing, of the result to the Minister and must cause the result to be published in the Gazette and in at least one daily newspaper published or circulated in New South Wales.

Part 4 Miscellaneous

23 Supervisor's report on person granted limited registration

It is the duty of an approved health institution employing a dentist who is supervising a person granted limited registration under section 14 (1) of the Act (the **registrant**) to furnish to the Board, at the expiration of 3 months from the commencement of the supervision and at the end of each succeeding period of 6 months, a report as to the following:

- (a) the dental knowledge and skill of the registrant,
- (b) whether the registrant carried out dental work satisfactorily,
- (c) whether the registrant has committed any breach of ethics,
- (d) the attitude of the registrant to patient care,
- (e) the ability of the registrant to communicate with patients and colleagues,
- (f) the willingness and capacity of the registrant to undertake continuing dental education.

24 Excluded offences

- (1) Sections 36 (1) (a), 37 (1) (a) and 38 of the Act do not apply in respect of an excluded offence.
- (2) An excluded offence is not relevant for the purposes of clause 4 of Schedule 1 to the Act.
- (3) In this clause, **excluded offence** means any offence relating to the parking of motor vehicles or any offence under the road transport legislation (within the meaning of the *Road Transport (General) Act 1999*) except for the following offences:
 - (a) an offence under section 42 (1) of the *Road Transport (Safety and Traffic Management) Act 1999* relating to driving a motor vehicle on a road or road related area negligently if the registered dental care provider is, by way of penalty, sentenced to imprisonment or fined a sum of not less than \$200,
 - (b) an offence under section 42 (2) of the *Road Transport (Safety and Traffic Management) Act 1999* relating to driving a motor vehicle on a road or road related area furiously, recklessly or at a speed or in a manner dangerous to the public,
 - (c) any offence under section 19 (2) of the *Road Transport (General) Act 1999* (which relates to refusing to produce a driver licence, or to state name or home address, when required or stating a false name or home address),
 - (d) any offence under section 12 (1) of the *Road Transport (Safety and Traffic Management) Act 1999* (which relates to driving etc while under the influence of alcohol or any other drug),
 - (e) any offence under section 25A (1), (2) or (3) of the *Road Transport (Driver Licensing) Act 1998* (which relates to driving while unlicensed),
 - (f) any offence under section 70 of the *Road Transport (Safety and Traffic Management) Act 1999* (which relates to failing to stop after an accident),
 - (g) any offence under section 9 of the *Road Transport (Safety and Traffic Management) Act 1999* (which relates to presence of prescribed concentration of alcohol in a person's blood),
 - (h) any offence under section 43 of the *Road Transport (Safety and Traffic Management) Act 1999* (which relates to menacing driving),
 - (i) any other offence under the road transport legislation if the court orders the disqualification of the registered dental care provider from holding a driver licence.

25 Notice of mental incapacity of registered dental care provider

- (1) For the purposes of section 39 of the Act, the person required to cause notice of mental incapacity to be given to the Registrar is:
 - (a) in the case of a registered dental care provider who is a mentally incapacitated person and becomes a patient at an institution because of that incapacity—the medical superintendent of the institution, or
 - (b) in the case of a registered dental care provider who is a mentally incapacitated person because of being a protected person under the [Protected Estates Act 1983](#)—the Protective Commissioner.
- (2) Notice for the purposes of section 39 of the Act is to be given by telephone within one day, and by post within 7 days, after the registered dental care provider is admitted to the institution or becomes a protected person, and is to specify the following:
 - (a) the name and residential address of the registered dental care provider,
 - (b) the date on which the registered dental care provider was admitted to the institution at which the registered dental care provider is a patient or became a protected person.
- (3) In this clause:

patient means a person to whom medical treatment or other medical services are provided.

26 Appeal on point of law

An appeal referred to in section 98 of the Act is to be made:

- (a) by causing a notice of appeal, specifying the grounds on which the appeal is made, to be given to the Chairperson (or, if a Deputy Chairperson is nominated under section 98 (1), to the Deputy Chairperson so nominated), and
- (b) by causing a copy of the notice of appeal to be given to each other party to the proceedings from which the appeal has arisen.

27 Advertising

- (1) A person must not advertise dentistry practices in a manner that:
 - (a) is false, misleading or deceptive, or
 - (b) creates an unjustified expectation of beneficial treatment, or
 - (c) promotes the unnecessary or inappropriate use of dentistry practices.

Maximum penalty: 10 penalty units.

- (2) A person must not advertise dental auxiliary activities in a manner that:
- (a) is false, misleading or deceptive, or
 - (b) creates an unjustified expectation of beneficial treatment, or
 - (c) promotes the unnecessary or inappropriate use of dental auxiliary activities.

Maximum penalty: 10 penalty units.

- (3) A person or body must not advertise dental services in a manner that:
- (a) is false, misleading or deceptive, or
 - (b) creates an unjustified expectation of beneficial treatment, or
 - (c) promotes the unnecessary or inappropriate use of dental services.

Maximum penalty: 10 penalty units.

28 Replacement certificates

- (1) The Registrar may, on application by a dental care provider and on payment of a fee of \$40, issue a replacement certificate, clearly marked as such, if satisfied that a certificate issued to the dental care provider under the Act has been lost or destroyed.
- (2) The Registrar may require an application under this clause for a replacement for a lost or destroyed certificate to be verified by a statutory declaration as to the circumstances in which the certificate was lost or destroyed.

29 Fee for complaint

- (1) A complaint lodged with the Registrar under section 47 of the Act is to be accompanied by a fee of \$20.
- (2) The Registrar may exempt the maker of a complaint from paying the fee, or refund a fee already paid, if, in the opinion of the Registrar, the situation of the maker of the complaint, or the nature of the complaint, warrants an exemption or a refund.

30 Fee for inspection of Register

For the purposes of clause 21 (4) of Schedule 1 to the Act, the prescribed fee (being the maximum amount for an inspection of a Register) is \$10.

31 Fee for additional information to be recorded in Register

For the purposes of clause 22 (4) of Schedule 1 to the Act, the prescribed fee (being the fee for recording additional particulars in a Register) is \$20.

32 Fee for certificate of provisional registration

The fee for the grant of a certificate of provisional registration under section 12 (3) of the Act is \$40.

33 Patients' records

- (1) A registered dentist must, in relation to every patient treated by the dentist or by a registered dental auxiliary subject to the practice oversight of the dentist, cause a record to be made, in a legible form, of the following information:
 - (a) the name and address of the patient,
 - (b) if the patient has not attained the age of 16 years—the name and address of a parent or guardian of the patient,
 - (c) the date of birth of the patient,
 - (d) the sex of the patient,
 - (e) the date on which the patient is first examined by the dentist,
 - (f) the date of each occasion on which the patient is treated by the dentist, or by a dental auxiliary subject to the practice oversight of the dentist, with a description that adequately records the treatment administered on each occasion (specifying the tooth or teeth concerned).
- (2) Each radiograph taken of the patient in connection with the treatment must be retained.
- (3) The dentist must retain the radiographs and records:
 - (a) in the case of a patient who has not attained the age of 18 years—until the patient attains (or would have attained) the age of 25 years, and
 - (b) in the case of a patient who is of or above the age of 18 years—for a period of at least 7 years from the latest occasion on which the patient is treated by the dentist or a dental auxiliary subject to the practice oversight of the dentist.

Maximum penalty: 5 penalty units.

- (4) Subclause (3) ceases to apply to a dentist when the dentist disposes of his or her dental practice as a going concern. However:
 - (a) the dentist must provide the person who acquires the practice with the relevant radiographs and records, and
 - (b) subclause (3) applies to that person as if he or she had caused those radiographs to be taken and those records to be made.

34 General anaesthesia and simple sedation in dentistry

- (1) A dental care provider must not carry out any procedure forming part of the practice of dentistry on a patient to whom a general anaesthetic has been administered unless the general anaesthetic has been administered by a registered medical practitioner who:
- (a) is a specialist in anaesthesia, or
 - (b) is accredited for the purposes of administering any general anaesthetic at a public or private hospital where surgery may lawfully be carried out.

Maximum penalty: 5 penalty units.

- (2) A registered dentist must not administer simple sedation by the intravenous route unless the dentist:
- (a) has received appropriate training in techniques of intravenous sedation and resuscitation, as approved by the Board, and
 - (b) is assisted by another person who is either:
 - (i) a registered nurse (within the meaning of the [Nurses and Midwives Act 1991](#)) who has received training in intensive care or anaesthesia, or
 - (ii) a registered dentist, appropriately trained in the observation and monitoring of sedated patients and in resuscitation, whose sole responsibility in so assisting is to monitor the level of consciousness and cardio-respiratory function of the patient and to administer resuscitation where necessary.

Maximum penalty: 5 penalty units.

- (3) In this clause:

general anaesthetic means any drug or substance which when administered to a patient will render the patient:

- (a) unaware of the patient's surroundings, and
- (b) unable to retain reflex control of the airway, and
- (c) incapable of understanding and obeying a spoken command.

simple sedation means a technique in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, and in which:

- (a) the patient does not lose consciousness, and
- (b) the drugs and techniques used have a margin of safety wide enough to render

unintended loss of consciousness unlikely.

35 Infection control standards

- (1) A dental care provider must not, without reasonable excuse, fail to comply with the infection control standards set out in Schedule 5 to the extent that they apply to the dental care provider.
- (2) In determining whether or not a dental care provider has a reasonable excuse for failing to comply with a standard, particular consideration is to be given to the following:
 - (a) whether the circumstances involved the provision of emergency dental treatment,
 - (b) whether the necessary equipment was provided to the dental care provider, including providing access to it and training in its use, that would have enabled the dental care provider to comply with the standard (and whether the failure to provide such equipment was reported by the dental care provider to the Director-General).

36 Directions to dental technicians

Form 5 is prescribed for the purposes of issuing directions to dental technicians.

37 Health service controlled by Aboriginal community

A health service controlled by an Aboriginal community is prescribed for the purposes of section 33 (2) of the Act.

38 Repeal

The *Dentists (General) Regulation 1996* is repealed.

39 Savings provision

Any act, matter or thing that, immediately before the repeal of the *Dentists (General) Regulation 1996*, had effect under that Regulation continues to have effect under this Regulation.

Schedule 1 Qualifications for registration as a dentist

(Clause 5)

The following qualifications are prescribed as necessary qualifications for registration as a dentist:

- (a) Bachelor in Dental Science, University of Dublin, Republic of Ireland,
- (b) Bachelor of Dental Science, University of Melbourne, Victoria,
- (c) Bachelor of Dental Science, University of Queensland, Queensland,

- (d) Bachelor of Dental Science, University of Western Australia, Western Australia,
- (e) Bachelor of Dental Surgery, University of Adelaide, South Australia,
- (f) Bachelor of Dental Surgery, National University of Ireland, Republic of Ireland,
- (g) Bachelor of Dental Surgery, University of Belfast, United Kingdom,
- (h) Bachelor of Dental Surgery, University of Birmingham, United Kingdom,
- (i) Bachelor of Dental Surgery, University of Bristol, United Kingdom,
- (j) Bachelor of Dental Surgery, University of Dundee, United Kingdom,
- (k) Bachelor of Dental Surgery, University of Durham, United Kingdom,
- (l) Bachelor of Dental Surgery, University of Edinburgh, United Kingdom,
- (m) Bachelor of Dental Surgery, University of Glasgow, United Kingdom,
- (n) Bachelor of Dental Surgery, University of Leeds, United Kingdom,
- (o) Bachelor of Dental Surgery, University of Liverpool, United Kingdom,
- (p) Bachelor of Dental Surgery, University of London, United Kingdom,
- (q) Bachelor of Dental Surgery, University of Manchester, United Kingdom,
- (r) Bachelor of Dental Surgery, University of New Zealand, New Zealand,
- (s) Bachelor of Dental Surgery, University of Newcastle-Upon-Tyne, United Kingdom,
- (t) Bachelor of Dental Surgery, University of Otago, New Zealand,
- (u) Bachelor of Dental Surgery, University of Sheffield, United Kingdom,
- (v) Bachelor of Dental Surgery, University of St. Andrews, United Kingdom,
- (w) Bachelor of Dental Surgery, University of Sydney, New South Wales,
- (x) Bachelor of Dental Surgery, University of Wales, United Kingdom,
- (y) Bachelor of Dentistry, University of Sydney, New South Wales.

Schedule 2 Qualifications for registration as a dental hygienist

(Clause 8)

The following qualifications are prescribed as necessary qualifications for registration as a dental hygienist:

- (a) Academic Upgrade for Australian Defence Force Trained Dental Hygienists, University of Queensland, Queensland,
- (b) Academic Upgrade for School Dental Therapists to Dental Hygiene, University of Queensland,

Queensland,

- (c) Associate Degree in Dental Hygiene, Curtin University of Technology, Western Australia,
- (d) Bachelor of Applied Health Science (Oral Health), University of Queensland, Queensland,
- (e) Bachelor of Oral Health, University of Adelaide, South Australia,
- (f) Dental Board of New South Wales Dental Hygienists Examinations for Overseas Trained Dental Hygienists,
- (g) Diploma of Dental Hygiene, Torrens Valley TAFE, South Australia,
- (h) Diploma of Oral Health Therapy (Dental Hygiene), University of Melbourne, Victoria.

Schedule 3 Qualifications for registration as a dental therapist

(Clause 9)

The following qualifications are prescribed as necessary qualifications for registration as a dental therapist:

- (a) Associate Degree in Dental Therapy, Curtin University of Technology, Western Australia,
- (b) Associate Diploma in School Dental Therapy, Curtin University of Technology, Western Australia,
- (c) Bachelor of Applied Health Science (Oral Health), University of Queensland, Queensland,
- (d) Bachelor of Oral Health, University of Adelaide, South Australia,
- (e) Diploma of Dental Therapy, College of Dental Therapy, Westmead,
- (f) Diploma of Oral Health Therapy (Dental Therapy), University of Melbourne, Victoria.

Schedule 4 Forms

(Clause 3 (2))

Form 1 Nomination for elected dentist

(Clause 14)

(Dental Practice Act 2001)

To the Returning Officer,

We, being registered dentists, hereby nominate

*

[full name]

of

[residential address]

as a candidate at the election of elected members referred to in section 108 (1) of the *Dental Practice Act 2001*

.....

.....

[full name]

[signature]

[residential address]

[must be completed by at least 2 registered dentists other than the candidate]

I, of

[full name]

[residential address]

consent to the nomination and do solemnly and sincerely declare that I am a registered dentist.

I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the [Oaths Act 1900](#).

Declared atthis day of..... 20.. , before me:

.....*[a Justice of the Peace]*

.....*[candidate's signature]*

* The person nominated must be a registered dentist.

Form 2 Statutory declaration in support of candidature for election to the Dental Board

(Clause 15)

(Dental Practice Act 2001)

I, of

[full name]

[residential address]

do solemnly and sincerely declare:

1 My year of graduation as a dentist was.....

2 I hold the following qualifications:

.....
.....
.....

[academic and professional qualifications]

3 The information relevant to my candidature is:

.....
.....
.....
.....
.....

[information relevant to candidature not more than 6 lines]

I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the [Oaths Act 1900](#).

Declared at..... thisday of 20., before me:

.....*[a Justice of the Peace]*

.....*[candidate's signature]*

Form 3 Certificate of Registrar of the Dental Board

(Clause 17)

(Dental Practice Act 2001)

I, Registrar of the Dental Board, certify that the attached roll containing pages commencing with the name and ending with the name is a true and correct roll of persons registered as dentists under the [Dental Practice Act 2001](#) as at on the day of 20

.....[Registrar]

.....[date]

Form 4 Ballot-paper

(Clause 18)

(Dental Practice Act 2001)

Election of members of the Dental Board

READ CAREFULLY THE FOLLOWING INSTRUCTIONS BEFORE VOTING

- 1 You must vote for at least 5 candidates in the order of your preference by placing the number 1, 2, 3, 4 or 5 in the squares opposite the names of those candidates. You may, if you so desire, indicate your preference for the remaining candidates using the numbers 6, 7 and so on.
- 2 After marking your ballot-paper, fold it so that the vote cannot be seen, then place it in the business reply envelope and seal the envelope. PRINT YOUR NAME AND ADDRESS AND SIGN YOUR NAME IN THE SPACE PROVIDED ON THE REAR FLAP OF THE ENVELOPE. Post or deliver the business reply envelope so that it will be received by the Returning Officer NOT LATER THAN.....[indicate date and time of close of ballot].
- 3 Your vote will not be accepted unless your particulars and signature are shown on the rear flap of the business reply envelope. Remember to show the registered address to which voting materials were posted.
- 4 Only one ballot-paper is to be enclosed in each business reply envelope, otherwise the ballot-papers will not be accepted.
- 5 Any correspondence concerning this election should be addressed to the Electoral Commissioner for New South Wales.

Form 5 Order for technical work

(Clause 36)

(Dental Practice Act 2001)

From

Order No

Address

Date

INSTRUCTIONS

To

Address

Please carry out the following work:

Patient

Case type

	Anterior	Posterior
Teeth		
Shade		

Mould

--	--

Work required

.....
.....
.....
.....
.....
.....
.....
.....

Date work required.....

.....Signature of dentist

Schedule 5 Infection control standards

(Clause 35)

Part 1 Preliminary

1 Definitions

(1) In this Schedule:

body substance includes any human bodily secretion or substance other than blood.

invasive procedure means any one or more of the following:

- (a) surgical entry into body tissue, cavities or organs,
- (b) surgical repair of injuries,
- (c) the manipulation, cutting or removal of any oral or peri-oral tissue, including tooth structure, during which bleeding may occur.

patient includes (but is not limited to) a person who is accessing medical or health services or who is undergoing any dental treatment.

sharps means any object capable of inflicting penetrating injury, and includes hollow bore needles, suture needles, scalpel blades, orthodontic wires, root canal therapy (or RCT) instruments, and stitch cutters.

(2) The requirements set out in this Schedule apply to a dental care provider who is assisting in performing a procedure in the same way as they apply to a dental care provider who is actually performing the procedure.

Part 2 General standards applying to dental care providers

2 General precautions

- (1) Precautions must be taken to avoid direct exposure to a patient's blood or body substances. This requirement applies regardless of whether there is any perceived risk of infection.
- (2) Aseptic techniques must be used in the course of complying with the requirements of this Schedule.

3 Hand and skin cleaning

- (1) Hands must be cleaned:
 - (a) immediately before and after any direct patient care, and
 - (b) immediately after handling blood or body substances.
- (2) Subclause (1) does not apply in circumstances where medical treatment is required to be performed urgently and cleaning facilities are not readily available.
- (3) Hands may be cleaned by:
 - (a) using washing facilities involving water and a soap or antiseptic, or
 - (b) if any of the items specified in paragraph (a) are unavailable, using non-water cleansers or antiseptics.
- (4) Hands or other skin surfaces that are contaminated with a patient's blood or body substance must be cleaned as soon as it is practicable to clean them.
- (5) The requirement to clean hands applies regardless of whether gloves are also required to be worn.

4 Protective gowns and aprons

A gown or apron made of impervious material must be worn during any procedure where there is a likelihood of clothing being splashed or contaminated with blood or body substances.

5 Gloves

- (1) Gloves must be worn while handling blood or body substances.
- (2) In particular, gloves must be worn:
 - (a) while performing any procedure where direct contact is anticipated with a patient's blood or body substances, mucous membranes or non-intact skin, and

- (b) while suctioning a patient, and
 - (c) while handling items or surfaces that have come into contact with blood or body substances, and
 - (d) while performing an invasive procedure, venipuncture, or a finger or heel stick.
- (3) Gloves must be changed and discarded:
- (a) as soon as they are torn or punctured, and
 - (b) after contact with each patient.
- (4) Sterile gloves must be worn if the procedure involves contact with tissue that would be sterile under normal circumstances.

6 Masks and protective eye wear

- (1) A fluid repellent mask and protective eye wear must be worn while performing any procedure where there is a likelihood of splashing or splattering of blood or body substances.
- (2) A mask must be worn when in close contact with patients known by the dental care provider to have an infectious disease (or suspected by the dental care provider of having such a disease) if the disease is capable of being transmitted by the airborne or droplet route. If the disease is tuberculosis, the mask must be a particulate mask that is capable of filtering to 0.3 μ m.
- (3) In cases where a mask is required to be worn, it must be worn and fitted in accordance with the manufacturer's instructions.
- (4) A mask must be discarded once it has been worn and it must not be used again.
- (5) In cases where protective eye wear is required to be worn, it must be worn and fitted in accordance with the manufacturer's instructions.
- (6) Protective eye wear must be discarded once it has been worn and not used again unless it is reusable (in which case it is to be cleaned in accordance with the manufacturer's instructions).

7 Sharps

- (1) Sharps must not be passed by hand between a dental care provider and any other person. However, this requirement does not apply if, in any case involving an invasive procedure, the proper conduct of the procedure would be adversely affected.
- (2) A puncture resistant tray must be used to transfer sharps.
- (3) A needle must not be broken or otherwise manipulated by hand unless:

- (a) it is necessary to remove the needle for technical reasons, or
 - (b) the person is performing a procedure where a needle is required to be bent.
- (4) A needle must not be bent after it is contaminated with blood or body substances.
- (5) In any case where resheathing of a needle is required:
- (a) the needle must be properly recapped, and
 - (b) the sheath must not be held in the fingers to recap, and
 - (c) either a single handed technique or forceps, or a suitable protective guard designed for the purpose, must be used.
- (6) Reusable sharps must, immediately after completion of the dental procedure, be placed in a puncture resistant container specially kept for that purpose and labelled as such.
- (7) Non-reusable sharps must, immediately after completion of the dental procedure, be disposed of in a puncture resistant container.

8 Management of waste

- (1) Clinical waste must be properly packaged to protect against potential exposure to infectious agents and to facilitate the proper handling, storage and treatment or disposal of the waste.
- (2) Splashing or contamination of skin while disposing of blood or body substances must be avoided as far as practicable.
- (3) Nothing in this clause limits any other requirement under this Part.

9 Sterile medications and solutions

- (1) A sterile needle and syringe must be used to withdraw any medication or solution from a vial or ampoule (or other similar container).
- (2) The needle and syringe must be discarded once the needle and syringe have been used.
- (3) A medication or solution may be taken from a multi-dose vial or ampoule (or other similar container) only if the medication or solution is not reasonably available in another form.
- (4) Precautions must be taken to ensure that contaminated material or fluid is not injected into a multi-dose vial or ampoule (or other similar container).

10 Anaesthetic apparatus

- (1) This clause applies in any case where anaesthetic apparatus is used.
- (2) Any anaesthetic apparatus that comes into contact with a patient or is contaminated with blood or body substances must be discarded, or cleaned and disinfected, after each patient.
- (3) If the anaesthetic apparatus is a breathing circuit and the breathing circuit uses a filter:
 - (a) the filter must be discarded after each patient, and
 - (b) the part of the breathing circuit between the patient and the filter must be discarded, or cleaned and disinfected, after each patient, and
 - (c) in any case where a carbon dioxide absorber is also used—the part of the breathing circuit between the carbon dioxide absorber and the filter must be discarded, or cleaned and disinfected, at the end of each procedure list or operation list (as applicable), and
 - (d) in those cases where a carbon dioxide absorber is not used—the breathing circuit tubing that conducts the gas to and from the filter must be discarded, or cleaned and disinfected, at the end of each procedure list or operation list (as applicable).

11 Invasive procedures

- (1) In cases where it is technically feasible, retractors must be used for exposure and access during an invasive procedure.
- (2) Fingers must not be used for the purposes of an invasive procedure to expose or increase access for the passage of a suture.
- (3) Only one sharp at a time is to be placed in a puncture resistant tray that is being used in connection with an invasive procedure.
- (4) Forceps or a needle holder must be used when carrying out suturing both to pick up the suture needle and to draw it through tissue.

Part 3 Processing of instruments and equipment

12 Interpretation

In this Part:

AS/NZS 4187 means AS/NZS 4187:2003, *Cleaning, disinfecting and sterilizing reusable medical and surgical instruments and equipment, and maintenance of associated environments in health care facilities*.

AS/NZS 4815 means AS/NZS 4815:2001, *Office-based health care facilities not involved in complex patient procedures and processes—Cleaning, disinfecting and sterilizing reusable medical and surgical instruments and equipment, and maintenance of the associated environment.*

13 Prosthetic appliances

- (1) Any prosthetic appliance or material that is intended to be sent to a laboratory for processing must be rinsed clear of any debris and be disinfected before it is sent.
- (2) The prosthetic appliance or material must be cleaned and disinfected on its return from the laboratory before it is inserted into the mouth of a patient.

14 Cleaning of instruments and equipment

- (1) Any instrument or equipment that comes into contact with intact skin must be cleaned before it is used.
- (2) Any instrument or equipment that is required under this Part to be sterilised or disinfected must be cleaned before it is sterilised or disinfected.
- (3) The process of cleaning:
 - (a) must involve water and mechanical or physical action (such as washing machines) and a cleaning agent (with the cleaning agent being removed from instruments and equipment by rinsing), and
 - (b) must be consistent with AS/NZS 4187 or (in the case of an office-based practice) AS/NZS 4815.
- (4) In this clause **cleaning agent** means a detergent and includes proteolytic enzyme substances.

15 Disinfection of instruments and equipment

- (1) Any instrument or equipment that comes into contact with non-sterile tissue (other than intact skin) must, before it is used, be disinfected with a disinfectant specified in the Australian Register of Therapeutic Goods that is maintained under the *Therapeutic Goods Act 1989* of the Commonwealth, and the relevant manufacturer's instructions must be followed.
- (2) The process of disinfection:
 - (a) must involve either thermal methods or (if thermal methods are unsuitable) chemical methods, and
 - (b) must be consistent with AS/NZS 4187 or (in the case of an office-based practice) AS/NZS 4815.

16 Sterilisation of instruments and equipment

- (1) Any instrument or equipment used to enter, or that is capable of entering, tissue that would be sterile under normal circumstances, or the vascular system of a patient, must be sterilised before it is used.
- (2) The method of sterilisation must be:
 - (a) compatible with the particular type of instrument or equipment concerned, and
 - (b) consistent with AS/NZS 4187 or (in the case of an office-based practice) AS/NZS 4815.
- (3) If a steriliser is used (whether it is a benchtop or portable steriliser or a permanently plumbed or wired steriliser), the following criteria must be met:
 - (a) the relevant manufacturer's instructions must be followed,
 - (b) an ongoing monitoring program must be followed which reflects the requirements of Table 7.1 Calibration, Monitoring and Maintenance of Sterilizers of AS/NZS 4187 or (in the case of an office-based practice) Table 7.1 Sterilizer Tests and Test Frequencies of AS/NZS 4815.