

**APPLICATION INFORMATION**  
**CALIFORNIA REGISTERED DENTAL HYGIENIST (RDH)**  
**LICENSURE BY CREDENTIAL (03/20)**

Registered Dental Hygienists (RDHs) are licensed in California by the Dental Hygiene Board of California (DHBC).

Applicants who are licensed or registered as a Dental Hygienist in another state may qualify to receive Licensure by Credential if all of the requirements in this document are met.

Temporary permits to practice prior to receiving a license cannot be issued. Dental hygiene education and licensure in another country is not recognized in California.

IT IS A CRIMINAL OFFENSE TO PRACTICE DENTAL HYGIENE IN CALIFORNIA WITHOUT FIRST RECEIVING AN RDH LICENSE.

**Use the application checklist as you complete the LBC application.**

**1. Application.** All information requested must be supplied with the application and each question must be answered fully, truthfully and accurately. A false statement is a crime, and grounds for denial of licensure. You can also apply online at [www.breeze.ca.gov](http://www.breeze.ca.gov). If you are applying online you are allowed to open sealed documents and attach them electronically. **California law requires all licensees to provide a federal Social Security number or Individual Taxpayers Identification Number. A license will not be issued to any applicant until this information is provided.**

**2. Fees.** Each application must be accompanied by a non-refundable application fee of \$100 and initial licensure fee of \$100. Make \$200 cashier check, check or money order payable to **DHBC or pay with a credit card online**.

**Non-Refundable Fees.** The fees are non-refundable, and a fee will be charged for all returned checks.

**3. Fingerprinting.** All applicants located in California must submit Live Scan Fingerprints. Applicants that reside outside of California must submit a request for Hardcopy Fingerprint Cards online at

[https://dhbc.ca.gov/formspubs/hard\\_card\\_request.pdf](https://dhbc.ca.gov/formspubs/hard_card_request.pdf)

Payment for fingerprinting will be made directly to the Fingerprint operator.

**4. Criminal History Background**

**Investigation.** A license cannot be issued until the Dental Hygiene Board of California has received and reviewed criminal background information from both the Federal Bureau of Investigation and the California Department of Justice. This process can take much longer if a criminal history does exist.

*From this point forward, the numbering on this application information will match each question on the LBC application.*

**1-6 Personal Information** Required to provide personal information.

**7. Special Accommodations Request**

You must contact the DHBC for the form or online at [www.dhbc.ca.gov](http://www.dhbc.ca.gov).

**8. Graduation from an Accredited Dental Hygiene Program**

Applicants must have graduated from a dental hygiene program accredited by the Commission on Dental Accreditation (CODA). The applicant **MUST** submit a copy of the dental hygiene graduation diploma with the application.

**9. Licensure in Another State(s)**

Each applicant must provide proof of a current and active license as a registered dental hygienist issued by another state that is not revoked, suspended, or otherwise restricted.

A license certification must be submitted for **each state** in which the applicant is, or ever was, licensed. A certification is required regardless of the status of the license. **The license certifications must accompany the application.**

Complete Item #9 on the application fully, and submit with the application an original license certification from each State listed. You may use DHBC's license certification form however

we do accept other states' certification forms as long as the state seal is applied. Y

**10. California Approved Clinical Examinations.** An applicant who has failed the Western Regional Examination Board (WREB) or Central Regional Testing Services (CRTDS) within the last five years or failed the examination more than once 5 or more years ago, is not qualified to be issued a license through Licensure by Credential.

**11. Passage of State or Regional Clinical Exam.** Each applicant must have successfully passed a state or regional clinical licensure exam. If this information is not provided on a License Certification submitted pursuant to Item 9, a separate certification from the State or regional examining agency is required.

**12. National Board Written Exam Results.** Each applicant must request that their Dental Hygiene National Board Written Examination scorecard be sent to the California Dental Hygiene Board. The results are sent electronically.

**13. Completion of California Board-approved courses.** Certificates of completion of the following **California Board-approved courses** must be submitted on approved forms:

- (1) periodontal soft tissue curettage;
- (2) administration of local anesthetic agents; and,
- (3) administration of nitrous oxide and oxygen.

Approved courses are listed on the DHBC's website [www.dhbc.ca.gov](http://www.dhbc.ca.gov).

**14. Radiation Safety Course:** Graduates of dental hygiene educational programs located outside of California must submit a completed radiation safety certification form in order for the applicant to legally expose dental radiographs in California. If you Graduated prior to 1985 you must take a California Board approved course in Radiation Safety

**15. Continuing Education.** Each applicant must submit original certificates of completion of a minimum of 25 units of continuing education (CE) earned in the two years preceding the application.

The CE must include completion of California mandatory coursework in **Basic Life Support for health care providers** approved by the American Heart Association, American Red Cross or Pace, **2 hours of California Dental Practice Act** and **2 hours of Infection Control**. The mandatory coursework must be offered by a California Board-approved provider.

Original documents issued by the continuing education provider must contain the applicant's name and the number of hours of the course.

**16. Clinical Practice and/or Full-Time Faculty Experience.** Each applicant must submit proof of certain clinical practice and/or employment as a full-time dental hygiene faculty member to qualify for licensure.

**16a. Clinical Practice.** To qualify under this requirement, the applicant must submit proof that he or she has been in clinical practice as a registered dental hygienist for a minimum of 750 hours per year for at least five years **immediately** preceding the date of his or her application. The applicant must submit one or more completed Certification of Dental Hygiene Clinical Practice (LBC-Clinical Practice Cert. (Rev. 1/11) covering all of the required experience, signed by the custodian of records of the applicant's qualifying business(es). The Certification(s) must contain original signatures and be signed under penalty of perjury.

If the applicant has worked as a full-time faculty member in a dental hygiene program, that experience can be substituted for clinical practice on a year-for-year basis – see section 16b below. The program director or dean must complete the form.

If the applicant has a contract to practice in certain facilities in California, up to two years of such intended practice can be substituted for up to two years of the required clinical experience (see section 16c below).

**16b. Full-Time Faculty Experience.** To qualify under this requirement, the applicant must submit proof of being a full-time faculty member in an accredited dental hygiene education program for a minimum of 750 hours per year for at least five years

**immediately** preceding the date of his or her application.

The applicant must submit a copy of the employment contract(s) covering all of the required employment.

Full-time dental hygiene clinical practice can be substituted for full-time teaching experience – see section 12 above.

**16c. Contract to Practice in Certain California Facilities.** To qualify under this requirement, the applicant must submit proof that he or she

- was in full-time clinical practice as a dental hygienist for a minimum of 750 hours per year for at least three years immediately preceding the date of the application (see 11 above),

**AND**

- commits to completing the remaining two years of clinical practice by filing with the DHBC a copy of a pending contract to practice dental hygiene in any of the following facilities (a description and a list of the facilities is contained in other application materials):
  - A primary care clinic licensed under subdivision (a) of Section 1204 of the Health and Safety Code.
  - A primary care clinic exempt from licensure pursuant to subdivision (c) of Section 1206 of the Health and Safety Code.
- A clinic owned or operated by a public hospital or health system.
  - A clinic owned and operated by a hospital that maintains the primary contract with a county government to fill the county's role under Section 17000 of the Welfare and Institutions Code.

The applicant must provide a copy of the pending employment contract to work in one of the facilities listed above, in addition to submitting the required proof of three years of clinical practice.

The applicant must continue to work in one of the facilities listed above, and compliance will be closely monitored. Failure to meet the two-year requirement in one of the facilities listed above will result in disciplinary action.

**Examples of Acceptable Combinations of Employment.** Following is a list of the various types of combinations of experience that will be acceptable among the three types mentioned in 16, 16a, and 16b, above.

- a. Five years of full-time experience in clinical practice.
- b. Five years of experience as a full-time faculty member in a dental hygiene program.
- c. Any combination of experience specified in 12 and 16a above, e.g., 1 year of clinical practice and 4 years of full-time teaching; 4 years of clinical experience and 1 year of full-time teaching; etc.
- d. At least three years of experience in clinical practice and a contract and commitment to practice for at least 2 years in facilities specified in 12b above.

**17. Military Spouse Disclosure.** If you are married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in California under official "Active Duty" military orders, you must provide the following documentation:

- Proof of Active Duty Orders, of the active military member.
- Proof of marriage, domestic partnership or legal union.

Proof of current licensure as a "Registered Dental Hygienist" in another state, district, territory of the United States is required.

**18. Denial of a License.**

You must provide information if our request for a license was denied.

**19. License Discipline.** Answer all questions completely and truthfully. A disciplinary action in another state, or a false statement concerning such action, may be grounds for license denial.

**19a.** In Lieu of formal discipline or with charges pending.

**20.** Execution of Application. The application must be signed and dated, and properly executed. The applicant signs the application under penalty of perjury. Applicants will receive a deficiency letter if the application is deemed incomplete.