

New Mexico Board of Dental Health Care
P. O. Box 25101
Santa Fe, NM 87505
Phone: (505) 476-4680 Fax: (505) 476-4545

**Verification of Clinical Practice
Coronal Polishing**

Following successful completion of a Board approved training program and passing the Dental Assisting National Board (DANB) written exam on rubber cup coronal polishing. The Board requires you to perform rubber cup coronal polishing under the personal supervision of a licensed New Mexico dentist, dental hygienist, certified dental assistant on 5 adults and 5 children (age 14 and under).

For certification, submit this completed form to the New Mexico Board of Dental Health Care, P.O. Box 25101, Santa Fe, NM 87505.

No.	Date of Treatment	Child Patient Name	Date of Birth	DDS/RDH/CDA Initials
1.				
2.				
3.				
4.				
5.				

No.	Date of Treatment	Adult Patient Name	Date of Birth	DDS/RDH/CDA Initials
1.				
2.				
3.				
4.				
5.				

Dental Assistant Name: _____
(please print)

Certificate #: _____

Supervising dentist, dental hygienist or dental assistant certified in coronal polishing:

(please print)

Supervising dentist, dental hygienists or dental assistant license/certificate #: _____

Supervising dentist, dental hygienists or dental assistant signature:

Signature date: _____