

The dental hygienist of the twenty-first century has emerged as a powerful health care professional who is a necessity to the health care community. The actual profession of dental hygiene has significantly advanced since Dr. Albert C. Fones first coined the professional term in 1913. Thanks to the provision of the American Dental Hygiene Association (ADHA) and the National Dental Hygiene Research Agenda (NDHRA), our profession continues to develop, while increasing legislation and expanding licensure practices, but are we truly recognized as compulsory health care professionals? To gain professional acknowledgement, it is vital for the dental hygiene community to promote interprofessional education among the dental community and other professional communities collaboratively. Hygienists must continue to develop and implement strategies that will allow for independent practices, which will improve nationwide oral and overall health disparities. Expansion of the dental hygiene profession begins with education focusing on comprehensive, individualized patient care to promote health and prevent disease. Additionally, the realms of public health, leadership, cultural sensitivity, health care policy, medical informatics and technology, provide our profession with the skills necessary to take our career to the next level. In a country of an ever-changing health care system, there is no better time than right now to encourage the expansion of the dental hygienist as an essential component of the healthcare workforce.

Promotion of the profession is an integral part of the dental hygienists' obligation as an oral health care advocate. With the support of the ADHA and the NDHRA continuous research efforts update the body of knowledge, which surround the profession. Increasing research in the field of dental hygiene provides a foundation for practice guidelines, which promote the use of evidence-based practices for patient health promotion. The Commission on Dental

Accreditation's (CODA's) modifications of dental hygiene practices are a direct result of these research efforts. Research innovations endorse the standardization in dental hygiene curriculum development, which directly affect the educational components of public health, health informatics, leadership, and program development. It is vital to the profession to increase awareness and acceptance of the current standard of practice-based research efforts, which enable the ability to transform the dental hygienist from private practice dentistry into an independent health care professional, with the capability of working in environments such as hospitals, school systems, community centers, rehabilitation centers, etc.

Although licensures vary by state legislature, advancements of the mid-level dental therapist continue to expand throughout the country. Currently Minnesota and Alaska allow the practice of both the dental therapist and the advanced dental therapist. The dental therapist; similar, to a physician assistant in medicine, allows for all duties fulfilled by the dental hygienist with the addition of non-surgical extractions, placement of temporary and permanent restorations, direct and indirect pulp-capping, placing temporary crown, etc. While the oral health care crisis continues to affect the population of our country, implementing the dental therapist throughout every state would not only promote oral health care, but decrease the number of dental emergencies throughout national hospitals.

As the US health care system continues to transform in financing and service delivery, so does the need for increased connection and collaboration among health care providers. Now is the time to promote the need for the dental hygienist as a key presence in the battle against the oral health crisis. Although clinical practice is essential in our profession, the need to branch out and infiltrate public health care facilities will inevitably increase health promotion and

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disease prevention among the populace. Underprivileged and under-served communities are evident everywhere in our country. Why then, are only some of our states allowing for the advancement of our profession? As dental hygienists, it is our duty to advance our educational backgrounds and promote the didactic, clinical, and therapeutic services that define our profession. Through our own educational achievements and the sponsorship of the ADHA and NDHRA, our profession has the potential to break the barrier of confinement to the private practice dental office and whole heartedly penetrate the new and improved health care system across the nation.