

**AIR FORCE SPECIALTY CODE 4Y0X1, DENTAL ASSISTANT AND
4Y0X2, DENTAL LABORATORY**

July 2006

BACKGROUND

In January 2006, the Air Force Enlisted Heritage Research Institute (AFEHRI) issued a request to Career Field Managers for a written history of their respective Air Force Specialty Codes. In February 2006, in response to this request, the following dental team was established:

CMSgt Jody Hanks, Kunsan AB, ROK
CMSgt Janet Cox, Pentagon, Washington DC
SMSgt Thomas Jones, Misawa AB, Japan
MSgt Edwin Holland, Yokota AB, Japan
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From February to June 2006, the team conducted research and compiled material for the history. Finally, in July 2006, the team submitted the completed history to the AFEHRI.

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History of the AFSC

This AFSC crossed over from the United States Army as Specification Serial Number (SSN) 885, Dental Chair Assistant.¹ Dentistry in the military has existed since the Revolutionary War when civilian dentists were called upon to treat the Commander of the Colonial Armies, General George Washington.² During the Civil War, the South conscripted dentists, but it wasn't until 1872 that the United States Army actually employed its first dentist at West Point.³ In 1901, the Army Dental Corps, comprised of civilian contract dentists, was established and in 1911, the first dental officers were commissioned as 1st Lieutenants.⁴

Most of the information available prior to World War II provides little information on auxiliary dental personnel. It is generally understood that in the years following the Civil War there developed a wave of concerted interest in making dental service available to the Armed Forces. Members of the dental profession and the National Dental Association initiated and sponsored legislation to provide for the appointment of dental surgeons for service in the United States Army. The first such legislation approved by The Surgeon General and the War Department was enacted on 2 February 1901. This bill authorized the employment of a maximum of 30 dental surgeons on a contract basis, to serve the officers and enlisted men of the Regular and Volunteer Army.⁵

One of the first dentists so appointed was Dr. John S. Marshall who formulated the plans for the organization of the dental service.⁶ Dr. Marshall was a visionary and served as senior dentist until 1911. His continual efforts to promote a better dental service for the Army and to effect a more favorable status for the contract dental surgeon are reflected in the legislative acts and Army regulations which have appeared in the years since 1901. Soon after contract dentists were first authorized, it was provided that each dentist would have an enlisted assistant detailed from the Hospital Corps who would be under the full

¹ Army Regulations No. 615-26, 3 Sept. 1940, subject: Enlisted Men: Index and Specifications for Occupational Specialists and Index to Military Occupational Specialists. (This list was superseded in December 1941, and still another appeared in September 1942.)

² Col D. Keith Savage, USAFR. 50th Commemorative Anniversary of the United States Air Force Dental Service 1949-1999. The Office of the Assistant Surgeon General for Dental Services, USAF, Bolling AFB, DC, 1999, pg. 6

³ Ibid.

⁴ Ibid.

⁵ GOs and Cirs. 1901, Hq of the Army, GO 9, 6 Feb 1901, sec 18, p. 8. SG: 1027.

⁶ Marshall, John S. : Organization of the Dental Corps of the U. S. Army, with suggestions upon the educational requirements for military dental practice. In Transactions of the National Dental Association, Dental Digest. Chicago, J. N.. Crouse, 1902, p. 32-46.

control of the dentist during duty hours.⁷ As early as 1904, Dr. Marshall reported to The Surgeon General the difficulty in obtaining competent enlisted assistants and that the assistants were dissatisfied with the long hours, confining work and lack of opportunity for advancement incident to assignment to the dental service.⁸

In World War I, about 5,000 enlisted assistants were on duty with 4,620 dental officers. These men were detailed from medical department enlisted personnel and were largely trained by the officers with whom they worked.

In the period between World Wars I and II, the dental department continued to obtain auxiliary personnel from the Medical department in spite of a new provision in Army regulations for the special detail of enlisted men to the dental service.⁹ Men so detailed, on the authority of The Surgeon General, were to be more directly under the control of the dental officers for training and duty than would those merely *assigned*, and it was believed this provision would ensure a more stable source of auxiliary dental personnel. In practice few men were ever detailed in this way and the merits of the plan were never determined. It was abandoned in May 1943.¹⁰

Before World War II, enlisted men of the medical department held the belief that duty with the dental service meant long hours and loss of opportunity for promotion. Dental officers would spend months training laboratory technicians and chair assistants, knowing all the while the best grade they could offer in their relatively small clinics would be that of private first class or corporal, and as soon as these men had sufficient service to be considered for promotion they would have to transfer to the surgical service or medical supply. The alternative was to accept those misfits who had no ambition or hope for advancement. Seldom could the dental service offer grades comparable to those available in other, larger medical departments. Furthermore, when an enlisted man in the dental service was examined for promotion he was questioned on general medical subjects in which men assigned in other medical services had the obvious advantage. As a result, serving in the dental service came to be regarded as a dead end road to promotion. There was very little change in this situation until the start of World War II.

The United States mobilization for World War II considerably improved the adequacy and status of those assigned to the Army Dental Service. In June 1941, only 1,488 enlisted men were on duty with dental units.¹¹ In September 1943, 13,851 enlisted men¹² were so engaged and by January 1944 the number had increased to 15,585 enlisted men.¹³

⁷ Manual for the Medical department, 1906. Washington, Government Printing Office, 1906, p. 40.

⁸ Ltr, Dr. John S. Marshall to SG, 16 Feb 04. National Archives: 70760-27.

⁹ AR 40-15, 28 Dec 42.

¹⁰ AR 40-15, C1, 10 May 1943

¹¹ History of the Army Dental Corps, Personnel, 1940-43. HD: 314.7-2.

¹² Ibid.

¹³ Annual Report, Dental Division SGO, 1945. HD.

In 1944, dental service personnel wore the ranks of private (E-1) through master sergeant (E-7); however only 4.54 percent of dental enlisted personnel wore the top 3 grades (E-5 to E-7) in comparison to 7 percent of the medical service. Although the dental service enlisted man had a poor chance of reaching the top 3 grades, he had a better chance of making corporal (E-3) and sergeant (E-4) than those assigned to the medical service. Dental enlisted personnel in the grade of corporal and staff sergeant were 51.91 percent versus 29.50 percent of medical service personnel.¹⁴

While initially assigned to the dental service all enlisted assistants had completed from 8 to 17 weeks of basic military training; many had no other experience in the duties they would have to perform.

One of the first problems faced by the dental service in World War II was a severe shortage of dental laboratory technicians. Prior to the start of the war, dental requirements for induction were very relaxed, but by the end of 1942, the requirements had become so relaxed that only 0.1 percent of inductees were disqualified for dental reasons. It remained at or about that level for the remainder of the war.¹⁵ To meet the needs of the thousands of men who would have previously been considered unfit for military duty, the Army would eventually have to construct over two and a half million dentures, requiring a mobilization of laboratory facilities on a scale unforeseen in early planning.

To meet the need for increased laboratory facilities, the Army could count on inducting only a fraction of the required personnel. A survey by the Dental Laboratory Institute of America and the American Dental Association showed that in 1942 there were only a little over 12,000 trained dental technicians in the entire United States.¹⁶ Many of these were ineligible for induction because of age or dependency. A sample group of laboratories questioned in early 1942 reported that they had lost 18 percent of their technicians.¹⁷ If this proportion held throughout the country the Armed Forces inducted about 2,200 laboratory workers from this source.

To make matters worse, many of the dental technicians taken into the Armed Forces during the first part of the war were lost to the Dental Service.¹⁸ The test group of laboratories previously mentioned reported that only 44 percent of their inducted laboratory men were sent to duty in with the Dental Corps. Some were assigned from the reception centers to nonmedical units, probably on the basis of mechanical ability; others

¹⁴ Ibid.

¹⁵ Col George F. Jeffcott. *United States Army Dental Service in World War II*. Office of the Surgeon General, Department of the Army, Washington DC, 1955, pg. 153.

¹⁶ Complete survey of dental laboratory technicians to be undertaken by committee. *J. Am. Dent.* 29: 2060, 1 Nov 42.

¹⁷ Ibid.

¹⁸ Proceedings of The Surgeon General's Conference with Corps Area and Army Dental Surgeons, 8-9 Jul 42, p. 11. HD: 337

were assigned as chair assistants because Army classification at first failed to distinguish clearly between laboratory and assistant functions.

This deficiency was not entirely rectified until 14 April 1943 when the Adjutant General notified The Surgeon General that a separate personnel category (SSN 067) had been reserved for dental technicians, to distinguish them from dental chair assistants (SSN 855), paving the way for a clear definition of the two types of duty in drawing up tables of organization.¹⁹ The new classifications were published in a memorandum from the Adjutant General's Office (AGO), dated 13 May 1943.²⁰

Steps to improve the utilization of laboratory personnel proved generally effective, but they did not prevent a minor loss of technicians to other duties. Hospitals sometimes reclassified dental technicians as chair assistants to avoid an excess of this category over the numbers permitted by tables of organization, but normally the individual would continue to perform his old duties as long as he remained in the unit. If transferred, he was likely to be assigned on the basis of his specification serial number. In other cases the authorization for laboratory technicians was revoked for certain units and the men holding laboratory ratings were sometimes reclassified under such circumstances to prevent their loss to the organization. Keeping dental technicians assigned to their proper duties was a continuing problem for the dental service throughout the war.²¹

A defect of the broad classification of dental technicians was that it failed to specify individual special skills or degrees of experience. Both Army and civilian laboratories normally function on a "production line" basis, with each man carrying out a limited operation. Therefore, the technician who is qualified to perform all duties in a laboratory with equal competence was rare. Under the Army classification a hospital needing a man to set up teeth was likely to receive a replacement whose specialty was polishing dentures.

Even in peacetime the number of trained technicians entering the Army from civilian life had been negligible, and the medical department had conducted training for this category of personnel since the founding of the Army Dental School in 1922. An average of 18 men had graduated from the 4-month course each year in the period 1935-1938.²² Although the training emphasized laboratory work, it also included some instruction in administration, x-ray technique, and chair assisting. The course was expected increase to a full year beginning with the class of September 1939, but the outbreak of war caused this class to be graduated in July 1940, and thereafter the period of instruction was reduced to 3 months.

¹⁹ Memo, TAG for SG, 14 Apr 43, sub: Dental laboratory technicians. SG: 221 (Technologists).

²⁰ AGO Memo W 615-45-43, 13 May 43, sub: Revision of specification serial numbers--AR 615-26. SG: 221 (Technologists).

²¹ History of the Army Dental Corps, 1 Apr 44-1 May 1944. HD: 024.10-3

²² Annual Reports ... Surgeon General, 1935-38.

The intent of the wartime 3-month Dental Technicians course was to produce dental laboratory technicians as quickly as possible. Although a combined course for laboratory men and chair assistants, most of the time was spent on laboratory procedures. It included instruction in dental anatomy, tooth carving, dental materials, metallurgy, dental records, dental radiology, dental hygiene, inlays and crowns, chair assisting, impressions, clasps, full and partial dentures, and actual work in the laboratory. It also included instruction in the care and maintenance of equipment.²³ Applicants were required to have the equivalent of a high school education and must have completed basic military training.

The first month was devoted to didactic instruction and the last two months were spent in a laboratory under supervision. The dental corps quickly recognized that competent dental technicians could not be trained in 3 months and the course established a basis for the individual's further progress at his home station. The school conferred the rating of SSN 067 to only the best-qualified graduates (40 percent at Fitzsimons General Hospital, 1943). More often it was given later upon the recommendation of the unit dental surgeon after the student had improved his knowledge by on-the-job training. Those who showed little aptitude for laboratory work remained SSN 855's (chair assistants).²⁴

The dental technician training program outgrew the Army Dental School and by 1940, courses were soon being conducted in six general hospitals. Nine schools were in operation during fiscal 1943 and over 5,000 students were enrolled during that year. Maximum authorized capacity was 600 men per month. Many of the schools operated double shifts in 1943 to accommodate the augmented classes without additional equipment. The program fell off sharply in the latter part of 1944 and only a handful of students remained after March 1945.²⁵

In 1945, the Director of the Dental Division stated that the 3-month course had been too short for dental laboratory workers, though he felt that it was adequate for chair assistants. He recommended a minimum course of 6 months for technicians, to be extended to one year if possible.²⁶

Prosthetic Supply Clerks. Beginning on 20 March 1944, six enlisted men of the dental service were given 4 weeks of training at Binghamton Medical Depot to prepare them for duty as prosthetic supply clerks. The scarcity of personnel capable of handling the many sizes, shapes, and shades of porcelain teeth stocked in laboratories and depots made this small but important course necessary.²⁷

²³ ASP Manual M3, 25 Apr 44. HD.

²⁴ Col George F. Jeffcott. *United States Army Dental Service in World War II.* Office of the Surgeon General, Department of the Army, Washington DC, 1955, pg. 157.

²⁵ Ibid.

²⁶ Final Rpt for ASF, Logistics in World War II. HD: 319.1-2 (Dental Division).

²⁷ A report of the schooling of enlisted personnel, Medical Department, 1 Jul 39 to 30 Jun

Dental Assistants. With mobilization it became necessary to staff large numbers of clinics with assistants in a very short time and more emphasis was placed on training for this category. Although the dental technicians' course was a combined project, those who did not show mechanical aptitude for laboratory work eventually went to duty as chair assistants (SSN 855). It is not known exactly how many graduates of Army schools became dental assistants because the final rating as technician or assistant was often made at the home station. In July 1945, 11,697 men, or 82.4 percent of a total of 14,191, were rated as SSN 855.²⁸ Since only 11,625 enlisted personnel attended the Army schools through fiscal 1945, and since the enlisted auxiliary personnel of the dental service numbered over 15,000 men at its maximum, we can assume that not more than two-thirds of the chair assistants had formal school training. The equivalent of a high school education and completion of basic military training were prerequisites for training as a dental assistant.

Dental Hygienists. Before the war, female civilian dental hygienists were on duty in only a few of the larger clinics. Training in this work was given to enlisted men in the Army Dental School course and oral prophylactic treatments were generally given by enlisted men or by dental officers. Mobilization required wider use of civilian hygienists and the conditions of employment were prescribed in July 1942.²⁹ The position of dental hygienist was rated as SP-4, and paid \$1,620 annually. The applicant was required to (1) be a graduate of a course of at least 2 years in duration at a recognized school of oral hygiene, (2) have a license from a state or territory, and (3) have practiced 2 years in a clinic or office of a private dentist. In July 1943 this last requirement was waived.³⁰ The position of senior dental hygienist, SP-5, was authorized in clinics where five or more hygienists were on duty, or under certain other circumstances involving increased responsibility. The pay of a senior hygienist was \$1,800 yearly. In January 1944, over 500 hygienists were on duty, a figure that was approximately the maximum during the war.³¹ Soon after the declaration of war four female civilian dental hygienists were sent overseas with their organizations and they were allowed to remain until returned to the United States under routine, established policies. No additional female hygienists were permitted to leave the Zone of Interior and enlisted men took their places prior to embarkation. The status of dental hygienists during the war was the cause of considerable dissatisfaction on the part of hygienists organizations. The first encountered difficulty was noted when occasionally dental assistants were promoted to the grade of hygienist, SP-4. Such promotion was never authorized, but occurred with enough frequency to require a specific prohibition against the practice in July 1943.³² The dental division agreed with the hygienists organizations in that, except for military personnel

²⁸ In the history of training in the Army Services Forces for the period 1 Jul 39-30 Jun 44, vol IV, p. 109. HD: 314.7-2

²⁹ SG Ltr 1, 1 Jan 43

³⁰ Ltr, Capt Emily Gorman to Mr. Frank Rand, 11 Oct 44, no sub. SG: 221 (Technicians)

³¹ Col George F. Jeffcott. United States Army Dental Service in World War II. Office of the Surgeon General, Department of the Army, Washington DC, 1955, pg. 160.

³² Col George F. Jeffcott. United States Army Dental Service in World War II. Office of the Surgeon General, Department of the Army, Washington DC, 1955, pg. 161

trained by the Army itself, the scaling and polishing of teeth should be limited to persons who had completed the prescribed course of instruction in authorized schools. With the inauguration of the Women's Army Corps, requests were made for the incorporation of dental hygienists as officers in that organization. Both the medical department and the dental division because of rigid regulations affecting the utilization of WAC personnel opposed this request. These regulations provided that WACs could not replace civilian employees and would replace male officers in the ratio of one WAC for one male officer. So the fear arose that the commissioning of hygienists in the WAC would entail the loss of an equal number of dental officers.³³

Late in 1942 the medical department sponsored a bill (H. R. 3790, S. 839) to provide commissions for female dietitians and physiotherapists. This step was made necessary by difficulties encountered when organizations employing these essential civilians were shipped overseas. The dental division seized upon the opportunity by calling attention to the fact that hygienists would probably remain a permanent part of the Army Dental Service and recommended they also be included in the pending bill. However, this recommendation was returned with the penciled notation "not now" signed by the executive officer of the Surgeon General's Office. Organizations representing the hygienists made a vigorous presentation of their cause in congressional committee hearings and finally succeeded in incorporating a clause authorizing the President to provide commissions for other "technical and professional female personnel in categories required for service outside the continental United States."³⁴ But since the bill did not specifically mention hygienists the medical department determined that hygiene services were not needed overseas and they would not invoke the provisions of the bill in their favor.³⁵

Air Force Dentistry

Air Force dentistry was born in 1942 with the establishment of the Dental Section within the Office of the Air Surgeon, United States Army Air Corps.³⁶ In September 1947, the combat elements of the Army Air Forces separated from the US Army, forming the United States Air Force. However, a few Air Force support functions, such as medical care, remained US Army responsibilities. Starting in 1948, the Air Force and Air Surgeon, Maj Gen Malcolm C. Grow, began to convince the US Army and the administration of President Truman that the Air Force needed its own medical service. On 1 July 1949, Air Force General Order No. 35 established a medical service with the following officer personnel components: Medical Corps, Dental Corps, Veterinary

³³ Ltr, Maj Gen Norman T. Kirk to Hon Harve Tibbott, 2 Sep 43. SG: 231 (Dental Hygienists)

³⁴ 56 Stat 1072

³⁵ Ind, Brig Gen Larry B. McAfee to IAS to SG from TAG, 6 Apr 43, sub: Dental hygienists not included in Public Law 828, 77th Congress. SG: 231 (Hygienists)

³⁶ See footnote 2

Corps, Medical Service Corps, Air Force Nurse Corps, and Women's Medical Specialist Corps.³⁷ Thus, the Air Force Dental Service was established.

Early dental enlisted job descriptions identified 5 basic skill levels in the Dental Technician Career Field Subdivision:³⁸

98010, Dental Helper (E-1 to E-2)

98130, Apprentice Dental Specialist (semi-skilled)/98230, Apprentice Dental Laboratory Specialist (E-3)

98150, Dental Specialist (skilled)/98250, Dental Laboratory Specialist (E-4 to E-5)

98170, Dental Technician/98270, Dental Laboratory Technician (E-6 to E-7)

98000, Dental Superintendent (WO)*

*The USAF employed Warrant Officers until the inception of the enlisted "super grades" (E-8 and E-9). The Air Force stopped appointing warrant officers in 1959, the same year the first promotions were made to the new top enlisted grade, Chief Master Sergeant.³⁹

In 1994, the Air Force changed the numerical designations of the enlisted AFSCs. The dental AFSCs became 4Y0X1 (dental assistant) and 4Y0X2 (dental lab).

Prior to 1966, training for Air Force dental technicians was conducted at the Medical Service School at Gunter Air Force Station, Alabama.⁴⁰ It was moved to Sheppard Air Force Base, Texas, and in 1971, the school designation was changed to the School of Health Care Sciences (SHCS).⁴¹ On 1 April 1988 SHCS was deactivated and the school became the 3790th Medical Service Wing, although the name was retained for accreditation purposes with professional medical and dental agencies.⁴² In February 1992, the school was redesignated as a group and the Department of Dentistry was officially renamed the 3791st Dental Training Squadron.⁴³ September of that year brought yet another name change, the 396th Medical Training Group and the Dental Training Squadron was renumbered as the 381st Dental Training Squadron.⁴⁴ Finally, the word "Medical" was deleted from the unit's title and is now known as the 882d Training Group and dental training is conducted within the 381st Training Squadron.⁴⁵

³⁷ No author. USAF Medical Service-History. n.p. On-line. Internet, 20 Feb 06. Available from <http://www.airforcemedicine.afms.mil/history/creation.html>.

³⁸ AFM 160-3, Dental Technicians' Manual, 1 Mar 58, pg 1-2

³⁹ No author. Warrant Officer. n.p. On-line. Internet, 30 May 06. Available from http://en.wikipedia.org/wiki/Warrant_Officer#Air_Force

⁴⁰ CMSgt Susan L. Gream. United States Air Force Dental Service Training History.

⁴¹ Ibid.

⁴² Ibid.

⁴³ Ibid.

⁴⁴ Ibid.

⁴⁵ Ibid.

The enlisted training courses have changed dramatically over the years. Prior to 1979 there were a number of courses available to enlisted personnel in various aspects of clinic management and patient treatment:⁴⁶

1968: The Independent Duty Technician Course (3AZR98170). This 5-week course provided technicians with skills necessary to augment dental officers in specified treatment circumstances such as humanitarian missions.

1972-79: The Expanded Duty Dental Assistant Course (DA) (3ALR98330). This 26-week course prepared dental technicians to perform expanded reversible procedures normally performed by dental officers, such as placement of fillings; construction of temporary crowns; and inlays and bridges. This course ended with the consolidation of the 981X0 career field in 1979. The final class graduated on 27 February 1979.

1975: The Dental Laboratory Specialist Course and later the Dental Laboratory Apprentice Course

1979: Dental Supervisor Course (J3AZR98170-001). This 2-week, 3-day course taught mid-level managers basic clinic operation. Only two classes graduated from this course due to the consolidation of the 981X0 career field in 1979.

1979-1994: The original Dental Specialist Course (J3ABR98130-001) was discontinued in September 1979 and replaced by the Category A Dental Assistant Specialist (DAS) Course (J3ABR98130-002). This new course was a combination of the old assistant course and preventive dentistry course. The Category A designator brought an end to the direct duty assignment program was over; all new accessions would have to attend the course.

1994: The Dental Assistant Specialist Course (J3ABR4Y031-002) replaced the Category A DAS, and reflected the change in the AFSC from 981X0 to 4Y0X1. Oral hygiene training was removed from the course based on the results of an Occupational Survey Report revealing first term airmen in their first jobs were not performing prophylaxis procedures.

????-1979: The Preventive Dentistry Specialist Course (3ALR98131) was originally a Category B technical school. Prior to the Category A designation in 1974, personnel performing oral hygiene treatment procedures could hold the 981X1 AFSC without attending the school. The last class graduated in 1979 with the consolidation of the 98XXX career fields.

1980-91: The Dental Technician Course (J3AZR 98170-002) was a 70-day course designed to teach mid-level NCOs advanced training in dental administration, specialty dental assisting and preventive dentistry.

⁴⁶ Ibid.

1985: The Removable Prosthetics Course (J3AZR98270-011) replaced the Removable Partial Denture Course (J3AZR98270-010) and challenged students to set up a fully balanced denture case and extensively characterize the denture base through the use of acrylic stains.

1985: The Functional and Esthetic Fixed Partial Prosthetics Course (J3AZR98270-012) replaced the Fixed Partial Denture Course and offered new equipment such as waxing tips, Brassler burs and auto-cast casting machines. The Advanced Porcelain Techniques Course (J3AZR98270-013) taught advanced techniques in dental ceramics.

1986: The Periodontal Therapist Course. This two-phase course provided second-term airmen instruction in the recognition of periodontal disease, thorough deep cleaning and personal and group instruction in prevention and management of periodontal disease.

1991: The Dental Craftsman, Dental Laboratory Craftsman Course was developed using the Career Field Education and Training Plan, Utilization and Training Workshop (U&TW) data and Occupational Survey Report results. Although not intended to do so, this course resulted in the discontinuation of the Dental Technician Course.

1996: The Advanced Oral Hygiene Course replaced the Periodontal Therapist Course

1996: As a result of the U&TW 21-30 Jun 94, personnel entering the dental laboratory career ladder would be those previously trained as dental assistants.

1997: The Air Force assumed responsibility for dental assistant and lab training for all the Armed Services.

Air Force Dental Service “Chiefs”

In 1980, the position of Chief of Dental Enlisted Affairs was created within the Dental Service headquarters in Washington, DC. CMSgt Charles P. Kazmer was the first dental technician to hold this position. He served from 1980-1984.⁴⁷

Following in the footsteps of Chief Kazmer were,

1984-1988, CMSgt Michael T. Goodrich

1988-1991, CMSgt Stuart J. Weaver

1991-1993, CMSgt Michael L. Roder

1993-1996, CMSgt Dale Herman

⁴⁷ Col D. Keith Savage, USAFR. 50th Commemorative Anniversary of the United States Dental Service 1949-1999. The Office of the Assistant Surgeon General for Dental Services, United States Air Force, Bolling AFB, DC. 1999. pg 24

1996-1998, CMSgt Walter C. Tieck, Jr.

1998-2000, CMSgt Arthur G. Kennedy

2000-2002, CMSgt James R. Gwyn

2002-2005, CMSgt Terry M. Harford

2005-Present, CMSgt Michael Brouillard

Current Enlisted Strength By Grade (2006)

AB/Amn	4Y0X1	468
	4Y0X2	54
SrA	4Y0X1	418
	4Y0X2	68
SSgt	4Y0X1	547
	4Y0X2	110
TSgt	4Y0X1	305
	4Y0X2	110
MSgt	4Y0X1	187
	4Y0X2	66
SMSgt	4Y0X1	38
	4Y0X2	6
CMSgt	4Y000	13
Total		2390

Air Force Dental Enlisted Job Descriptions (Past and Present)

AFSC 98130: Dental Specialist (extract from A3C APR dated 1963)

CURRENT DUTY: Dent Specl, Dental Clinic-HOSP- Assists the doctor in the treatment of patients by seating and adjusting chair for the patients; selecting and arranging instruments and medications to be used in treatment of dental diseases; exposes, processes, and files dental x-rays; performs oral prophylaxis, and gives home care instructions; maintains a working level of supplies; maintains, adjusts, sharpens, and sterilizes instruments and equipment. Other professional tasks as required.⁴⁸

AFSC 4Y0X1/2, Dental Career Field (2006):⁴⁹

Introduction

The Dental Career Field provides paraprofessional support in the delivery of dental health care to authorized beneficiaries both in-garrison and in a deployed environment. This includes assisting in general dentistry, oral and maxillofacial surgery, prosthetics, endodontics, periodontics, orthodontics, and pediatric dentistry. In addition, services are provided in dental radiology, preventive dentistry, dental laboratory, and office administration/practice management.

CEM Code 4Y000

AFSC 4Y090, Superintendent

1. Specialty Summary. Assists the Dental Squadron Commander (DSC) in overall management and operation of dental activities. Related DoD Occupational Subgroup: 133000.

2. Duties and Responsibilities.

2.1. Manages dental clinic and laboratory activities. Reviews correspondence, reports, and records for accuracy. Develops and analyzes statistical controls; implements improved clinical procedures and work methodology. Manages the annual operating budget and conducts profit analysis. Develops, coordinates, and implements administrative and ancillary training programs.

2.2. Administers unit self-assessment program. Inspects and evaluates dental practices and procedures ensuring compliance with Air Force and civilian oversight agency guidelines. Interprets inspection findings; reports deficiencies, recommended corrective actions, and outstanding accomplishments to the CDS.

3. Specialty Qualifications.

⁴⁸ Extracted from Airman Performance Report on A3C John M. Bast written by TSgt Willie G. Tingen, 5 Nov 63.

⁴⁹ AFM 36-2108, 31 Oct 04.

3.1. Knowledge. Knowledge is mandatory of oral and dental anatomy; fundamentals of physiology; dental therapeutics; systemic diseases; medicines; dental materials and instruments; sterile/infection control techniques; dental instrument room or laboratory procedures; preventive dentistry; dental radiology; dental practice management, budgeting and dental administrative duties.

3.2. Education. Completion of high school or college level courses in biology, chemistry, dental practice management, and business administration is desirable.

3.3. Experience. For award of AFSC 4Y090, qualification in and possession of AFSC 4Y071 or 4Y072 is mandatory. Also, experience is mandatory in functions such as general clinic and/or laboratory procedures, dental practice management, budgeting, and dental administration.

DENTAL ASSISTANT

AFSC 4Y071, Craftsman

AFSC 4Y051, Journeyman

AFSC 4Y031, Apprentice

AFSC 4Y011, Helper

1. Specialty Summary. Performs paraprofessional tasks and oral hygiene duties. Supervises dental assistant functions.

2. Duties and Responsibilities.

2.1. Assists dental officer with patient treatment. Receives patient, examines dental record, and prepares patient for treatment. Adjusts dental chair, and selects and arranges instruments and medications. Takes and records blood pressure. Assists in managing emergency procedures. Retracts tissues and maintains clear operating field. Prepares syringe for injection of anesthetics. Prepares materials for making impressions and restoring defective teeth. Records entries in individual dental records indicating oral cavity condition and treatment accomplished.

2.2. Performs dental health duties. Performs oral prophylaxis and scaling procedures using dental hand instruments and oral hygiene aids. Applies anticariogenic agents and materials. Polishes restorations and instructs patients in dental health maintenance. Assists in planning, developing, and conducting comprehensive dental health programs.

2.3. Exposes and processes dental radiographs. Adjusts radiographic machine, places film in proper position, and exposes intraoral film. Places patient in proper position for extraoral radiograph and exposes film. Processes, labels, and mounts film. Duplicates dental radiographs. Practices and enforces accepted radiation safety standards.

2.4. Engages in general dental duties. Follows infection control procedures and guidelines. Cleans, sterilizes, and sharpens dental instruments. Tests sterilizing equipment. Cleans, lubricates, and makes minor adjustments to dental equipment. Performs daily inspection and user maintenance of dental equipment. Practices and enforces accepted safety standards.

2.5. Performs dental administrative and materiel duties. Maintains dental health records, filing systems, and publications. Reviews correspondence, reports, and records for accuracy. Develops, manages, and conducts self-assessment and hazard communication and dental training programs. Performs dental materiel functions related to procurement, custodial responsibilities, and budgeting, maintaining, and disposing of dental supplies and equipment.

2.6. Inspects and evaluates dental activities. Inspects and evaluates administrative and paraprofessional practices employed in the dental service. Reports deficiencies and outstanding accomplishments to base dental surgeon. Interprets inspection findings and recommends corrective action. Consults and coordinates with Dental Squadron Commander for improving administrative and paraprofessional procedures. Institutes corrective action to ensure adequacy and compliance.

3. Specialty Qualifications.

3.1. Knowledge. Knowledge is mandatory of oral and dental anatomy; fundamentals of physiology; dental therapeutics; systemic diseases; medicines; dental materials and instruments; sterile/infection control techniques; dental treatment room and laboratory procedures; preventive dentistry; dental administration; budgeting; and equipment maintenance.

3.2. Education. For entry into this specialty, completion of high school with courses in biology and chemistry is desirable.

3.3. Training. The following training is mandatory for award of the AFSC indicated:

3.3.1. 4Y031. Completion of a basic dental assistant course.

3.3.2. 4Y051. Completion of 4Y051 Dental Assistant Journeyman correspondence course.

3.3.3. 4Y071. Completion of 4Y071 Dental Assistant craftsman correspondence course.

3.4. Experience. The following experience is mandatory for award of the AFSC indicated:

3.4.1. 4Y051. Qualification in and possession of AFSC 4Y031. Also, experience in functions such as assisting the dentist in the delivery of patient treatment, exposing dental radiographs, performing oral prophylaxis procedures, and maintaining dental equipment.

3.4.2. 4Y071. Qualification in and possession of AFSC 4Y051. Also, experience performing and supervising functions such as assisting the dentist in the delivery of patient treatment, exposing dental radiographs, performing oral prophylaxis procedures, and dental administrative duties.

3.5. Other. The following are mandatory as indicated:

3.5.1. For entry into this specialty:

3.5.2.1. Normal color vision as defined in AFI 48-123, *Medical Examination and Standards*.

DENTAL LABORATORY

AFSC 4Y072, Craftsman

AFSC 4Y052, Journeyman

AFSC 4Y032, Apprentice

AFSC 4Y012, Helper

1. Specialty Summary. Fabricates and repairs dental and maxillofacial prostheses and appliances. Inspects dental laboratory equipment and supervises dental laboratory activities. Related DoD Occupational Subgroup: 133100.

2. Duties and Responsibilities.

2.1. Performs procedures to fabricate and repair complete dental prostheses, fixed and removable partial dental prostheses, and individual crowns, inlays, pontics, splints, stabilizers, and space maintainers. Uses precious and nonprecious metals, acrylic resins, and porcelain as basic materials.

2.2. Manages dental laboratory administration tasks and equipment. Maintains dental laboratory records. Prepares reports on laboratory activities. Requisitions, stores, and issues supplies. Inspects equipment and performs minor maintenance. Reports defective equipment or utilities for corrective action. Accounts for precious metals expended. Inspects and evaluates administrative and technical procedures. Furnishes deficiency reports and outstanding accomplishments to Chief of Dental Services (CDS). Interprets inspection findings and recommends corrective action. Consults and coordinates with CDS for improving procedures. Institutes corrective measures, and maintains follow-up action to ensure adequacy and compliance.

3. Specialty Qualifications.

3.1. Knowledge. Knowledge is mandatory of oral anatomy and physiology; inorganic chemistry; metallurgy fundamentals; dental laboratory technology; dental material physical and chemical properties; dental therapeutics; sterile techniques; emergency dental care; oral hygiene; dental materials; instruments; infection control procedures; dental laboratory technology; dental administration; budgeting; dental laboratory equipment and maintenance requirements

3.2. Education. For entry into this specialty, completion of high school with courses in biology and chemistry is desirable.

3.3. Training. The following training is mandatory for award of the AFSC indicated:

3.3.1. 4Y032. Completion of the Basic Dental Laboratory course

3.3.2. 4Y052. Completion of the 4&052 Dental Laboratory Journeyman correspondence course.

3.3.2. 4Y072. Completion of the Dental Laboratory Craftsman correspondence course.

3.4. Experience. The following experience is mandatory for award of the AFSC indicated:

3.4.1. 4Y052. Qualification in and possession of AFSC 4Y032. Also, experience fabricating prosthodontic restorations including fixed, removable, and orthodontic appliances.

3.4.2. 4Y072. Qualification in and possession of AFSC 4Y052. Also, experience performing and supervising functions such as fabricating and repairing dental prostheses and appliances.

3.5. Other. The following is mandatory for entry into this specialty:

3.5.1. Normal color vision as defined in AFI 48-123, *Medical Examination and Standards*.