



Dental Assistant
Delineation of Privileges

Name: _____
(Please print)

- Initial privileges (initial appointment)
Renewal of privileges (reappointment, on 2 year specialty cycles)
Modification of privileges (request for any additional privileges beyond those previously granted)

Basic Education: No formal professional education required.

Required current experience: Current Tennessee State Dental Assisting License.
Current BLS certification required.

Table with 5 columns: Facility (Check ALL that are applicable to your request), Baroness*, Children's**, North, East, Bledsoe/Sequatchie

* Includes BEH Main Hospital, Miller Eye Center, Plaza Surgery and all Erlanger Ambulatory Clinics
**Includes Children's Hospital Inpatient, Children's Ambulatory clinics, Children's OR and Kennedy Children's Outpatient Center

Surgical Dental Assistant Privileges:

Perform in scrubbing mode, passing instruments and assuming responsibility for physician employer's instruments and equipment as appropriate. Perform in second assistant mode, retracting tissues and providing exposure using instruments. Perform in first assistant mode providing exposure, providing hemostasis, irrigating, and handling tissue.

Clinical Dental Assistant Privileges:

Access to patient's legal record, record information in patient's legal record, visit patients with their physician employer, and assist physician employer with diagnostic procedures.

Request for Privilege Not Listed (please list the privilege and provide justification as well as any accompanying certifications or case logs)

Two horizontal lines for text entry.

Department Chief Recommendation:

I have reviewed the requested clinical privileges and supportive documentation for the above named applicant.

Recommended as Requested

Recommended with Modifications (See comments below)

Not Recommended (See comments below)

Chief Comments: _____

Provider Signature

Date

Chief Signature

Date