Toolkit for Completing Articled Plan
for Dental Hygienists Prescribing Practice in Colorado

To complete the template "Articulated Plan for Dental Hygiene Prescribing Practice in Colorado," complete all highlighted fields in accordance with the guidance presented below.

- Complete the fields listing name, license numbers and addresses of collaborating providers.
- Enter the prescribing dental hygienist's name in all fields marked **[[HYGIENIST]].**
- Enter the supervising dentist's name in all fields marked **[[DENTIST]].**

Overview:
The Articulated Prescription Plan shall:

- Be developed by the prescribing dental hygienist and the supervising dentist.
- Clearly identify drugs that may be prescribed under the agreement (cross out any drugs allowed under state law but not within the scope of the agreement between providers).
- Guide the dental hygienist in their role in prescriptive practice.
- Outline required documentation and collaboration with supervising dentist.
- Include the following:

1. Mechanisms for consultation and referral to a dentist when the dental hygienist detects a condition that requires care beyond the scope of practicing unsupervised dental hygiene;
   Add language to your articulated plan that identifies the specific consultation and referral mechanisms that will be used under your agreement in the **[[SPECIFY-see toolkit instructions]]** field. Samples of appropriate provisions to include in an agreement may include:
   - Use of secure messaging through electronic health records, such as flags, to communicate with collaborating dentist if questions arise and/or follow-up is needed
   - Access to directly schedule patients within the dental practice's appointment system, or a point of contact who can facilitate priority scheduling with one of the collaborating dentists at the hygienists' request for follow-up treatment and/or consultation
   - Lists of dentists in surrounding communities that are willing to accept referrals, if the supervising dentist will not be treating all patients identified for follow up care
   - List of relevant physicians and clinics in surrounding communities that are willing to accept referrals for potential physical health issues detected during dental care

   Discuss whether any non-compete arrangements are needed, and discuss any protocols that will be voluntarily upheld by both parties. If referral and non-compete arrangements are of great concern to either party, it is recommended that you consult an attorney and draft a separate agreement to document these parameters. In non-compete agreements, consider specifying the duration of the agreement and any geographic scope limitations on the agreement.

2. A quality assurance plan;
   Add language to your articulated plan that identifies the specific quality assurance mechanisms that will be used under your agreement in the **[[[SPECIFY METHOD and TIMELINE-see toolkit instructions]]** fields. It is recommended that quality assurance activities

be conducted no less than annually. Samples of appropriate provisions to include in an agreement may include:

- Chart audit and/or prescription record audits to be completed by supervising dentist no less than once annually (frequency may be adjusted to preference) (may want to specify how many charts will be reviewed-all, sample, etc.)
- Peer review by an identified dental hygienist no less than once annually (frequency may be adjusted to preference)
- Regular review of publications on drugs included in the dental hygienist's authorized formulary.
- Outline any detail on what information needs to be maintained in treatment records and detail on any expectations for ongoing communication (e.g., what format records should be shared, what information should be shared, etc.) when prescriptive authority is used

3. Decision support tools that provide guidance on making clinical judgments on whether drugs in the formulary are appropriate and safe for prescribing to a particular patient;
   Add language to your articulated plan that identifies the specific decision support tools that will be used under your agreement in the **[[SPECIFY-see toolkit instructions]]** field. List the actual decision support tools that you have access to and plan to use under your agreement. Samples of appropriate provisions to include in an agreement may include:

   - Electronic databases, journals and prescribing newsletters:
     - Epocrates (free online resource)
     - Other identified electronic sources and online drug reference manuals relevant to the formulary prescribed

   - Drug reference books and pharmacological reference guides
     - Drug Information Handbook for Dentistry
     - Mosby's Dental Drug Reference
     - Desk Reference Book
     - PDR Drug Handbook
     - Other identified references relevant to the formulary prescribed

   - Add language to your articulated plan that identifies any education or continuing education that will be required related to pharmacology of the agents being prescribed as well as their risks, benefits and limitations, if applicable, under your agreement in the **[[SPECIFY-see toolkit instructions]]** fields. Edit the agreement to specify whether courses have already been completed or in what timeframe any new courses will be completed. List the number of hours and courses agreed to, and frequency of the requirement, as applicable.

4. Emergency protocols and standing orders, including use of emergency drugs.
   Add language to your articulated plan that outlines the emergency protocols related to drugs prescribed under your agreement in the **[[SPECIFY-see toolkit instructions]]** fields. Samples of appropriate provisions to include in an agreement may include:

- List the items that must be included in an onsite emergency kit.. Discuss and identify protocols for ensuring that medications in the emergency kit are kept up to date and do not expire (especially if the emergency kit is not commercially maintained). Discuss where the emergency kit will be kept to ensure accessibility. Identify whether the dentist will prescribe emergency drugs that will be maintained onsite.
- Outline emergency interventions appropriate for the dental hygienist to perform while awaiting arrival of EMS personnel.
- Discuss any continuing education on management of medical emergencies that will be required under your agreement. The dental hygienist must maintain minimum required continuing education in management of medical emergencies, including BLS for Healthcare Providers and OSHA, during each license renewal cycle. List the number of hours and other courses agreed to, and frequency of the requirement, as applicable.
- Specify notification requirements in the instance of an adverse reaction. It is recommended that the agreement specify that the dental hygienist notify the dentist within 24 hours. A copy of the patient record, including medical, dental and prescribing history should be provided to the collaborating dentist, along with hygienist's narrative.

Final Steps:
Once all fillable form fields have been completed (or deleted if inapplicable), review the agreement and have both parties sign and date the completed agreement.

The agreement should be reviewed annually with dates and initials and updates made as necessary. Minor changes may be written on the agreement and initialed by both parties. A new agreement is recommended if major changes are required.