

Career Center

Career Paths

Define your role.

Working in a private dental office continues to be the primary place of employment for dental hygienists. For today's dental hygiene professional, there are many other career pathways to explore as well. Never before has there been more opportunity for professional growth. How and where you work today is up to you.

Let your dental hygiene education and experience open doors to YOUR career path and consider the possibilities...

Learn More

The Path to a New Career (/resources-docs/72615 The Path to a New Career.pdf).
The Roles of a Dental Hygienist (/resources-docs/The Roles of a Dental Hygienist.pdf).

Clinician:

Dental hygienists in a clinical role assess, diagnose, plan, implement, evaluate and document treatment for prevention, intervention and control of oral diseases, while practicing in collaboration with other health professionals. Examples of clinical settings include:

- · Private dental practices
- · Community clinics
- · Hospitals
- · University dental clinics
- Prison facilities
- · Nursing homes
- Schools

Corporate:

Corporate dental hygienists are employed by companies that support the oral health industry through the sale of products and services. Leaders throughout the dental industry often employ dental hygienists due to their clinical experience and understanding of dental practice. Examples of corporate positions include:

- · Sales representatives
- Product researchers
- Corporate educators
- Corporate administrators

Public Health:

Community Health programs are typically funded by government or nonprofit organizations. These positions often offer an opportunity to provide care to those who otherwise would not have access to dental care. Examples of public health opportunities include a variety of roles and settings:

- · Clinicians, Administrators, Researchers
- · State Public Health Officer
- Community Clinic Administrator
- · Indian Health Service
- Head Start programs
- Local health departmentsNational Health Service Corps
- School sealant programs
- Rural or inner city community clinics

Researcher:

Research conducted by dental hygienists can be either qualitative or quantitative. Quantitative research involves conducting surveys & analyzing the results, while qualitative research may involve testing a new procedure, product, or theory for accuracy or effectiveness. Examples of research settings include:

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Colleges and universities

OK, I Agree

No, give me more info please

- · Corporations
- · Governmental agencies
- · Nonprofit organizations

Educator:

Dental Hygiene educators are in great demand. Colleges and universities throughout the U. S. require dental hygiene instructors who use educational theory and methodology to educate competent oral health care professionals. Corporations also employ educators who provide continuing education to licensed dental hygienists. Examples of education positions may be full time or part time and include:

- · Clinical instructors
- · Classroom instructors
- · Program directors
- · Corporate educators

Administrator:

Dental hygienists in administrative positions apply organizational skills, communicate objectives, identify and manage resources, and evaluate and modify programs of health, education and health care. Examples of administrative positions include:

- · Clinical Director, statewide school sealant program
- · Program Director, dental hygiene educational program
- · Dean of Health Sciences, educational institution
- · Executive Director, state association staff
- · Director, corporate sales

Entrepreneur:

By using imagination and creativity to initiate or finance new commercial enterprises, dental hygienists have become successful entrepreneurs in a variety of businesses. Entrepreneurial opportunities developed by dental hygienists include:

- · Product Development and Sales
- · Practice Management Company
- · Employment Service
- CE provider or Meeting Planner
- Consulting Business
- · Founder of Nonprofit
- Independent Clinical Practice
- Professional Speaker / Writer

Learn more about the <u>education (/dental-hygiene-programs)</u>, <u>licensure (/licensure)</u>, and training required for dental hygiene career options.

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DENTAL HYGIENISTS AT WORK

FIND THE ROLE THAT'S RIGHT FOR YOU.

More than ever, the connection between oral health and overall health and wellness is being made. The demand for dental hygiene services has always been strong and we will continue to adapt and change to meet the health and safety needs of our patients.

While working in a private dental office continues to be the primary place of employment for dental hygienists, how and where you work today is up to you. With so many professional roles to choose from, it is important to consider which setting and capacity is right for you.

CLINICAL

Get ready to assess, diagnose, plan, implement, evaluate and document treatment for the prevention, intervention and control of oral diseases while collaborating with other health professionals.

Clinical settings include:

- Private dental practices
- Community clinics
- Hospitals
- University dental clinics
- Prison facilities
- Nursing homes
- Schools
- Dental service organizations (DSO)
- Military
- Multi-specialty clinic

CORPORATE

Put your clinical experience and understanding of dental practice to use for a company that supports the oral health industry through the sale of products and services. Corporate roles include:

- Sales Representatives
- Product Researchers
- Corporate Educators
- Corporate Administrators

EDUCATION

If educational theory and methodology interest you, you'll be in high demand as a dental hygienist educator. Education can be a secondary setting for clinicians. Corporations also employ educators who provide continuing education to licensed dental hygienists. Roles include:

- Clinical Instructors
- Program Directors
- Classroom Instructors
- Adjunct Faculty

PUBLIC HEALTH

Community Health programs are typically funded by government or nonprofit organizations. In this role, you'll be able to provide dental care to those in need. Opportunities in public health include:

Clinician

- Rural or inner-city community clinics
- Federally Qualified Health Center (FQHC)
- Indian Health Service
- Community Health Center
- Head Start programs
- School sealant programs

Administrator

- State Public Health Officer
- Community Clinic Administrator

RESEARCH

Research opportunities for dental hygienists are described as qualitative or quantitative. With quantitative, you may be conducting surveys and analyzing results. In a qualitative research role, you may be testing a new procedure, product, or theory for accuracy and effectiveness. Typical research settings include:

- Colleges and universities
- Corporations
- Governmental agencies
- Nonprofit organizations

ADMINISTRATION

In an administrative position, you'll put your organizational, communication, and resource management skills to use. You will also be evaluating and modifying programs for education and health care. Positions can include:

- Clinical Director, statewide school sealant program
- Program Director, dental hygiene program
- Executive Director, state association staff
- Research Administrator, university
- Director, corporate sales

ENTREPRENEURIAL

With some imagination and creativity, you can initiate or finance new commercial enterprises as a dental hygienist entrepreneur in a variety of businesses:

- Practice Management
- Product Development & Sales
- Employment Service
- CE Provider or Meeting Planning
- Consulting
- Founder of a Nonprofit
- Independent Clinical Practice
- Professional Speaking/Writing
- RDH-owned Independent Clinical Practice

HEALTHY MOUTHS. HAPPY LIVES.

As a dental hygienist, you know that happiness is bringing oral health to life. ADHA is here for you to help with networking, mentoring and continued learning throughout your career.

Visit adha.org for more.



Overview

The dental hygienist plays an integral role in assisting individuals and groups in achieving and maintaining optimal oral health. Dental hygienists provide educational, clinical and consultative services to individuals and populations of all ages in a variety of settings and capacities. The professional roles of the dental hygienist are outlined below.

Clinician	Corporate	Public Health	Researcher	Educator	Administrator	Entrepreneur
Dental hygienists in a clinical role assess, diagnose, plan, implement, evaluate and document treatment for prevention, intervention and control of oral diseases, while practicing in collaboration with other health professionals. Examples of clinical employment settings include: • Private dental practices • Community clinics	Corporate dental hygienists are employed by companies that support the oral health industry through the sale of products and services. Leaders throughout the dental industry often employ dental hygienists due to their clinical experience and understanding of dental practice. Examples of corporate positions include: • Sales representatives	Community health programs are typically funded by government or nonprofit organizations. These positions often offer an opportunity to provide care to those who otherwise would not have access to dental care. Examples of positions for dental hygienists in public health settings include: Clinician Rural or inner city community clinics	Research conducted by dental hygienists can be either qualitative or quantitative. Quantitative research involves conducting surveys and analyzing the results, while qualitative research may involve testing a new procedure, product or theory for accuracy, effectiveness, etc. Examples of employment settings for dental hygienist researchers include:	Dental hygiene educators are in great demand. Colleges and universities throughout the U.S. require dental hygiene instructors who use educational theory and methodology to educate competent oral health professionals. Corporations also employ educators who provide continuing education to licensed dental hygienists. Examples of dental hygiene educators include:	Dental hygienists in administrative positions apply organizational skills, communicate objectives, identify and manage resources, and evaluate and modify programs of health, education and health care. Examples of administrative positions held by dental hygienists include: • Clinical director, statewide school sealant program	By using imagination and creativity to initiate or finance new commercial enterprises, dental hygienists have become successful entrepreneurs in a variety of businesses. Some examples of business opportunities developed by dental hygienists include: • Practice management company • Product development and sales
Hospitals University dental clinics	Product researchers Corporate adjusters	Indian Health Service Head Start programs	Colleges and universities	Clinical instructors	Program director, dental hygiene educational program	Employment serviceCE provider or meeting
Prison facilities	Corporate educatorsCorporate	Head Start programs School sealant	Corporations	Classroom instructors	Executive director, state	planner
Nursing homes	administrators	programs	Governmental agencies Nonrestit organizations	Program directors	association staff	Consulting business
• Schools		Administrator	Nonprofit organizations	Corporate educators	Research administrator, university	Founder of a nonprofit
		State public health officer			Director, corporate sales	Independent clinical practice
		Community clinic administrator				Professional speaker / writer



Thinking Outside the Box: The Path to a New Career

FAQs

Q: I want to explore my career options outside of traditional clinical practice. Where do I start?

A: Equip yourself with information! These frequently asked questions are designed to provide insight to the process of determining what career paths are available and to identify the first steps necessary for you to begin the next phase of your career journey. Investigation and a thorough understanding of the dental hygiene landscape are the first keys to advancing your career.

Q: What career options are available to a dental hygienist?

A: In addition to clinical practice in private dental offices and clinics, dental hygienists have careers in the fields of education, research, administration, public health and advanced practice. For some great examples of the opportunities available within these fields, visit Working, an Access magazine column profiling dental hygienists working in unique settings.

Q: Are there new career options on the horizon?

A: Yes! This is an exciting time to be a dental hygienist. The profession of dental hygiene is at the crossroads of change, and the variety of career opportunities are expanding as never before. In order to stay relevant in a changing profession and to understand emerging roles, take a fascinating look into the future with the 2011-2021 ADHA Environmental Scan, a must read.

Q: Do I search for a position outside of traditional clinical hygiene the same way I approached my clinical positions?

A: Most entry-level dental hygiene programs focus almost exclusively on preparation for a clinical career, therefore your path to traditional clinical practice was clearly defined. The next stage of your career development requires a new, broader approach. You will need to use the critical thinking skills you have developed as a professional to investigate and pursue additional career options. Rather than a familiar or cookie-cutter approach, YOU design your unique career path through innovation, education and understanding.

Q: What new skill sets will I need?

A: A new career path requires new skill sets. For example, some non-traditional dental hygiene career paths involve clinical practice (collaborative practice, advanced practice, clinical educator, public health clinician, to name a few). Yet in order to be successful in these settings, additional business skills, educational methodology, knowledge of state practice acts and rules, or healthcare



administration knowledge and skills may be necessary. The same is true for career paths with little or no clinical component, such as corporate sales, product development, and didactic education, regulatory or legislative administration. New positions involve different work environments and processes, and therefore different knowledge and skill sets. You already possess valuable knowledge and skills that will transfer to a new setting; the next step is to identify the gaps and develop a plan to address them.

Q: Will I need additional education to advance my career path?

A: It is likely you will need to pursue additional education to advance your career. This may involve continuing education, college courses and/or an additional degree. Often the coursework required for a degree will lead to a career path you had not even envisioned. In order to advance your career, it's important to be open to possibilities and commit to grow through education.

Q: How can I get in touch with others who can help me?

A: We are all better together! Many hygienists have made the transition you are pursuing; seek out people who are willing to mentor you through your journey. Take advantage of networking opportunities whenever possible: attend meetings and CE sessions in your area of interest.

Introduce yourself and ask questions. If you have not been active in your association previously, now is the time to connect through ADHA, on a local, state and national level. Communicating with people outside your current career track is critical in advancing your career.

Q: What resources does ADHA have to help?

A: ADHA is here to here to empower, support and develop YOU. For information regarding career advancement and professional development, including:

- the long range outlook for the profession,
- examples of career opportunities within public health,
- employment trend data,
- job listings,
- resume writing,
- career development CE courses and more

Visit the ADHA website at http://www.adha.org/careerinfo/dhcareers.htm.





FAQs about Dental Hygiene Education Programs and Accreditation

About Accreditation

Q: Does ADHA accredit dental hygiene programs?

A: No. While ADHA continues toward the goal of professional autonomy, which includes educational autonomy, the profession does not currently control all aspects of dental hygiene education. Entry level educational programs are accredited by the Commission on Dental Accreditation (CODA).

Q: What does accreditation mean?

Accreditation is a peer-review process of educational institutions or programs by an independent body that assesses and evaluates the quality of the institution and/or programs that it offers. There are two types of accreditation in the U.S.: (1) institutional (typically provided by a regional accrediting agency) and (2) specialized programmatic (provides accreditation for a specific program of study).

The Commission on Dental Accreditation was established in 1975 and is nationally recognized by the <u>United States Department of Education (USDE)</u> as the sole agency to accredit dental and dental-related education programs conducted at the post-secondary level. CODA's mission is to serve the oral health care needs of the public through the development and administration of standards that foster continuous quality improvement of dental and dental related educational programs. CODA defines accreditation as an evaluation process where an organization or agency (e.g., the Commission) uses experts in a particular field of interest or discipline (e.g., dental education) to define standards of acceptable operation/performance for <u>universities/programs/organizations</u> and measures compliance with them.

The mission of the Commission on Dental Accreditation (CODA) is to serve the public by establishing, maintaining and applying standards that ensure the quality and continuous improvement of dental and dental-related education and reflect the evolving practice of dentistry. The scope of the Commission on Dental Accreditation encompasses dental, advanced dental and allied dental education programs.

Q: Can a dental hygiene program open without CODA accreditation?

A: While graduation from an accredited program is a requirement for dental hygiene licensure, CODA accreditation is voluntary. A program may open without CODA accreditation; however its graduates would not be eligible for licensure in most states.

Q: Do students who graduate from a for-profit program receive the same level of education as a non-profit program?

A: During its review process, the Commission evaluates programs in relation to predetermined

standards which afford educational institutions latitude and flexibility in program development and implementation. In evaluating the educational process, the Commission applies the established accreditation standards for each discipline uniformly to all programs. CODA Accreditation Standards

All students who graduate from a CODA accredited programs are eligible to sit for national and regional board exams in order to become a licensed dental hygienist.

Proliferation of Programs

Q: Does CODA take into account the number of existing dental hygiene programs in a specific area when a new program is seeking accreditation?

A: Recently revised language in the Initial Application for CODA program accreditation reads:

- 1. Describe the results of the institutional needs assessment that provided the basis for initiating a new program.
- 2. Provide evidenced-based documentation of current and local/regional data which verifies an adequate patient population, qualified faculty and administration, and present employment opportunities for graduates.

Q: Does CODA take into account the saturation level of dental hygienists in a specific area when a new program is seeking accreditation?

A: When a new program applies for initial accreditation through CODA, the following is now included as part of the Initial Application:

- 1. Describe the results of the institutional needs assessment that provided the basis for initiating a new program.
- 2. Provide evidence-based documentation of current and local/regional data which verifies an adequate patient population, qualified faculty and administration, and present employment opportunities for graduates.

Q: Does CODA regulate the number of graduates allowed at a specific program?

A: The mission of CODA is to serve the public by establishing, maintaining and applying standards that ensure the quality and continuous improvement of dental and dental-related education and reflect the evolving practice of dentistry. The Commission's purview is the quality of educational programs, as opposed to the effect of graduates on the job market; therefore the Commission considers the number of program graduates only in terms of program resources.

Q: Is ADHA aware of the current unemployment climate for dental hygienists?

A: Yes, and ADHA has developed a number of employment resources for members including

- The Career Center
- An employment reference guide
- A Path to a New Career FAQ
- Career Opportunities in Public Health Presentation
- Leadership workshops
- An environmental scan detailing the future outlook of the profession
- CE courses at CLL at annual session
- Valuable networking and volunteer opportunities
- Transforming Dental Hygiene Education and the Profession for the 21st Century

For a list of all member benefits please visit http://www.adha.org/aboutadha/benefits.htm .

Q: What is ADHA doing to advocate on behalf of dental hygienists in regard to the proliferation of schools?

A: The approach is two-fold; at the national and local level.

- The ADHA Division of Education maintains a current data base of all accredited dental hygiene education programs by state. This is a listing of educational programs which offer degrees or certificates that provide entry to the professional practice of dental hygiene.
- The ADHA Council on Education regularly reviews the <u>Accreditation Standards for Dental Hygiene Education Programs</u> developed by CODA, and has provided ongoing comments to CODA regarding recommended changes. While some of the recommendations made by ADHA have been adopted, those that have not continue to be revisited by the Council who continue to pursue these recommendations through CODA.
- ADHA staff regularly attends CODA meeting open sessions, including those of the full Commission as well as the Dental Hygiene Review Committee.
- In 2010 2011, ADHA coordinated a letter writing campaign that resulted in CODA receiving
 nearly 700 letters from ADHA members expressing concern about the proliferation of programs
 and urging CODA to REQUIRE that new dental hygiene programs conduct a comprehensive
 needs assessment prior to applying for accreditation. CODA adopted this change on February
 3, 2012, with an implementation date of January 1, 2013.

The most significant advocacy role to address the opening of new dental hygiene education programs is through the state and local dental hygiene association:

- State higher education authorities seek state-based or regional-based workforce information
 that assists them in making decisions regarding program need in their specific geographical
 area. When potential programs contact our office for information or guidance, ADHA
 recommends they complete an analysis of the local, state, and regional employment market
 and review existing programs in the area. ADHA provides them with ADHA state contacts so
 they can obtain employment information firsthand.
- ADHA assists state and local associations in determining a strategy in approaching developing programs

Q: I've heard rumors that a program is developing in my area. Who can I contact to express my concern?

A: There are several steps involved in establishing a new program. First, institutions of higher education that wish to sponsor a dental hygiene education program seek approval through the state. Secondly, programs seek voluntary accreditation from the Commission on Dental Accreditation.

FOR DEVELOPING PROGRAMS IN THE PROCESS OF SEEKING STATE APPROVAL:

Individuals or state dental hygiene associations who wish to contact one or more state education organizations/agencies may consult the ADHA Education Database available under Members Resources. The ADHA Higher Education Database contains information such as Higher Education Agencies, Organizations of Independent (Not-for-Profit) Colleges and Universities, Proprietary (For-Profit) Private Higher Education, State Board of Regents, Accreditation, and Regional Boards of Higher Education. Included in this database are specific questions you may wish to ask (as appropriate to your region, your state, your community), as well as resources and data that the state association could offer.

FOR DEVELOPING PROGRAMS IN THE PROCESS OF SEEKING CODA INITIAL ACCREDITATION:

Individuals or state dental hygiene associations may wish to contact the director or dean at the developing institution. A list of specific questions you may wish to ask (as appropriate to your region, your state, your community), as well as resources and data that the state association could offer are available on the ADHA website in Member Resources. You might also offer to sit on the **program's** advisory committee, so you have the opportunity to offer suggestions as the program develops.

While specific CODA program application information is confidential and will not be discussed, you may also contact CODA to share data and express concerns. The initial CODA contact is: Patrice Renfrow, Manager, Dental Hygiene Education, Commission on Dental Accreditation (CODA) at: renfrowp@ada.org or by phone at: 312-440-2705.

Q: How can I stay up-to-date on ADHA's initiatives regarding the proliferation of dental hygiene programs?

A: Regularly monitor all of the ADHA communication channels, Spotlight, listservs and ADHA Update for the latest educational advocacy updates. The ADHA website is also updated regularly with information. Please visit www.adha.org to find more information.

ADHA's Role in For-Profit Programs

Q: What is ADHA's position on For-profit programs?

A: Existing ADHA policies regarding the opening of new programs most notably support that <u>there must</u> <u>be a demonstrated need for a new program.</u> ADHA's advocacy role with the Commission on Dental Accreditation is to continue to express the importance of a comprehensive needs assessment prior to the granting of initial accreditation status of any proposed dental hygiene education program. ADHA has provided specific recommendations to the Commission to require developing programs that seek accreditation demonstrate evidence supporting the need for the program. **CODA adopted this change on February 3, 2012, with an implementation date of January 1, 2013.**

Once a program receives accreditation from CODA, it is recognized as a qualified dental hygiene program. All students, faculty and graduates are welcomed into our ADHA community.

Q: Can students from for-profit schools apply for ADHA student membership?

A: Yes. All dental hygiene students enrolled in an accredited program are encouraged to apply for membership.

Q: Can faculty at for-profit programs apply for ADHA membership?

A: Yes, any licensed dental hygienist can apply for membership and join the ADHA community. ADHA is an inclusive community that welcomes hygienists in a variety of workplace settings including dental hygiene education.

Q: As a state officer how do I approach a for-profit program?

A: Once a program is accredited it is part of the ADHA community. You should encourage membership for students and faculty as you would any program. In fact, some of your current constituent members may be teaching in for-profit programs in your area and graduates will one day be your professional colleagues. When planning your visit, please go to the student section under the Members Resources for valuable tools and resources.

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Dental team careers

Want to become a dental hygienist, dental assistant, lab technician, or a community dental coordinator? Learn more here.

Dental hygienist

As a dental hygienist, you will play an essential role in helping patients maintain good oral health. Performing regular cleanings and offering helpful tips for effective home care are among the key duties in your job description.

What does a dental hygienist do?

- Performs patient screening procedures, including x-rays
- Teaches patients how to practice good oral hygiene
- Applies preventive materials such as fluoride and sealants to the teeth
- Counsels patients regarding good nutrition and its impact on oral health
- Removes calculus and plaque (hard and soft deposits) from the teeth

Where do dental hygienists work?

- Dental offices of general dentists and dental specialists
- Public health agencies, hospitals and community health clinics
- Public school systems, dental schools and dental hygiene education programs
- Sales and research for dental equipment and products

What benefits does a dental hygiene career offer?

Personal satisfaction: One of the most enjoyable aspects of a career in dental hygiene is working with people. Personal fulfillment comes from providing a valuable health care service while establishing trusting relationships with patients.

Prestige: As a result of their education and clinical training in a highly skilled discipline, dental hygienists are respected as valued members of the oral health care team.

Variety: Dental hygienists use a variety of interpersonal and clinical skills to meet the oral health needs of many different patients each day. Hygienists have opportunities to help special population groups such as children, the elderly and the disabled. They may also provide oral health instruction in primary and secondary schools and other settings.

Creativity: Because dental hygienists interact with such diverse population groups, they must be creative in their approach to patient management and oral health education.

Flexibility: Full-time and part-time employment options and the availability of evening and weekend hours enable dental hygienists to balance their career and lifestyle needs. Hygienists also have opportunities to work in a wide variety of settings, including private dental practices, educational and community institutions, research teams and large group practices.

Security: Dental hygiene is projected to be one of the 30 fastest growing occupations in future years. Due to the success of preventive dentistry in reducing the incidence of oral disease, the expanding older population will retain their teeth longer, and will be even more aware of the importance of regular dental care. With the emphasis on preventive care, dentists will need to employ more dental hygienists than ever before to meet the increased demand for dental services.

Opportunities for non-traditional students: If you've been out of school for a while but are seeking a career change, dental hygiene may be an excellent choice for you. Online learning and flexible scheduling will benefit students with family responsibilities as well as those who are working while they learn.

How can I train to become a dental hygienist?

There are more than 300 accredited dental hygiene education programs in community colleges, technical colleges, dental schools and universities across the U.S. Most associate degree programs take at least two years to complete. Some universities offer four-year baccalaureate programs. Innovative training methods include distance learning and institution-based, didactic coursework combined with community experience.

You will receive hands-on clinical instruction in the form of supervised patient care experiences. Dental hygiene programs may also include courses in liberal arts (for example, English, speech, sociology and psychology); basic sciences (anatomy, physiology, pharmacology, immunology, chemistry, microbiology or pathology); and clinical sciences (dental hygiene, radiology and dental materials).

After completing your dental hygiene education, you may choose to seek additional training in areas such as education, business administration, basic sciences, marketing and public health.

When your coursework is complete, you can become a registered dental hygienist (RDH) by passing the National Board Dental Hygiene Examination (a written test) and the authorized licensure exam in your state.

Where can I find more career resources?

To learn more about careers in dental hygiene, contact your own dentist, dental hygienist or the dental society in your area. Arrange to visit a nearby dental office to observe a dental hygienist at work. You also can contact an accredited dental hygiene program to meet with a counselor or schedule a visit to the school. For more information on accredited dental hygiene education programs and continuing education courses, contact:

The Commission on Dental Accreditation (CODA)

The American Dental Hygienists' Association (ADHA)

The American Dental Education Association (ADEA)

ADA CERP Dental Team Courses

ADACEOnline.org

Dental assistant

As a dental assistant, you will handle a wide range of tasks such as taking x-rays and impressions and helping make patients comfortable before, during and after treatment.

Visit the <u>American Dental Assistants Association</u>, for information on Dental Assistants Recognition Week, March 6-12, 2022. This year's theme is: Dental Assistants: Passionate About Our Patients, Dedicated to Our Profession.

What does a dental assistant do?
Where do dental assistants work?
What benefits does a dental assistant career offer?
How can I train to become a dental assistant?
Where can I find more career resources?
Dental laboratory technician Dental lab technicians blend art and science to create custom dentures, crowns, veneers and orthodontic appliances that restore smiles — and confidence.
What does a dental lab technician do?
Where do dental lab technicians work?
What benefits does this career offer?
How can I train to become a dental lab technician?
Where can I find more career resources?

Community Dental Health Coordinator (CDHC)

In 2006, the ADA launched the community dental health coordinator program to provide support and services for people who may have difficulty gaining access to quality dental care. Learn more about this emerging role and what it takes to become a CDHC.

What does a CDHC do?		
Where do CDHCs work?		
What benefits does this career offer?		
How can I train to become a CDHC?		
Where can I find more career resources?		
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CCUPATIONAL OUTLOOK HANDBOOK

Search Handbook

Dental Hygienists

PRINTER-FRIENDLY

Go

Summary	What They Do	Work Environment	How to Become One	Pay	Job Outlook	State & Area Data	Similar Occupations	More Info
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Summary

Summary

Quick Facts: Dental Hygienists						
2020 Median Pay	\$77,090 per year \$37.06 per hour					
Typical Entry-Level Education	Associate's degree					
Work Experience in a Related Occupation	None					
On-the-job Training	None					
Number of Jobs, 2020	206,100					
Job Outlook, 2020-30	11% (Faster than average)					
Employment Change, 2020-30	23,100					



What Dental Hygienists Do

Dental hygienists examine patients for signs of oral diseases, such as gingivitis, and provide preventive care, including oral hygiene.

Work Environment

Nearly all dental hygienists work in dentists' offices, and many work part time.

How to Become a Dental Hygienist

Dental hygienists typically need an associate's degree in dental hygiene. Programs usually take 3 years to complete. All states require dental hygienists to be licensed; requirements vary by state.

<u>Pay</u>

The median annual wage for dental hygienists was \$77,090 in May 2020.

Job Outlook

Employment of dental hygienists is projected to grow 11 percent from 2020 to 2030, faster than the average for all occupations.

About 15,600 openings for dental hygienists are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire.

State & Area Data

Explore resources for employment and wages by state and area for dental hygienists.

Similar Occupations

Compare the job duties, education, job growth, and pay of dental hygienists with similar occupations.

More Information, Including Links to O*NET

Learn more about dental hygienists by visiting additional resources, including O*NET, a source on key characteristics of workers and occupations.

What They Do

What Dental Hygienists Do

Dental hygienists examine patients for signs of oral diseases, such as gingivitis, and provide preventive care, including oral hygiene. They also educate patients about oral health.

Duties

Dental hygienists typically do the following:

- Remove tartar, stains, and plaque from teeth
- Apply sealants and fluorides to help protect teeth
- Take and develop dental x rays
- Assess patients' oral health and report findings to dentists
- Document patient care and treatment plans
- Educate patients about oral hygiene techniques, such as how to brush and floss correctly

What They Do ->

About this section



Dental hygienists use many types of tools—including hand, power, and ultrasonic tools—in their work. In some cases, they use lasers. Hygienists remove stains with an air-polishing device, which sprays a combination of air, water, and baking soda. They polish teeth with a power tool that works like an automatic toothbrush. Hygienists also use x-ray machines to take pictures to check for tooth or jaw problems.

Dental hygienists wear safety glasses, surgical masks, and gloves to protect themselves and their patients from diseases.

Dental hygienists talk to patients about ways to keep their teeth and gums healthy. For example, they may explain the relationship between diet and oral health. They may also advise patients on how to select toothbrushes and other oral care devices.

The tasks hygienists may perform, and the extent to which they must be supervised by a <u>dentist</u>, vary by state and by the setting in which the dental hygienist works. A few states allow hygienists with additional training, sometimes called *dental therapists*, to provide some restorative services, such as extracting primary teeth and placing temporary crowns.

<- Summary

Work Environment ->

Work Environment

Work Environment About this section

Dental hygienists held about 206,100 jobs in 2020. The largest employers of dental hygienists were as follows:

Offices of dentists 94%
Offices of physicians 1
Government 1

Dental hygienists wear safety glasses, surgical masks, and gloves to protect themselves and patients from infectious diseases. When taking x rays, they follow procedures to protect themselves and patients from radiation.

Work Schedules

Many dental hygienists work part time. <u>Dentists</u> may hire hygienists to work only a few days a week, so some hygienists work for more than one dentist.



Dental hygienists discuss diet and other topics that affect a patient's dental health.

How to Become One ->

About this section

<- What They Do
How to Become One

How to Become a Dental Hygienist

Dental hygienists typically need an associate's degree in dental hygiene. Programs usually take 3 years to complete. All states require dental hygienists to be licensed; requirements vary by state.

Education

Dental hygienists typically need an associate's degree in dental hygiene; they may also get a bachelor's degree. Master's degree programs in dental hygiene are available but are relatively uncommon. A bachelor's or master's degree usually is required for research, teaching, or clinical practice in public or school health programs.

Dental hygiene programs are often found in community colleges, technical schools, and universities. The _________, part of the American Dental Association, accredits more than 300 dental hygiene programs.

Programs typically take 3 years to complete and offer laboratory, clinical, and classroom instruction. Areas of study include anatomy, medical ethics, and periodontics, which is the study of gum disease.



Dental hygienists remove tartar and plaque from teeth

High school students interested in becoming dental hygienists should take courses in biology, chemistry, and math. Most dental hygiene programs also require applicants to complete prerequisites, which often include college-level courses. Specific requirements vary by school.

Important Qualities

Critical thinking. Dental hygienists must be able to assess and evaluate patients and to develop oral hygiene care plans.

Communication skills. Dental hygienists must share information with <u>dentists</u> and patients about oral health status, oral hygiene care plans, and, if necessary, lifestyle counseling.

Detail oriented. Dental hygienists must follow specific rules and protocols to help dentists diagnose and treat a patient. Depending on the state in which they work and/or the treatment provided, dental hygienists may work without the direct supervision of a dentist.

Dexterity. Dental hygienists must be good at working with their hands. They generally work in tight spaces on a small part of the body, which requires fine motor skills using precise tools and instruments.

Interpersonal skills. Dental hygienists work closely with dentists. They also must be considerate in working with patients, especially with those who are sensitive to pain or who have fears about undergoing dental treatment.

Problem-solving skills. Dental hygienists develop and implement oral hygiene care plans to maintain or improve patients' oral health.

Licenses, Certifications, and Registrations

Every state requires dental hygienists to be licensed; requirements vary by state. In most states, a degree from an accredited dental hygiene program and passing written and clinical examinations are required for licensure. To maintain licensure, hygienists must complete continuing education requirements. For specific requirements, contact your state's Board of Dental Examiners.

Many jobs also require cardiopulmonary resuscitation (CPR) certification.

<- Work Environment

Pay



Pay About this section

The median annual wage for dental hygienists was \$77,090 in May 2020. The median wage is the wage at which half the workers in an occupation earned more than that amount and half earned less. The lowest 10 percent earned less than \$54,200, and the highest 10 percent earned more than \$104,420.

In May 2020, the median annual wages for dental hygienists in the top industries in which they worked were as follows:

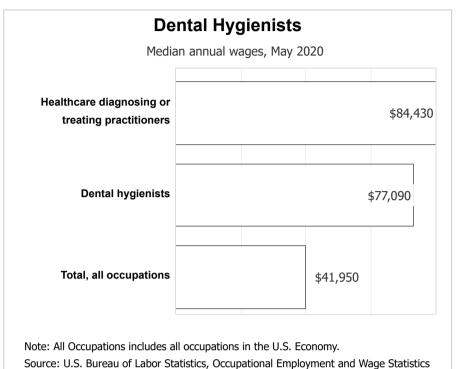
Offices of dentists \$77,330 Offices of physicians 75,590 Government 65,080

Benefits, such as vacation, sick leave, and retirement contributions, vary by employer and may be available only to full-time workers.

Many dental hygienists work part time. Dentists may hire hygienists to work only a few days a week, so some hygienists work for more than one dentist.

<- How to Become One

Job Outlook



Job Outlook ->

About this section

Job Outlook

Employment of dental hygienists is projected to grow 11 percent from 2020 to 2030, faster than the average for all occupations.

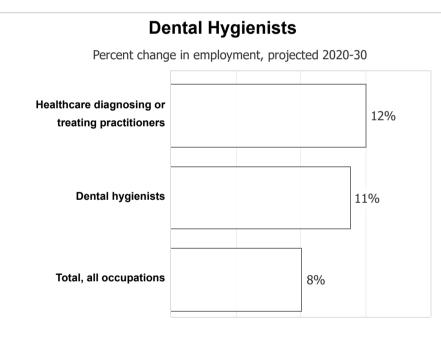
About 15,600 openings for dental hygienists are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire.

Employment

Some of the projected employment growth in this occupation is due to recovery from the COVID-19 recession that began in 2020.

Demand for dental services will increase as the large baby-boom population ages and as people keep more of their original teeth than in previous generations.

Studies linking oral health and general health, along with efforts to expand access to oral hygiene services, will continue to drive demand for preventive dental services, including those performed by hygienists. In addition, demand for dental hygienists is expected to grow as state laws increasingly allow dental hygienists to work at the top of their training.



Note: All Occupations includes all occupations in the U.S. Economy. Source: U.S. Bureau of Labor Statistics, Employment Projections program

Employment projections data for dental hygienists, 2020-30

					Change,	2020-30	
Occup	ational Title	SOC Code	Employment, 2020	Projected Employment, 2030	Percent	Numeric	Employment by Industry
Denta	l hygienists	29-1292	206,100	229,200	11	23,100	<u>Get data</u>
SOURCE: U.S. Bureau of Labor Statistics, Employment Projections program							

<- Pay

State & Area Data ->

State & Area Data

State & Area Data

About this section

Occupational Employment and Wage Statistics (OEWS)

The Occupational Employment and Wage Statistics (OEWS) program produces employment and wage estimates annually for over 800 occupations. These estimates are available for the nation as a whole, for individual states, and for metropolitan and nonmetropolitan areas. The link(s) below go to OEWS data maps for employment and wages by state and area.

Dental hygienists

Projections Central

Occupational employment projections are developed for all states by Labor Market Information (LMI) or individual state Employment Projections offices. All state projections data are available at www.projectionscentral.com. Information on this site allows projected employment growth for an occupation to be compared among states or to be compared within one state. In addition, states may produce projections for areas; there are links to each state's websites where these data may be retrieved.

CareerOneStop

CareerOneStop includes hundreds of <u>occupational profiles</u> with data available by state and metro area. There are links in the left-hand side menu to compare occupational employment by state and occupational wages by local area or metro area. There is also a <u>salary info tool</u> to search for wages by zip code.

<- Job Outlook

Similar Occupations ->

Similar Occupations

Similar Occupations

About this section

This table shows a list of occupations with job duties that are similar to those of dental hygienists.

	OCCUPATION	OCCUPATION JOB DUTIES		2020 MEDIAN PAY 🗐
	<u>Dental Assistants</u>	Dental assistants provide patient care, take x rays, keep records, and schedule appointments. Postsecondary none award		\$41,180
4	<u>Dentists</u>	Dentists diagnose and treat problems with patients' teeth, gums, and related parts of the mouth.	Doctoral or professional degree	\$164,010
	Medical assistants complete administrative and clinical tasks in hospitals, offices of physicians, and other healthcare facilities. Medical Assistants Postse award		Postsecondary nondegree award	\$35,850
	Physician Assistants	Physician assistants practice medicine on teams with physicians, surgeons, and other healthcare workers.	Master's degree	\$115,390
1	Physicians and Surgeons	Physicians and surgeons diagnose and treat injuries or illnesses and address health maintenance.	Doctoral or professional degree	This wage is equal to or greater than \$208,000 per year.
	Radiation Therapists	Radiation therapists treat cancer and other diseases in patients by administering radiation treatments.	Associate's degree	\$86,850
	Radiologic and MRI Technologists	Radiologic technologists perform diagnostic imaging examinations on patients. MRI technologists operate magnetic resonance imaging (MRI) scanners to create diagnostic images.	Associate's degree	\$63,710
Registered Nurses		Registered nurses (RNs) provide and coordinate patient care and educate patients and the public about various health conditions.	Bachelor's degree	\$75,330

<- State & Area Data

More Info

More Info ->

Contacts for More Information

About this section

For information about educational requirements and available accredited programs for dental hygienists, visit

American Dental Hygienists' Association

For information about accredited programs and educational requirements, visit

Commission on Dental Accreditation, American Dental Association

The State Board of Dental Examiners in each state can provide information on licensing requirements.

CareerOneStop

For a career video on dental hygienists, visit

Dental Hygienists

O*NET

Dental Hygienists

<- Similar Occupations

SUGGESTED CITATION:

Bureau of Labor Statistics, U.S. Department of Labor, *Occupational Outlook Handbook*, Dental Hygienists, at https://www.bls.gov/ooh/healthcare/dental-hygienists.htm (visited *January 21, 2022*).

Last Modified Date: Wednesday, September 8, 2021

U.S. BUREAU OF LABOR STATISTICS Office of Occupational Statistics and Employment Projections PSB Suite 2135 2 Massachusetts Avenue NE Washington, DC 20212-0001

Telephone:1-202-691-5700_ www.bls.gov/ooh Contact OOH







Dental Hygienists

<u>Also called:</u> Dental Hygienist, Hygienist, Licensed Dental Hygienist, Registered Dental Hygienist (RDH)



What they do:

Administer oral hygiene care to patients. Assess patient oral hygiene problems or needs and maintain health records. Advise patients on oral health maintenance and disease prevention. May provide advanced care such as providing fluoride treatment or administering topical anesthesia.

On the job, you would:

- · Record and review patient medical histories.
- Feel and visually examine gums for sores and signs of disease.
- Examine gums, using probes, to locate periodontal recessed gums and signs of gum disease.

Knowledge

Health

medicine and dentistry

Business

· customer service

Math and Science

psychology

Skills

Basic Skills

- · listening to others, not interrupting, and asking good questions
- · talking to others

Social

- looking for ways to help people
- · understanding people's reactions

Abilities

Hand and Finger Use

- · keep your arm or hand steady
- put together small parts with your fingers

Verbal

- · communicate by speaking
- · listen and understand what people say

Ideas and Logic

- notice when problems happen
- make general rules or come up with answers from lots of detailed information

Attention

· do two or more things at the same time

Personality

People interested in this work like activities that include helping people, teaching, and talking.

They do well at jobs that need:

- Concern for Others
- Integrity
- Dependability

- Cooperation
- Self Control
- Adaptability/Flexibility

Technology

You might use software like this on the job:

Medical software

- Henry Schein Dentrix
- Patterson Dental Supply Patterson EagleSoft

Spreadsheet software

Microsoft Excel

Electronic mail software

· Email software

Education



associate's degree or professional degree usually needed

Job Outlook



New job opportunities are very likely in the future.



Explore More

- Cardiovascular Technologists & Technicians
- Dental Assistants
- Librarians & Media Collections Specialists
- Physical Therapist Aides
- Radiation Therapists

You might like a career in one of these industries:

• Health & Counseling



Oral Health Workforce Projections, 2017-2030: Dentists and Dental Hygienists

This factsheet presents national-level supply and demand projections for dentists and dental hygienists from 2017 through 2030 using HRSA's Health Workforce Simulation Model (HWSM).¹

Dentists are licensed oral health care providers who diagnose, treat and prevent oral diseases, and perform surgical procedures on the teeth, bone and soft tissues of the oral cavity. Dentists may also serve as researchers or teachers, including supervising students in dental schools.² To become a dentist, an individual most often must complete four years of undergraduate education and earn a Doctor of Dental Surgery (DDS), Doctor of Dental Medicine (DMD), or Doctor of Medicine in Dentistry (DMD) degree from an accredited dental program. Additional post-doctoral training is required to become certified as a dental specialist (e.g., periodontist, oral surgeon, endodontist, orthodontist, etc.). This training usually requires a 2- to 6-year residency

About the National Center for Health Workforce Analysis

The National Center for Health Workforce Analysis informs public and private sector decision-makers on health workforce issues by expanding and improving health workforce data, disseminating workforce data to the public, and improving and updating projections of the supply and demand for health workers. Visit the website: https://bhw.hrsa.gov/national-center-health-workforce-analysis

in an accredited program related to the chosen specialty.² Although licensure requirements vary by state, most states require a dentist to have a DDS or DMD degree and pass both written and clinical exams before being granted a license to practice.³

Dental hygienists are licensed oral health care professionals who clean teeth, examine patients for signs of oral diseases such as gingivitis, and provide other preventive dental care. They also educate patients about oral health.³ A dental hygienist typically needs an associate's degree in dental hygiene, which usually takes 3 years to complete. All states require dental hygienists to be licensed, although licensure requirements and scopes of practice vary by state.

METHODS

While the nuances of modeling workforce supply and demand may differ to a small extent for individual health occupations, the basic HWSM framework remains the same across all occupations. For supply modeling, the HWSM's major components include common labor-market factors like unemployment and new entrants to the workforce (e.g., newly trained dentists and dental hygienists), demographic and geographic characteristics of

¹ This model uses a micro-simulation approach where supply is projected based on the simulation of career choices of individual health workers. Demand for health care services is simulated for a representative sample of the current and future U.S. population based on each person's demographic and socioeconomic characteristics, health behavior, and health risk factors that affect their health care utilization patterns. For more information on data and methods, please see: https://bhw.hrsa.gov/sites/default/files/bhw/nchwa/projections/hwsm-technical-report-to-dea.pdf.

² American Dental Association. Dentists: Doctors of Oral Health [online]. October, 2019. Accessed at: https://www.ada.org/en/about-the-ada/dentists-doctors-of-oral-health.

³ Composite descriptions of health occupations examined in this report are sourced from: Bureau of Labor Statistics. Occupational Outlook Handbook, Dentists and Dental Hygienists [online]. October, 2019. Accessed at: https://www.bls.gov/ooh/healthcare/dentists.htm and https://www.bls.gov/ooh/healthcare/dentists.htm and https://www.bls.gov/ooh/healthcare/dentists.htm.

the existing workforce, and workforce participation decisions (e.g., patterns in retirement and hours worked). The model assumes that current supply patterns for oral health professionals remain the same throughout the forecast period and projects forward in one-year increments. Each annual supply estimate becomes the starting point for the subsequent year, with the process repeated through 2030.

For demand modeling, the HWSM assumes that demand equals supply in 2017,⁴ the baseline year of study for which data is available for analysis, and applies current, national-level oral health utilization patterns across future population demographics. The model provides demand projections under a "status quo" scenario, which assumes current oral health care use and delivery patterns for dental services remain the same in 2030 as they are in 2017. Using these assumptions and population inputs, the model attempts to capture national-level changes in disease burden and health use behavior associated with large-scale population and demographic changes. However, the model only accounts for shifts in dentist or dental hygienist usage from large predictable population changes, such as aging of the population.

The status quo scenario does not reflect potential changes in oral health care utilization patterns in future years resulting from advancements in medicine and technology, or from shifts in oral health care delivery and payment models. Quantifying changes to demand due to innovations in oral health care delivery models, payment reform, team-based care, health-seeking behaviors, and other health system-level factors presents many challenges. HRSA will continue incorporating such factors into its future workforce projections as the evidence-base evolves and reliable data sources become available.

FINDINGS: DENTISTS

Nationally, approximately 190,510 full-time equivalent (FTE) dentists across all dental specialties were active in the U.S. workforce in 2017. This includes approximately 151,170 general dentists and 7,320 pediatric dentists, with the remaining 32,020 dentists providing specialty care. The total supply (the sum of all types of dentists included in study) is predicted to increase by 9 percent to 207,930 FTEs in 2030, which is similar to the projected growth in the U.S. population between 2017 and 2030. However, supply is projected to grow at a faster rate for some specialists, including pediatric dentists (50 percent), endodontists (17 percent), orthodontists (16 percent) and oral surgeons (13 percent). The supply of general dentists is projected to grow 6 percent over the projection period, while no growth in supply is projected for periodontists (*Exhibit* 1).

Under the status quo scenario, the national demand for dentists is projected to increase by 9 percent to 206,850 FTEs in 2030. Roughly similar growth rates are also predicted in the demand for general dentists (9 percent), oral surgeons (7 percent), endodontists (7 percent), periodontists (11 percent) and other dentists (12 percent), while the demand for pediatric dentists (2 percent) and orthodontists (-1 percent) is expected to grow slowly or not at all (*Exhibit 1*).

These estimates suggest the U.S. will have an adequate supply of dentists as an entire occupation to meet projected growth in demand for oral health services in 2030 under the status quo scenario. Supply is also projected to be adequate to meet demand for pediatric dentists, orthodontists, endodontists, oral surgeons, and other dentists (e.g., periodontists, dental public health providers, etc.). However, demand for general dentists is predicted to exceed supply by 2030. This potential shortage could lead to an opportunity

⁴ The assumption that supply equals demand at baseline is a standard approach in workforce projection modeling. Please refer to: Ono T, Lafortune G, Schoenstein M. "Health workforce planning in OECD countries: a review of 26 projection models from 18 countries." *OECD Health Working Papers, No. 62.* France: OECD Publishing; 2013: 8-11.

⁵ U.S. Census Bureau. 2017 National Population Projections Tables, September 6, 2018. Accessed December 10, 2019 at: https://www.census.gov/data/tables/2017/demo/popproj/2017-summary-tables.html.

where specialties with predicted surpluses may cover at least some portion of a possible shortfall in general dentists. National-level health workforce projections may mask a potential mal-distribution of providers and supply-demand disparities at the state and local level, and hence should not be extrapolated to the level of a region, health system, facility, or community.

Exhibit 1. Projected Supply and Demand for Dentists in the United States, 2017-2030

	Total Dentists	General	Pediatric	Endo- dontists	Oral Surgeons	Ortho- dontists	Perio- dontists	Other Dentists ^d
Supply (Status Quo scenario)								
Estimated supply, 2017	190,510	151,170	7,320	5,390	7,070	9,990	5,480	4,090
New entrants, 2017-2030	81,860	60,060	5,650	2,780	3,520	4,920	2,260	2,670
Changing work patterns	-9,970	-7,570	-470	-290	-430	-540	-330	-340
Attrition ^a , 2017-2030	-54,470	-42,980	-1,530	-1,580	-2,200	-2,760	-1,920	-1,500
Projected supply, 2030	207,930	160,680	10,970	6,300	7,960	11,610	5,490	4,920
Net growth, 2017-2030	17,420	9,510	3,650 c	910	890	1,620	10	830
% growth, 2017-2030	9%	6%	50%	17%	13%	16%	0%	20%
Demand (Status Quo scenario) ^b								
Estimated demand, 2017	190,510	151,170	7,320	5,390	7,070	9,990	5,480	4,090
Projected demand, 2030	206,850	165,490	7,470	5,750	7,590	9,890	6,080	4,580
Total growth, 2017-2030	16,340	14,320	150	360	520	-100	600	490
% growth, 2017-2030	9%	9%	2%	7%	7%	-1%	11%	12%
Adequacy of supply, 2030								
Supply-demand	1,080	-4,810	3,500	550	370	1,720	-590	340
Percent adequacy (supply/demand)	101%	97%	147%	110%	105%	117%	90%	107%

Source: 2017 American Dental Association (ADA) Master file combined with published statistics from ADA, and estimates from HWSM.

Notes: All numbers reflect full time equivalents (FTEs); Numbers presented are rounded to the nearest ten; Negative numbers are shown with a minus sign; Numbers may not sum to totals due to rounding.

^a Includes retirements and mortality.

^b The model assumes that demand and supply are equal in 2017.

^c Supply of pediatric dentists is projected to grow rapidly relative to growth in demand for dental services among children and adolescents. However, an estimated 72% of dentist visits by children and adolescents are to general dentists rather than to pediatric dentists. The growing supply of pediatric dentists combined with a projected shortage of general dentists could result in pediatric dentists providing a larger share of dental care to children and adolescents in the future ⁶

^d Prosthodontists are the largest component of the "Other Dentists" category.

⁶ Surdu, S. et al. The pediatric dental workforce in 2016 and beyond. The Journal of the American Dental Association. 150(7):609-617

FINDINGS: DENTAL HYGIENISTS

Approximatively 147,470 FTE dental hygienists were active in the national workforce in 2017. Assuming the continuation of current training levels and workforce participation patterns, the supply of dental hygienists is projected to grow by 29,190 FTEs – from 147,470 FTEs in 2017 to 176,660 FTEs in 2030 – a 20 percent increase nationally (*Exhibit 2*).

Under the status quo scenario, which assumes the current (2017) dental hygienist demand equals the current supply (147,470 FTEs), the demand for dental hygienists is projected to grow by 7 percent to 157,240 FTEs in 2030. These estimates suggest that supply is adequate to meet the demand for dental hygienists at a national level. However, the excess supply of dental hygienists at the national level may mask a mal-distribution of these providers and shortages at state and local levels.

Exhibit 2. Projected Supply and Demand for Dental Hygienists in the United States, 2017-2030

Supply (Status Quo scenario)	Total
Estimated supply, 2017	147,470
New entrants, 2017-2030	79,490
Changing work patterns	-10,150
Attrition ^a , 2017-2030	-40,150
Projected supply, 2030	176,660
Net growth, 2017-2030	29,190
% growth, 2017-2030	20%
Demand (Status Quo scenario) ^b	Total
Estimated demand, 2017	147,470
Projected demand, 2030	157,240
Total growth, 2017-2030	9,770
% growth, 2017-2030	7%
Adequacy of supply, 2030	Total
Supply-demand	19,290
Percent adequacy (supply/demand)	112%

Sources: 2013-2017 American Community Survey combined with 2018 Survey of Allied Dental Education and estimates from HWSM. **Notes**: All numbers reflect full time equivalents (FTEs); Numbers presented are rounded to the nearest ten; Negative numbers are shown with a minus sign; Numbers may not sum to totals due to rounding.

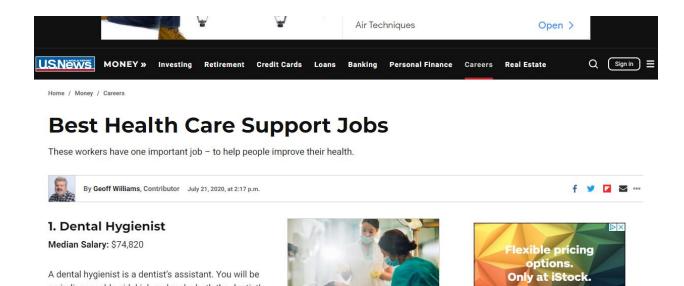
^a Includes retirements and mortality.

^b Demand growth for status quo scenario assumes that demand and supply are equal in 2017 and reflects changing demographics only.

A dental hygienist is a dentist's assistant. You will be an indispensable sidekick and make both the dentist's

life easier and the patient's, since you'll generally be the one doing most of the cleaning of the teeth and urging

everyone to brush and floss better.



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