



**COMPETENCY EVALUATION FOR PHYSICIAN ASSOCIATED HEALTH PROFESSIONALS
(PAHP)**

Job Description Title: Dental Assistant

PAHP Staff Member Name: _____

The addressed employee is competent to perform the following duties and responsibilities:
 **If the Dental Assistant will not be performing one of the essential functions, please mark N/A. If he or she will be performing additional responsibilities, please write in the blank spaces below. Please attach an additional sheet, if necessary.

Essential Function	Yes	No	N/A
Taking Dental Radiographs			
Taking Dental Intraoral Photographs			
Follows procedures and protocol while passing instruments during dental procedures			
Assures implementation of infection control, properly disposes of hazardous wastes and sharp materials.			
Assists Dentist in charting of completed procedure in appropriate charts.			
Assists Scrub technician with turnover of the room between cases.			
Maintains established standards of neatness and cleanliness in all patient care environments			
Monitors and maintains supplies and supply inventory as needed for the delivery of patient care.			
Responsible for obtaining and updating basic patient information, including any required documentation of financial eligibility, as requested.			
Assists with clerical duties related to patient care, as needed.			
Maintains a professional demeanor with dental professional staff members, patients, and administrative staff.			
Utilizes courteous and age-appropriate language in dealing with patients, family members and staff members in person or on the phone.			
Additional Responsibility:			
Additional Responsibility:			
Additional Responsibility:			

Verification of Competency Evaluation (to be completed by Supervising Physician):

Physician Supervisor Signature _____ Date _____

Physician Associated Health Professional Signature _____ Date _____