CODE OF PROFESSIONAL DISCIPLINE

FOR THE GUIDANCE OF DENTAL CARE PROFESSIONALS IN THE CLASS OF DENTAL HYGIENIST

THE DENTAL COUNCIL OF HONG KONG
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PRE-AMBLE

1. The Dental Council of Hong Kong ("the Council") is established under the Dentists Registration Ordinance (Chapter 156) ("the Ordinance"). The Council has the statutory duty to protect the public interest and to maintain public confidence in the dental profession. The Council is responsible for the registration, regulation, and professional discipline of registered dentists and dental care professionals.

2. Prior to the commencement of the Dentists Registration (Amendment) Ordinance 2024 ("DR(A)O 2024"), dental hygienists were regulated as ancillary dental workers under subsidiary legislation. The DR(A)O 2024 introduced a statutory registration system for ancillary dental workers including dental hygienists and dental therapists, who will be retitled as Dental Care Professionals ("DenCPs") to recognise their professional status while better ensuring their service quality under a more formalised regulatory framework. The statutory framework for their registration and regulation is provided under Part 12 of the amended Ordinance. This legislative expansion empowers the Council to oversee the registration, professional standards, and discipline of dental hygienists. The provisions on DenCPs in the class of dental hygienist will come into effect on 24 August 2026.

3. Dental hygienists are an integral part of the dental team and play an important, expanding role in the delivery of oral health care services to the community. As members of the dental team, dental hygienists are authorized to practise within a defined statutory scope, carrying out specific clinical functions under the direction or prescription of a registered dentist. Professional autonomy and the privilege of statutory registration are granted by society based on public trust and maintained through a robust, open, and fair system of regulation. In order to serve these purposes, the Council adheres to working principles that are proportionate, accountable, transparent, consistent, targeted, and responsive to changing community needs, risks, and priorities in a timely manner.

4. This pamphlet sets out certain guidelines for the proper behaviour of dental hygienists registered under the provisions of the Ordinance. This Code also sets out certain kinds of offences and unprofessional conduct which may lead to disciplinary proceedings by the Council. All dental hygienists are earnestly advised to read through this pamphlet and to acquaint themselves thoroughly with its contents, thereby avoiding the danger of inadvertently transgressing accepted codes of professional ethical behaviour which may lead to disciplinary action by the Council.

5. Complaints made to, or information received by, the Secretary of the Council are dealt with in accordance with the provisions of the Dentists Registration Ordinance (Chapter 156) and the Dentists (Registration and Disciplinary Procedure) Regulations (Chapter 156A). All dental hygienists should, in their own interests, maintain adequate professional indemnity cover. They must be thoroughly familiar with the provisions of

relevant legislation and guidelines, including but not limited to:

- Dentists Registration Ordinance (Chapter 156)
- Dentists Registration (Amendment) Ordinance 2024
- Personal Data (Privacy) Ordinance (Chapter 486)
- Electronic Health System Ordinance (Chapter 625)
- Mandatory Reporting of Child Abuse Ordinance (Chapter 650)
- Radiation Ordinance (Chapter 303)
- Relevant directives and guidelines on infection control issued by the Centre for Health Protection (CHP) and the Council
- Private Healthcare Facilities Ordinance (Chapter 633)
- Occupational Safety and Health Ordinance (Chapter 509)

The Ordinances are published at the Hong Kong e-legislation website at http://www.elegislation.gov.hk.

Mandatory Reporting of Child Abuse Ordinance (Chapter 650)

Under the Mandatory Reporting of Child Abuse Ordinance (Chapter 650), there are mainly three types of criminal offences. Offenders are liable on summary conviction to a fine at level 5, or on conviction on indictment to a fine at level 5 and to imprisonment for three months. Relevant sections in relation to the aforesaid criminal offences are summarized below for ease of reference –

(a) a specified professional, which includes a registered dental hygienist, who during the course of his work has reasonable ground to suspect serious child abuse, but has failed to make a report to the Authority, i.e. the Director of Social Welfare or the Commissioner of Police, as soon as practicable commits an offence (section 4);

(b) a person who willfully inhibits or obstructs or makes guidelines or requirements to inhibit or obstruct a specified professional to make a report to the Authority commits an offence (section 9); and

(c) a person who discloses the identity of a specified professional as the person who has made a report to the Authority, or information from which such identity can be deduced, commits an offence (section 11).

INTRODUCTION

1. The Ordinance states that "unprofessional conduct" (不專業行為), in relation to a registered practitioner, means an act or omission of the practitioner that would reasonably be regarded as disgraceful or dishonourable by registrants of good repute and competency. What will amount to unprofessional conduct is likely to vary with the circumstances at the time. The Council will decide in each case whether the conduct of an individual practitioner constitutes unprofessional conduct.

2. It may assist dental hygienists, however, to describe two kinds of conduct which are likely to be viewed as unprofessional:

   (a) conduct in relation to clinical treatment provided to patients; and
   (b) conduct in relation to general professional behaviour and ethical standards expected of a registered dental hygienist.

   The question of whether any particular course of conduct amounts to unprofessional conduct, and the gravity of such conduct or conviction, is a matter which the Council will determine after considering the evidence in each individual case.

3. It is critical to emphasize that the scope of practice for dental hygienists is strictly limited by law. Under Schedule 3 of the Ordinance, dental hygienists may only perform the specific clinical functions prescribed by the legislation and must do so strictly under the direction or prescription of a registered dentist or a person with provisional registration as specified.

4. The Council, having regard to its quasi-judicial function, is not in a position to advise individuals. Dental hygienists desiring detailed advice on questions of professional conduct arising in particular circumstances may consult their respective professional organizations or societies and/or seek professional legal advice. This pamphlet is thus NOT a complete code of professional ethics, nor does it specify all offences that may lead to disciplinary action.

1. PROFESSIONAL COMMUNICATION AND INFORMATION DISSEMINATION

1.1 Principles for Good Communication and Accessible Information

1.1.1 Good communication between dental hygienists and patients, and between dental hygienists and supervising dentists, is fundamental to the provision

of proper patient care. A key aspect of professional practice is to provide appropriate information to users of services and to enable those who need such information to have ready access to it. Patients need such information to make informed choices and to understand the specific clinical functions a dental hygienist is statutorily authorized to perform.

1.1.2 Dental hygienists must ensure that their communication reflects their role within the dental team. Promotion of services as if the provision of oral care were no more than a commercial activity is likely both to undermine public trust in the profession and to diminish the standard of care.

1.2 Rules of Good Communication and Information Dissemination

1.2.1 Any information provided by dental hygienists to the public or their patients must be accurate, factual, objectively verifiable, and presented in a balanced manner. Such information must **not**:

(a) be exaggerated or misleading;
(b) be comparative with other practitioners;
(c) claim superiority over other practitioners;
(d) aim to solicit or canvass for patients;
(e) be laudatory, persuasive, or sensational;
(f) arouse unnecessary concern or distress, or generate unrealistic expectations; or
(g) disparage other dental practitioners or dental care professionals.

1.3 Use of Titles

1.3.1 Dental hygienists must use their correct title in all professional communications to ensure public clarity regarding their qualifications and scope of practice. Registered practitioners must use the title "**Dental Hygienist**". Dental hygienists are strictly prohibited from using the prefix title "Doctor" or any description that may mislead the public into believing they are registered dentists.

1.4 Presentation of Professional Relationship

1.4.1 As dental hygienists carry out clinical functions strictly under the direction or prescription of a registered dentist or a person with provisional registration as specified, any dissemination of service information (such as on websites or signboards) must clearly reflect this collaborative professional relationship. Information must not imply that dental hygienists provide independent dental services outside the statutory framework defined by the Ordinance.

1.5 Dental/Oral Health Education Activities

1.5.1 It is appropriate for dental hygienists to take part in bona fide dental/oral health education activities, such as lectures, media interviews, or community health programs aimed at promoting primary care.

1.5.2 When participating in such activities, the information provided must be authoritative, factual, and in accordance with general professional experience. Dental hygienists must take reasonable steps to ensure that the activity is not exploited for the commercial promotion of any specific dental practice, product, or clinic.

1.5.3 The dissemination of information regarding public health schemes (such as government-led primary care programs) is permitted, provided that the focus remains on the availability and nature of the scheme rather than the individual promotion of a particular practitioner or clinic.

1.6 Prohibition of Unauthorized Practice Promotion

1.6.1 Dental hygienists have a personal responsibility to ensure that any publicity regarding their professional services, whether disseminated by themselves or their employer, complies with the rules set out in this Code.

1.6.2 Dental hygienists must not permit their employer or any third party to use their name, photograph, or professional status in any manner that constitutes persuasive or sensational practice promotion.

1.6.3 If dental hygienists become aware of any such improper publicity issued on their behalf, they must take immediate steps to secure its removal or correction. Failure to do so may lead to disciplinary action.

2. DISSEMINATION OF SERVICE INFORMATION

2.1 General Requirements

2.1.1 Dental hygienists may provide information about their professional services to the public only in the ways set out in this section. All such information must comply with the principles of being accurate, factual, and objectively verifiable.

2.2 Signboards

2.2.1 Dental hygienists' name may appear on a clinic's signboard provided it is accompanied by their correct title: "**Dental Hygienist**". The format of signboards for dental hygienists may include only the following information:

(a) name of the dental hygienist in Chinese and English;
(b) dental hygienists are strictly prohibited from using the Chinese suffix titles "牙醫" (Dentist), "牙科醫生" (Dental Surgeon), "醫師" (Medical Practitioner), or any other terms, descriptions, or abbreviations that imply or tend to imply that they are registered dentists or possess a dentist-equivalent status;
(c) the title of "Dental Hygienist";
(d) the Chinese title "牙科衞生員" (Dental Hygienist) should be displayed clearly alongside the name to ensure clear public clarity of the registered class of the dental care professionals;
(e) qualifications registered and approved by the Council;
(f) consultation hours and telephone number of the clinic; and
(g) name and logo of the dental practice.

2.2.2 Dental hygienists must not allow their names to appear on any signboard or display which carries merchandise, logos, or commercial promotions.

2.2.3 A dental hygienist's name must never appear alone or independently on any exterior or interior clinic signboard; it must be displayed collectively within the general directory or staff listing of the dental practice premises where he/she is employed.

2.2.4 The font size, dimensions, and visual prominence of a dental hygienist's name on the signboard must not exceed, and should remain identical to, the font size and style used for the registered dentists practising within the same organization, premises, or clinic.

2.3 Stationery

2.3.1 Stationery (visiting cards, letterheads, etc.) may only contain the particulars permitted on signboards together with the practising clinic address, telephone number, e-mail address and practice website. Visiting cards may be distributed at an individual's request but not for canvassing or soliciting patients.

2.4 Digital Presence and Practice Websites

2.4.1 Dental hygienists may be listed on the website directory of the dental practice or organization where they are employed. The online profile of dental hygienists should be limited to:

(a) full name and title;
(b) registration number with the Council;
(c) one professional photograph; and
(d) information regarding the clinical functions they are authorized to perform under Schedule 3 of the Ordinance.

2.4.2 The following are strictly prohibited on a website profile:

(a) patient testimonials;
(b) clinical case before or after images;
(c) links to commercial retail sites; or
(d) any content that invites contact in a manner amounting to "canvassing".

2.5 Announcements of Commencement or Cessation of Service

2.5.1 Announcements of commencement, relocation, or cessation of professional service may be published only in newspapers, professional publications, the practice's own website, or via direct communication to the practitioner's bona fide patients. The announcement must be factual, limited to details of date and location, and must not include photographs or laudatory statements.

2.5.2 All announcements in newspapers, professional publications relating to dentistry, or on the dental hygienist's practice website can only be published or displayed within two weeks before and after the commencement, relocation, or cessation of professional service and must comply with section 1.2.1.

3. CANVASSING

3.1 Prohibition of Canvassing

3.1.1 Canvassing for the purpose of obtaining patients, either directly by the dental hygienists or indirectly through others acting on their behalf, is strictly prohibited and constitutes unprofessional conduct.

3.2 Unsolicited Communications

3.2.1 Dental hygienists must not promote their services through unsolicited visits, telephone calls, electronic communications, or the distribution of marketing materials to individuals who are not already patients of the clinic where they are employed and/or of clinics where their services are engaged.

3.3 Association with Canvassing Organizations

3.3.1 Professional association with or employment by persons or organizations that engage in canvassing or commercial promotion of dental services constitutes unprofessional conduct. It is the dental hygienists' personal responsibility to ensure that any scheme with which they are associated conforms to the ethical standards of the Council.

3.4 Boundaries of Community Outreach

3.4.1 While participation in primary care outreach and oral health education is encouraged, such activities must not be exploited to canvass for patients. During community events, dental hygienists should provide general health guidance but must refrain from providing clinic-specific financial incentives or from soliciting direct appointments from the general public.

4. PROFESSIONAL RESPONSIBILITIES TO PATIENTS

4.1 Primary Duty of Care

4.1.1 Dental hygienists have a primary responsibility to provide proper oral health care to their patients and be responsible for their treatments and advice delivered.

4.2 Clinical Competence and Statutory Limits

4.2.1 Dental hygienists must strictly perform clinical functions that are within the statutory scope of practice and subject to such conditions as defined in Schedule 3 of the Ordinance. Dental hygienists must not undertake any treatment for which they are not sufficiently trained, competent, or equipped, regardless of whether such treatment has been prescribed by a registered dentist or a person with provisional registration.

4.3 Working under Direction or Prescription

4.3.1 Dental hygienists have a professional duty to ensure they are acting strictly in accordance with the services and conditions set out in Part 1 and Part 2 of Schedule 3 under the Ordinance and/or the valid direction, prescription, and presence requirements of a registered dentist or a person with provisional registration as dictated by the statutory scope of practice before performing any clinical tasks. Proceeding with clinical treatment outside or in contravention of the statutory scope and its attached conditions constitutes a breach of this Code.

4.4 Standards of Care

4.4.1 Disciplinary proceedings may be instituted if dental hygienists disregard their responsibility to adequately treat a patient, or otherwise neglect their professional duties. This includes the duty to exercise reasonable skills and care at all times.

4.5 Equal Opportunity and Non-Discrimination

4.5.1 A dental hygienist must treat all patients with dignity, respect, and impartiality. In providing oral care services, a dental hygienist must strictly observe the statutory requirements enforced by the Equal Opportunities Commission (EOC).

4.5.2 A dental hygienist must not discriminate against, or deny appropriate clinical care to any patient on the grounds of race, colour, descent, national or ethnic origin, sex, marital status, pregnancy, disability, or family status. Any breach of these anti-discrimination principles compromises the integrity of the profession and constitutes unprofessional conduct under this Code.

5. DENTAL RECORDS AND CONFIDENTIALITY

5.1 Responsibility for Record Entries

5.1.1 Dental hygienists are personally responsible for the accuracy, legibility, and completeness of the specific entries they make regarding the treatments they have personally provided. Failure to maintain accurate contemporaneous records may be regarded as unprofessional conduct.

5.2 Contemporaneous Entries

5.2.1 To ensure accuracy and patient safety, entries must be made in a timely, contemporaneous manner. For each clinical session, the record entry must clearly document the clinical functions performed, the name of the registered dentist or person with provisional registration who provided the formal direction or prescription, and any relevant clinical observations or responses.

5.3 Professional Confidentiality

5.3.1 Dental hygienists have a strict duty to maintain professional confidentiality regarding all information entrusted to them by a patient. Information may only be disclosed with the patient's explicit consent, or where disclosure is required by law or clearly in the public interest.

5.4 Data Privacy Compliance

5.4.1 Dental hygienists must fully comply with the Personal Data (Privacy) Ordinance (Chapter 486) and the Electronic Health System Ordinance (Chapter 625). Dental hygienists should cooperate with the host clinic to facilitate patients' statutory right to access and correct their own clinical records.

5.5 Reports under the Mandatory Reporting of Child Abuse Ordinance (Chapter 650)

5.5.1 Dental hygienists should have due regard to their responsibilities and liabilities under the Mandatory Reporting of Child Abuse Ordinance (Chapter 650) ("MRCAO"), in particular regarding the reporting of suspected serious child abuse. Under section 12(2) of MRCAO, a specified professional, which includes a dental hygienist, must not be held to have breached any code of professional conduct or ethics, or to have departed from any accepted standards of professional conduct, only by making a report.

6. CONSENT TO DENTAL TREATMENT

6.1 Principles of Informed Consent

6.1.1 It is a fundamental professional principle that treatment should only be provided with the informed consent of the patient prior to commencing care. Consent is valid only when given voluntarily by a patient who has the capacity to understand the nature and purpose of the proposed treatment.

6.2 Collaborative Consent Responsibility

6.2.1 The registered dentist or a person with provisional registration who prescribes the overall treatment plan carries the primary responsibility for obtaining informed consent for that plan. When treating minors or persons who lack capacity, the registered dentist or person with provisional registration is responsible for obtaining valid consent from an authorized parent or legal guardian prior to treatment.

6.2.2 Dental hygienists have a concurrent professional responsibility to ensure that the patient or guardian understands and consents to the specific procedures being performed during the session. Dental hygienists must not proceed with any clinical task if they have reason to believe the patient or guardian does not understand the procedure or has withdrawn consent.

6.2.3 A patient has the right to refuse any part of the treatment at any time. The dental hygienist must respect this refusal and inform the prescribing registered dentist or person with provisional registration as soon as practicable.

6.3 Duty to Confirm and Inform

6.3.1 Before starting a procedure, a dental hygienist should confirm that the patient understands what the specific task involves, any immediate risks, and necessary post-treatment care. If a new clinical issue or a change in the patient's oral condition that falls outside the original prescription is identified, the dental hygienist must suspend treatment, inform the patient, and refer the matter back to the prescribing registered dentist or person with provisional registration for an updated treatment plan.

6.4 Documentation of Consent and Refusal

6.4.1 For routine treatments, consent may be clearly implied by the patient's cooperation. However, any refusal of treatment, uncooperative attitude, or significant resistance displayed by the patient must be clearly documented in the clinical record.

6.5 Right of Refusal and Special Demographics

6.5.1 A patient has the right to refuse any part of the treatment at any time. The dental hygienist must respect this refusal and inform the prescribing registered dentist or person with provisional registration as soon as practicable. When treating minors or persons who lack capacity, valid consent must be verified with an authorized parent or legal guardian.

7. TERMINATION OF PROFESSIONAL RELATIONSHIP

7.1 General Principles

7.1.1 A professional relationship between a dental hygienist and a patient is based on mutual trust. Where such trust has irretrievably broken down, termination of the clinical relationship may become necessary.

7.2 Professional Responsibility in Termination

7.2.1 Termination of a professional relationship must be conducted in a responsible manner. A dental hygienist should not terminate a relationship or refuse treatment in a way that endangers the patient's oral health or compromises continuity of necessary treatment. Proper notice of termination must be given to the patient.

7.3 Coordination with the Dental Team

7.3.1 Given that dental hygienists perform clinical functions strictly under the direction or prescription of a registered dentist or a person with provisional registration, any decision to terminate a relationship must be coordinated with the prescribing registered dentist or person with provisional registration and the clinic management to ensure an orderly transfer of care. Dental hygienists must not terminate a professional relationship independently, without notifying the prescribing registered dentist, or person with provisional registration, or clinic principal.

8. THIRD PARTY INVOLVEMENT AND FINANCIAL TRANSACTIONS

8.1 Financial Interests and Commercial Independence

8.1.1 A dental hygienist is obligated to ensure that professional judgment and clinical recommendations are rendered exclusively in the best interest of patient safety, and must not be improperly influenced, whether directly or indirectly, by the dental hygienist's own financial considerations or commercial affiliations.

8.2 Referral Fees and Financial Inducements

8.2.1 The payment or acceptance of any fee, commission, split fee, or other inducement for the referral of a patient for dental treatment is strictly prohibited. Dental hygienists must not accept any commission, commercial gift, or inducement from suppliers, dental laboratories, or manufacturers which may bias the oral health products they recommend to patients. Any product recommendations must be based strictly on clinical needs and factual evidence.

9. CONVICTIONS PUNISHABLE WITH IMPRISONMENT

9.1 It is emphasized that any conviction in Hong Kong or elsewhere of any offence punishable with imprisonment will lead to subsequent disciplinary proceedings by the Council, irrespective of whether a prison term is actually imposed or not.

9.2 A particularly serious view will be taken if dental hygienists are convicted of criminal deception, forgery, fraud, theft, indecent behaviour, or assault in the course of their professional duties or against their patients or colleagues.

9.3 It is the duty of a dental hygienist who has been convicted within or outside Hong Kong of an offence punishable with imprisonment to report the matter to the Council within one month from the date of conviction. Failure to do so constitutes unprofessional conduct.

10. ABUSE OF ALCOHOL OR DRUGS

10.1 A dental hygienist who treats patients or performs other professional duties while under the influence of drink or drugs to such an extent as to be unfit to perform his professional duties is liable to disciplinary proceedings.

11. SCOPE OF PRACTICE AND RELATIONSHIP WITH DENTISTS

11.1 Statutory Boundaries

11.1.1 A dental hygienist must only perform clinical functions that are explicitly specified in **Schedule 3** of the Ordinance.

11.1.2 Performance of clinical functions outside the statutory scope defined by the Ordinance constitutes unprofessional conduct.

11.2 Requirements for Direction, Prescription, and Presence

11.2.1 Under the statutory framework, dental hygienists may only perform clinical functions under the engagement of a registered dentist or a person under provisional registration and strictly in accordance with the statutory requirements and conditions set out in Part 1 and Part 2 of Schedule 3 of the Ordinance, which are reproduced verbatim in **Appendix I** of this Code. Any performance of services in contravention of the specific conditions stipulated in the Schedule constitutes unprofessional conduct.

12. COVERING AND DELEGATION

12.1 Prohibition of Covering

12.1.1 The covering of unregistered persons is a serious professional offence. A dental hygienist must not assist or enable any person who is not a registered dentist, a person with provisional registration, or a registered dental care professional to perform clinical dental work. Dental hygienists who become aware that an unregistered person is performing clinical dental work within their clinic are advised to report the matter to the Council.

12.2 Acceptance and Delegation of Duties

12.2.1 Dental hygienists must only accept delegation that falls within their statutory scope under Schedule 3 of the Ordinance. The fact that a task was prescribed or directed by a registered dentist or a person with provisional registration does not absolve the dental hygienist of personal professional responsibility for the standard of care provided. A dental hygienist may delegate non-clinical supportive tasks to assistants, but must **never** delegate clinical dental work (such as scaling, polishing, or radiography) to non-registered staff.

13. PROFESSIONAL COMPLIANCE AND PRACTISING RIGHTS

13.1 Annual Practising Certificate (APC) Renewal

In accordance with the Ordinance, all registered dental hygienists must hold a valid, current Annual Practising Certificate to legally provide services in Hong Kong. It is the personal responsibility of a dental hygienist to apply for certificate renewal and pay the prescribed fee before the statutory deadline each year. Practising without a valid certificate constitutes a criminal offence.

13.2 Mandatory Continuing Professional Development (CPD)

Registered dental hygienists must maintain their professional knowledge and clinical skills by fully complying with the mandatory CPD framework as prescribed by the Council. Fulfilment of the required CPD points within the designated cycle is a mandatory pre-requisite for renewal of the Annual Practising Certificate.

13.3 Statutory Licensing Requirements

13.3.1 When carrying out clinical functions that involve the operation of irradiating apparatus, specifically dental X-ray units, a dental hygienist must strictly ensure a two-fold compliance status before proceeding:

(a) **Personal Qualification:**

The dental hygienist must personally possess the recognized qualifications and approved training in radiation safety and dental radiography techniques required to legally operate such machinery under the Radiation Ordinance (Chapter 303) and its subsidiary regulations.

(b) **Equipment Licensing:**

The specific clinical equipment being utilized must have a valid, current license issued by the Radiation Board of Hong Kong.

13.3.2 Carrying out radiographic procedures without the requisite personal qualifications, or operating unlicensed apparatus, constitutes a criminal offence and a breach of professional conduct under this Code.

CONCLUSION

1. The guidelines set out in this Code are intended to maintain a high standard of professional conduct and to protect the interests of the public. The Council retains the power to judge individual cases based on their specific facts and circumstances.

2. A breach of any of the principles or rules set out in this Code may lead to disciplinary proceedings. Registered dental hygienists must maintain their professional knowledge and clinical skills through the mandatory continuing professional development (CPD) framework as prescribed by the Council.

APPENDIX I

Statutory Scope of Practice
(extracted from Schedule 3 of Dentists Registration Ordinance, Chapter 156)

PART 1
Classes of Dental Care Professionals and Scope of Practice

Column 1 Class	Column 2 Category	Column 3 Service	Column 4 Conditions
Dental Hygienist	1	(a) The cleaning and polishing of those parts of the surface of the teeth of another person that are not covered by the gums.	Nil.
	1	(b) The application to the teeth of another person of any topical fluoride, fissure sealant, or other similar preventive agent.	Nil.
	1	(c) The taking of a radiograph intra-orally or extra-orally for the examination of the mouth, teeth or jaws of another person, or their associated structures.	The condition set out in section 1 of Part 2 of this Schedule.
	1	(d) The scaling of the teeth of another person (that is to say, the removal of calculus deposits and stains from those parts of the surface of the teeth that are exposed or that are beneath the free margins of the gums, including the application of medicaments).	The conditions set out in sections 1 and 2 of Part 2 of this Schedule.

PART 2

Conditions

Section 1: Prior Assessment Condition

Before the service is provided by the registered dental care professional concerned to another person (patient), a registered dentist or a person with provisional registration -

(a) has assessed the medical history of, and examined, the patient; and

(b) has, based on the assessment and examination, prescribed that the service is to be provided to the patient.

Section 2: Physical Presence Condition

The service is provided on any premises by the registered dental care professional concerned in accordance with the directions of a registered dentist or a person with provisional registration **who is present on the premises at all times** when the service is provided.

The Dental Council of Hong Kong
July 2026