



Fall 2012

Newsletter

North Dakota State Board of Dental Examiners

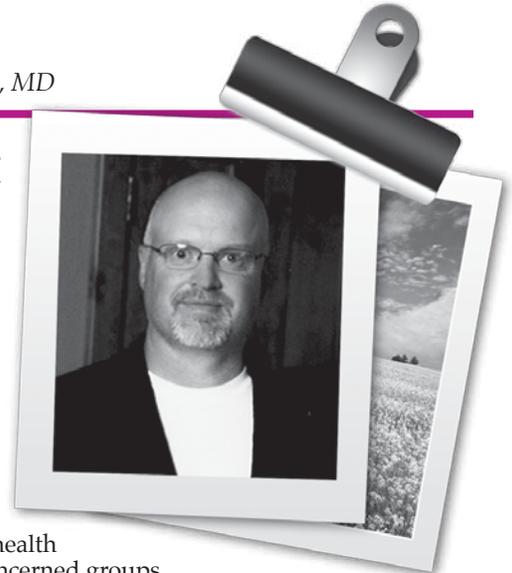
PRESIDENT'S MESSAGE *by Troy Petersen, DMD, MD*

"Nothing diminishes anxiety faster than action." is a quote attributable to Walter Anderson. The quote causes one to wonder: with dentistry experiencing its share of anxiety these days, is dentistry moving toward the changes needed to address it?

With many dental boards, associations, and other groups of interest promoting legislation to expand the scope of practice of dental auxiliaries it would appear action is being taking to confront barriers to dental care. New workforce models have been proposed, each looking for some way to meet the need of the under served, whether they are children, seniors or some segment of population between. But, not all actions are created equal.

While there is little consistency in definitions or scope of practice in the various models, the objective of removing barriers to dental care does seem consistent. The NDSBDE has made proactive efforts to become a part of this process by communicating and sometimes collaborating with stakeholders to discuss a myriad of initiatives, addressing practical measures which have potential

to alleviate barriers while also remaining consistent with the NDSBDE's mission to protect the public. The Board is continuing it's commitment to work together with dental assistants, hygienists and other members of the dental auxiliary family in addition to the state Dental Association, public health entities and other concerned groups.



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IS YOUR DENTAL ASSISTANT REGISTERED? ARE YOU A REGISTERED DENTAL ASSISTANT?

All dental assistants must be registered to perform expanded duties. It's the law.

Dental assistants are required to register with the Board of Dental Examiners in order to perform the 33 allowable duties. If a dental assistant is not registered and performing these functions, she/he is not in compliance with the rules of the North Dakota Board of Dental Examiners.

Please register with the Board in order to perform procedures such as: radiographs; acid-etching of enamel surfaces; adjusting permanent crowns outside the mouth; placing matrix bands and wedges; fabricating, adjusting, placing and cementing of temporary crowns; placing and removing of rubber dams; sealants; polish

coronal surfaces of teeth with rubber cup or brush; monitor patients inducted by a dentist into nitrous oxide relative analgesia; cut and remove arch wires or replace loose bands or brackets; or orally transmit a prescription that has been authorized by the supervising dentist – just name a few of the allowed duties. (Some duties may require additional documentation and/or courses.)

Taking the time to register, to maintain registration, and expanding your knowledge in dentistry by continued education, may give you and your dental assistant the edge; the edge on being a confident team, a team for better dentistry.

*Carla Schneider, CDA, RDA
NDDAA Liaison*

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MEMBER DIRECTORY

BOARD MEMBERS

PRESIDENT

Troy R. Petersen, DMD, MD
Grand Forks
Term expires: 2014

PRESIDENT ELECT

Anthony Malaktaris, DDS
Mandan
Term expires: 2015

IMMEDIATE PAST PRESIDENT

Robert C. Lauf, DDS
Mayville
Term expires: 6-30-2013

SECRETARY-TREASURER

Wally Berning, Public Member
Minot
Term expires: 2013

MEMBER

Dale Brewster, DDS
Stanley
Term expires: 2016

MEMBER

Catherine Cornell, RDH
Fargo
Term expires: 2016

MEMBER

Greg A. Evanoff, DDS
Minot
Term expires: 2017

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Doctor Shopping?

Rita Sommers, Executive Director

Being involved in the dental profession, no doubt you've heard the term "doctor shopping" and more than likely experienced your or someone else's patient asking you for specific pain medications under suspicious circumstances. The subject was brought to the forefront at the American Association of Dental Board's (AADB) 2012 Annual Meeting.

Several reasons exist for the AADB's focus on the topic; primarily that prescription drug abuse is on the rise and the role of regulatory dental boards is public protection. One AADB conference speaker recommended several remedies including asking dentists to perform a self query at least twice a year. Many states are enacting legislation which would make this practice mandatory for prescribers and dispensers. Through a self query attention may be brought to a patient or product name or a quantity of tabs that does not match your records. You may be alerted to your patient seeing other doctors who are prescribing the same narcotics. Accounts of doctor shopping in other states as reported by dental boards across the country are dramatic and hard to believe. For example, a man claiming to have a broken arm visited multiple hospitals and clinics with a phony cast seeking pain medications only to remove the cast when leaving each facility. Are you sure you could identify a similar dental con artist in your office looking for pain relief?

Surveys also tell us that prescriptions are at times written fraudulently by staff, patients, cleaning personnel or others who discover ways to access doctor's Rx pads. State boards further reported disciplinary actions against non-qualified licensees who have fraudulently prescribed for patients or family as well as dentists self-prescribing or over-prescribing to selected individuals who return the medications to the dentist. In many cases, prescription pads have been removed from offices and used without the knowledge of the dentist.

The NDSBDE urges you to become familiar with the ND Board of Pharmacy's Prescription Drug Monitoring Program (PDMP) in order to access and utilize their data base. Information provided by the Board of Pharmacy could protect your patients from harm and you from falling victim to any one of the tangled webs others may intend for you. Accessing the PDMP can prove a useful tool for dentists wishing to verify any patient's prescription history as well as what has been recorded as written by them. The Board of Pharmacy maintains the monitoring program of prescribing and dispensing of all controlled substances.

Is looking at a patient's prescription records a Health Insurance Portability and Accountability Act (HIPAA) violation? Absolutely not, although you do need to use the website information in an ethical manner, and access to it should be by the doctor only. Office staff should never be allowed to utilize your name and password to search PDMP information.

Could a patient provide different dentists with different names to bypass the PDMP system? How can dentists know that a patient is providing their true identity? The best way to decrease the chances for false information is to request and keep a photo copy of existing patient's government-issued I.D. in their file and always requesting any new patient's identification. This may not be critical with patients of record familiar to you. But, recognizing that in many parts of our state unfamiliar faces have become the norm, establishing a policy verifying identification in a busy practice with many new patients is a good idea.

For patients with a true dental emergency including severe pain, prescribing a non narcotic and anti-inflammatory drugs (NSAIDS) may be the best alternative. Patients/drug shoppers may try to use their own dental pain (real or not) to validate their requests for prescription medications. As a healthcare provider, it is your responsibility to insist patients follow through with recommended emergency related treatment. If they will not, dismiss them from your practice (after first referring to Administrative Code 20-02-01-08 for guidance on appropriate dismissal of a patient from your practice).



GOVERNOR APPOINTS NEW MEMBERS TO NDSBDE



Dr. Greg Evanoff



Wally Berning

The Board welcomed two new members this year; Mr. Wally Berning and Dr. Greg Evanoff, both from Minot. Wally was appointed by the Governor's office as the Board's public member. He, his wife Cookie and family have enjoyed the Minot

community for over 50 years. As a retired state District Judge for the Northwest Judicial District of North Dakota, Judge Berning has served on numerous boards and committees of the State Bar Association and his community. In addition to the Board of Dental Examiners he now serves on the Arena Board for the North Dakota State Fair as well as a member of the Minot City Planning Commission.

Dr. Greg Evanoff was also newly appointed as a dentist member on the Board replacing Dr. Dale Dohms who completed two terms of service. Dr. Evanoff is a Minot native having attended dental school at the University of Minnesota, graduating in 1983 and joining Drs. Al Lindsey and Vern Reardon in practice. Dr. Evanoff currently shares private practice with Dr. Pat Landsiedel and his son, Michael Evanoff. Dr. Evanoff has previously served on the Dental Service Corporation Board, as well as representing the Northwest District as its president and subsequently the NDDA as Trustee. Dr. Evanoff and his wife Diane have three sons, and one grandson.

ADVERTISING "HEADS UP"

Advertising issues seem to be on most every NDSBDE agenda these days. One popular marketing trend is to offer free services and coupons to entice patients into the practice. Many have heard of Groupon. Most states have laws against 'kickbacks' or 'fee splitting' for dentists - 34 states to be exact. The issue of fee splitting is addressed in the ND Century Code. The prohibition against fee splitting [See NDCC 43-28-18.(9)] may also be applicable to the marketing of dental treatments or procedures via the Groupon promotions. The marketing may also be a violation of the Code of Ethics which states a dentist may not "accept or tender 'rebates' or 'split fees.'" Referral gifts and Groupon fee arrangements may be a violation of the Code's provisions. A rebate paid to a patient after a claim for the service has been submitted to an insurer may violate Section 5.B. of the ADA Ethics Code, which provides that "dentists shall not represent



the fees being charged for providing care in a false or misleading manner". And attracting new Medicaid patients with the fee splitting deals is a violation of federal law. Evidently federal law does not like kick-backs either! Violators of federal laws could be charged with a felony and be subject to fines or prison.

Groupon like other advertising mediums such as various yellow page solicitors and marketing firms do not consider it their obligation to determine whether the practitioner is advertising correctly, lawfully, or ethically. According to the American Society of Plastic Surgeons, "Groupon takes

a buyer beware position and assumes no responsibility for determining whether the program raises legal implications for the service providers (doctors)." In a parallel fashion, the NDSBDE is not inclined to hold anyone other than the licensed individual or individuals named in promotional marketing responsible for violations of advertising statute.

PRESIDENTS MESSAGE CONTINUED

At its September 2012 meeting the NDBDE reviewed a draft of the statutory amendments found elsewhere in this newsletter, some intended to address barrier problems. The NDSBDE is also investigating an opportunity to collaborate with the North Dakota Board of Medical Examiners (NDBOME) in an effort to institute a Practitioner's Health Program (PHP). The Medical Examiners are spearheading the effort to develop and operate this PHP outside the confines of their own association. The program would offer licensees impaired due to alcohol or other substance abuse or other psychological problems confidential guidance, counseling or treatment. An outside program of this type could be more likely utilized by practitioners from a variety of professions needing help.

Benefiting practitioners in this manner reduces the likelihood of their departure from the workforce. And, keeping them in the workforce benefits the public. Much like similar programs initiated across the country, the NDSBDE wishes to work together with like-minded associations to safeguard the public and allow the practitioners to seek professional help while maintaining their practice. These programs save careers and lives.

I would like to welcome Judge Berning and Dr. Evanoff, two new members to the NDSBDE. I would also like to take this opportunity to thank all of the members of the Board and our exceptional Executive Director for all of their hard work.

WHERE IS A FORENSIC DENTAL CONSULTANT WHEN YOU NEED ONE?

If you haven't talked with Roger Hasey, DDS, FICD, Forensic Dental Consultant, you're missing out on a very important and interesting (in my opinion) aspect of dentistry. Forensic odontologists are highly experienced, specially trained dentists who use their expertise to help identify unknown remains and trace bite marks to a specific individual. Dr. Hasey assists in this examination and information gathering process where information or clues obtained are used to

- Identify human remains that cannot be identified using fingerprints or other means
- Identify bodies in mass fatalities, such as plane crashes and natural disasters
- Determine the source of bite mark injuries, in cases of assault or suspected abuse
- Estimate the age of skeletal remains
- Provide testimony in cases of dental malpractice

The forensic odontologist may be called in by police officers, the medical examiner or the coroner. In death cases, the forensic odontologist attends the autopsy and takes photographs, cranial measurements, dental impressions and xrays from the remains. These exemplars are then compared to those of known missing individuals. If a match can be made, the remains can be identified.

At a recent meeting of the NDSBDE, Dr. Hasey informed that members of the Board that North Dakota has sixty-six persons listed with the National Crime Information Center, (NCIC). Only two of these persons have DNA as part of their records at NCIC and five have dental records recorded. In an effort to better serve the ND State Forensic Examiners in their search for missing persons, Dr. Hasey wants all licensed dentists to be familiar with the form letter below. If your office receives this form letter, please address the matter promptly.

The mission statement of the ND State Forensic Examiners is "to provide vital information needed by the county coroner, family of the deceased, Public Health Department, law enforcement, and many other agencies involved in the investigation of a death. The Forensic Examiner Division provides consultation and/or autopsy services to North Dakota County Coroners."

If you would like more information, please email Dr. Roger E. Hasey at: ndiddds1@hotmail.com.

FORENSIC EXAMINERS OFFICE:
2837 East Main Avenue, Dept. 301
P.O. Box 5520
Bismarck, ND 58509-5520
www.ndhealth.gov/NDME

**NORTH DAKOTA**
DEPARTMENT of HEALTH

North Dakota Forensic Examiners Office
2837 East Main Avenue
Bismarck ND 58501

Dear Doctor _____

The North Dakota Forensic Examiners Office requests your assistance in the identification process of the following individual:
We believe you may have provided dental treatment for this person.

We hereby request the following ORIGINAL records that you may have in your possession.

1. All records and notes concerning treatments.
2. All x-rays – full mouth, bitewings and cephalometrics, panoraxes with right and left appropriately marked on each film.
3. Any referral letters to specialists.
4. Study models.
5. Any photographs that you may possess of this individual.

Please note that all records will be returned to your office.

Sincerely,

William Massello, III, MD
North Dakota Forensic Examiner

<small>Forensic Examiner 701-328-6138</small>	<small>On-Call Investigator State Radio 701-328-8921 - Unit 6510</small>	<small>Fax 701-328-6228</small>
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LEGISLATIVE CHANGES INITIATED

The NDSBDE's Legislative Committee has submitted proposed legislative and rule changes to the Board for review. The Board analyzes all proposed amendments and may adopt the final draft. The proposed amendments generally fall into three categories; proposed new rules/laws, proposed "housekeeping" changes, and proposed amendments to existing

43-28-06 (3). 3. Issue, suspend, revoke, limit, cancel, restrict, and reinstate licenses to practice dentistry or dental hygiene and the biennial certificates of registration upon any grounds authorized by this chapter or rules adopted by the board.

43-28-10.1. Requirements for licensure.

The board may grant a license to practice dentistry to an applicant who has met all of the following requirements:

1. The applicant has a doctorate of dental surgery or doctorate of dental medicine degree from an accredited dental school.
2. The applicant has passed the examination administered by the joint commission on national dental examinations or the national dental examining board of Canada.
3. The applicant has passed a clinical competency examination administered by a regional dental testing service approved by the board by rule.
4. The applicant has passed, within one year of making application, a written examination on the laws and rules governing the practice of dentistry in this state administered by the board at a meeting.
5. Grounds for denial of the application under section 43-28-18 do not exist.
6. The applicant has met any requirement for licensure established by the board by rule.

rules/laws. Most of the proposed amendments are deemed "housekeeping" amendments with very few amendments to existing rules. Underlined text represents additions to current language. Text shown with strike through is currently in the law; the intent is to remove the language. Proposed amendments to NDCC 43-28 and Chapter 43-20 are as follows:

43-28-25. Unlawful acts - Penalty.

- d. To practice dentistry in this state without a license and certificate of registration.
3. For any person, except a ~~North Dakota~~-licensed practicing dentist, to own more than forty-nine percent of an office practice or business at which the practice of dentistry is performed. This provision does not apply to a board-approved medical clinic, hospital, or public health setting with which a dentist is associated; a board-approved nonprofit organization created to serve the dental needs of an underserved population; or the heir or personal representative of a deceased dentist. The board may inspect and approve a medical clinic, hospital, public health setting, or nonprofit organization at which the practice of dentistry is performed. The heir or personal representative may operate an office under the name of the deceased dentist for a period of not longer than two years from the date of the dentist's death.

43-20-01.4. License renewal - Audit.

7. The board may select a ~~random sample of the license renewal applications for~~ audit of continuing education credits. Each licensee shall maintain certificates or records of continuing education activities from the previous renewal cycle. Upon receiving notice of an audit from the board, a licensee shall provide satisfactory documentation of attendance at, or participation in, the continuing education activities listed on the licensee's continuing

education form.

Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the license.

43-20-03. Dental hygienists - Practice by.

As used in this chapter, "dental hygiene" and the practice thereof means the removal of accumulated matter from the natural and restored surfaces of teeth and from restorations in the human mouth, the polishing of such surfaces, and the topical application of drugs to the surface tissues of the mouth and to the surface of teeth if such acts are performed under the direct, ~~modified general~~ indirect, or general supervision of a licensed dentist. General supervision may be used if the procedures are authorized in advance by the supervising dentist, except procedures which may only be used under direct supervision as established by the board by rule. Only a person licensed as a dental hygienist may be referred to as a dental hygienist.

Additional tasks permitted to be performed by licensed dental hygienists may be outlined by the board of dental examiners by appropriate rules.

20-01-02-01. Definitions. Unless specifically stated otherwise, the following definitions are applicable throughout this title:

23. "Oral assessment" means the evaluation of the oral cavity using a reliable and valid instrument as permitted by scope of practice to document baseline status and changes. Areas assessed are buccal mucosa, soft and hard tissue, dorsum and border of tongue, and floor of mouth.

20-02-01-03.1. Additional requirements for licensure by examination.

The board may grant a license to practice dentistry to an applicant who has met the requirements of North Dakota Century Code section 43-28-10.1 and all the following requirements:

1. The applicant has passed the examination administered by the joint commission on national dental examiners or the national dental examining board of Canada within five years of application.
2. The applicant has passed, within five years of application, a clinical competency examination administered by one of the following:
 - a. Central regional dental testing service.
 - b. Council of interstate testing agencies.
 - c. Northeast regional board of dental examiners, ~~except after December 31, 2009, the examination approved by the American board of dental examiners.~~
 - d. Southern regional testing agency, except the applicant must pass the periodontal part of an examination administered by another approved regional dental testing service.
 - e. Western regional examining board.
3. The applicant has successfully completed a cardiopulmonary resuscitation course within two years of application.
4. The applicant has the physical health and visual acuity to enable the applicant to meet the minimum standards of professional competence.

20-02-01-04. Temporary license to practice dentistry. The board may grant a nonrenewable temporary license to practice dentistry in the state of North Dakota for a period not to exceed one year. ~~The temporary license will be issued only for special purposes that are unique and cannot be satisfied by the normal means to licensure:~~

1. A temporary license to practice dentistry in North Dakota may be granted to a dentist when the dentist:
 - a. Has applied to the board as prescribed in North Dakota Century Code section 43-28-11.
 - b. Has paid the nonrefundable application and license fee that may be prescribed by the board.
 - g. Has taken the North Dakota laws and rules examination.

20-02-01-04.2. Volunteer license to practice dentistry.

6. ~~The board may collect from the applicant has paid~~ the nonrefundable application and license fee prescribed by the board.

20-02-01-06. Continuing dental education for dentists. Each dentist shall provide evidence on forms supplied by the board that the dentist has attended or participated in continuing dental education in accordance with the following conditions:

6. The board may audit the continuing education credits of a dentist. Each licensee shall maintain certificates or records of continuing education activities from the previous renewal cycle. Upon receiving notice of an audit from the board, a licensee shall provide satisfactory documentation of attendance at, or participation in the continuing education activities listed on the licensee's continuing education form. Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the license.

20-02-01-08. Discontinuance of practice - Retirement - Discontinuance of treatment. These rules are adopted for the purpose of avoiding practice abandonment. A

licensed dentist shall maintain patient records in a manner consistent with the protection of the welfare of the patient. Upon request of the patient or patient's legal guardian, the dentist shall furnish the dental records or copies of the records, including dental radiographs or copies of the radiographs.

The dentist may charge a nominal fee for duplication of records, but may not refuse to transfer records for nonpayment of any fees.

1. A licensee, upon retirement, or upon discontinuation of the practice of dentistry, or upon moving from a community, shall notify all active patients in writing giving 30 days notice and by publication once a week for three consecutive weeks in a newspaper of general circulation in the community that the licensee intends to discontinue the practice of dentistry. The licensee shall make reasonable arrangements with active patients for the transfer of patient records, or copies thereof, to the succeeding licensee. The licensee must provide all records to patients before the practice terminates. In the event of a transfer of patient records to another licensee assuming the practice, written notice must be furnished to all patients as hereinbefore specified. "Active patient" is defined as a person whom the licensee has examined, treated, cared for, or otherwise consulted with during the two-year period prior to the discontinuation of the practice of dentistry by the licensee. In the event of a nontransfer of records, a licensee shall have the ongoing obligation of not less than two years to afford the licensee's prior patients access to those records not previously provided to the patient.

20-03-01-01. Duties. A dental assistant may perform the duties listed in subsections 1 through 6 under direct supervision of a dentist. A qualified dental assistant may perform duties set forth in subsections 1 through 7 under direct supervision of a dentist. A registered dental assistant may perform the duties set forth in subsections 1 through 24 under indirect supervision of a dentist. A registered dental assistant may perform duties set forth in subsections 25 through 31 under direct supervision of a dentist. A registered dental assistant may perform duties set forth in subsections 32 and 33 under general supervision of a dentist.

A registered dental assistant may perform 34 under general supervision of a dentist or in a public health setting.

15. Perform nonsurgical clinical and laboratory oral diagnosis diagnostic tests, including pulp testing, for interpretation by the dentist.

33. Cut and remove arch wires, or replace loose bands, loose brackets, or other orthodontic appliances, or repack dry socket medication and packing for palliative treatment.

34. Make an oral assessment.

20-03-01-06. Continuing dental education for qualified and registered dental assistants.

Each qualified or registered dental assistant shall provide evidence on forms supplied by the board that the qualified or registered dental assistant has attended or participated in continuing dental education in accordance with the following conditions:

6. The board may audit continuing education credits of a registered dental assistant. Proof of continuing education shall be maintained from the previous renewal cycle. Upon receiving notice of an audit from the board, a registered dental assistant shall provide satisfactory documentation of attendance at, or participation in, the continuing education activities listed on the licensee's continuing education form. Failure to comply with the audit is grounds for nonrenewal of or disciplinary action against the registration.

20-04-01-04.1. Clinical competency examination retakes. A dental hygiene applicant may take a clinical examination three times before remedial training is required. After failing the examination for a third time, and prior to the fourth attempt of the examination, an applicant shall:

1. Submit to the board a detailed plan for remedial training by a n accredited dental hygiene school. The board must approve the proposed remedial training.

2. Submit proof to the board of passing the remedial training within twenty-four months of its approval by the board. The board may grant or deny a fourth attempt of the clinical examination. A fourth attempt must occur within twelve months of the date of the board's decision. If an applicant fails any part of the examination after remedial training, the board must approve additional retakes.



DISCIPLINARY ACTIONS

Complaint Committee Chair, Dale Brewster, DDS

The Complaint Committee of the North Dakota State Board of Dental Examiners is charged with processing all complaints presented to the Board (except those in which it is alleged a practitioner is an immediate threat to the public). Complaints against licensees may originate from patients, other practitioners, or medical malpractice insurance companies. The

Board may also initiate action on its own motion if it becomes aware of a possible violation of the Dental Practice Act.

The Board took action against the license and registration of the following licensees for violations which include misleading advertising, failure to release patient records, unprofessional conduct, and practice abandonment.

First name	Last Name	License	Action	Date
CURTIS	TANABE, DDS	#1557	Settlement Agreement Letter of Reprimand	Jan 2012
STEVEN	HOIUM, DDS	# 1675	Settlement Agreement Suspended 1 year w/stipulations	Feb 2012
ROBERT	BATES, DDS	# 1999	Settlement Agreement Suspended 3 years; \$2000 fine	March 2012
LAURA	BERGQUIST, RDA	#143	Settlement Agreement Suspension w/ stipulations	May 2012
JULIE	KENNEDY, DDS	#2040	Settlement Agreement	May 2012

CONTINUING EDUCATION CERTIFICATES



CE Committee Chair, Cathy Cornell, RDH

It is the sole responsibility of each licensee to obtain a proof of CE or a certificate verifying participation in continuing education courses and activities.

Certificates should contain the following information:

- The signature of or verification by the provider
- The name of the licensee in attendance
- The title of the course or meeting attended or completed
- The date of attendance or completion
- The number of hours earned (based on clock hours of attendance)
- Indication of whether the course was attended in person or online

Licensees must keep CE documentation from the previous renewal cycle (a minimum of four years). Dentists, dental hygienists, and registered dental assistants are subject to audit of proof of C.E. compliance by the Board.

Registered dental assistants must renew their registration by December 31, 2012. Continuing education requirements for dental assistant includes (total of 16 hours) including two hours of CPR, two ours of infection control and two hours of ethics/ jurisprudence. All additional hours must be clinical and directly related to dentistry. Eight hours or half of the required hours may be obtained via online courses. Therefore, it is a good idea to provide evidence of the method of delivery if the course was taken in a live interactive presentation format.

Courses relating to the following are no longer recognized for continuing education credit toward the licensee's renewal: purchase, sale, or transfer of a dental practice; fitness and weight management; financial planning, estate planning or personal investments; any topic not related to clinical dentistry. Each North Dakota sponsor of continuing education courses is encouraged to obtain CE approval to ensure that credit will be given to attendees. The approval form is available on the NDSBDE's web site; www.nddentalboard.org.

MINIMAL SEDATION RULES FAQs

Troy Petersen, DMD, MD, Anesthesia Chair

What if a physician prescribes an antianxiety medication (e.g. Valium), or the patient takes an antianxiety medication for which they have a standing prescription, how does that affect the dentist's prescribing ability the day of treatment?

The licensed dentist would be permitted to administer a single supplemental dose of the same prescription drug, no greater than ½ the original dose after it has been determined the clinical half-life of the original dose has been reached. The total aggregate dose shall not exceed 1.5 times the MRD on the date of treatment. In the case of a pediatric or medically-compromised patient, the licensed dentist would be restricted from administering any medications for anti-anxiety purposes, including nitrous oxide.

2. Do these rules limit the administration of local anesthesia? No.

3. When does dosing start? (e.g. the dentist prescribes 5mg of valium for anxiolysis the evening before treatment. Can the dentist then administer another full dose the morning of treatment? Or would that constitute 2 doses?) Dosing starts at the time the first dose is taken by the patient prior to the scheduled appointment. The half-life of the drug would need to be reached before an additional dose is administered or prescribed.

4. In treating pediatric patients, can a dentist increase the percentage of nitrous oxide for a short time for any reason when administered via the mouth? No. The concentration of nitrous oxide may not exceed 50%.

5. Can a licensed dentist utilize nitrous oxide with patients? Yes, with some qualifications.

A. In the case of pediatric or medically-compromised patients: dentists are limited to prescribing a single drug administering nitrous oxide up to a concentration of 50% for the purposes of minimal sedation. Nitrous oxide cannot be combined with a prescription drug for the purposes of anti-anxiety unless the dentist holds a minimal sedation permit.

B. In the case of healthy non-pediatric patients (age 13 or older): dentist may utilize nitrous oxide in combination

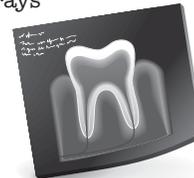
with a single drug (where the total dosage does not exceed 1.5 MRD on the day of treatment) for the purposes of minimal sedation.

6. What reliable sources are available to determine the clinical half-life of a drug? Consult the Physician's Desk Reference or a licensed pharmacist.

7. Is the use of drugs that contain a combination/mixture of drugs allowed in combination with nitrous oxide? The use of any compounded drug, like Mepergan Fortis, would automatically constitute moderate sedation for which a moderate sedation permit is required. (Mepergan Fortis contains the opioid pain reliever Meperidine, also known as Demeral and the anti-nausea medication Promethazine also known as Phenergan.)

Patient Records - A Brief Reminder

Dentists are obliged and required by law to safeguard the confidentiality of patient records. Dentists shall maintain patient records in a manner consistent with the protection of the welfare of the patient. Upon request of a patient, dentists shall provide gratuitously or for nominal cost, such dental records or copies of them, including dental x-rays or copies of them. This obligation exists whether or not the patient's account is paid in full.



Change of Address

Numerous mailings are returned to the Board due to the recipient failing to notify the Board of a change of address. This has caused licensees in all categories to have their license or registration lapse for failing to renew in the appropriate time frame; this in turn resulting in late fees or disciplinary action. The Practice Act clearly states that it is the responsibilities of the licensee or registrant to notify the Board of any change of address within 30 days of such a change. Please, contact the Board in writing with a new address or name

Mission Statement

The Mission of the North Dakota State Board of Dental Examiners is to protect the dental health of the citizens of North Dakota by regulating the practice of dentistry, dental hygiene and dental assisting, through the enforcement of laws, rules and policies. The board requires competency and ethical behavior in all areas of the practice of dentistry.



ANNUAL REPORT OF THE NORTH DAKOTA STATE BOARD OF DENTAL EXAMINERS

July 15, 2012

The Mission of the North Dakota State Board of Dental Examiners is to protect the dental health of the citizens of North Dakota by regulating the practice of dentistry and dental hygiene through the enforcement of laws, rules and policies. The board requires competency and ethical behavior in all areas of the practice of dentistry.

2012 OFFICERS AND MEMBERS OF THE NDSBDE

Troy Petersen, DMD, MD, President – Grand Forks.....	(term expires 3-15-2014)
Tony Malaktaris, DDS, Pres - Elect – Mandan	(term expires 3-15-2015)
Rob Lauf, DDS, Past - President – Mayville.....	(term expires 6-30-2013)
Greg Evanoff, DDS, Member – Minot	(term expires 3-15-2017)
Wally Berning, Public Member, – Minot.....	(term expires 3-15-2013)
Dale Brewster, DDS, Member – Stanley.....	(term expires 3-15-2016)
Cathy Cornell, RDH, Member – Fargo.....	(term expires 3-15-2016)

The Board is comprised of five standing committees; Legislative, Complaints, Continuing Education, Anesthesia and Application Review. Responsibilities of committee chairs include ensuring that matters directed to committees are addressed in a timely fashion and reporting committee work at quarterly meetings. The process for selecting a committee members and chairs occurs annually by affirmative consensus of members of the Board. The efficiency of the Board can be attributed to a balance within the Board's structure; committee work is distributed among members. Chairs of those committees and highlights of activities are as follows:

LEGISLATIVE COMMITTEE

Chair: Rob Lauf, DDS

NDSBDE recognizes that while oral health of North Dakotans has improved substantially in recent decades, some segments of the population unfortunately continue to face challenges overcoming barriers to dental care. The Board continues its work to collaborate with dental health entities to address issues which may result in legislative activity. Barriers to dental care issues have been a dynamic topic on the agenda of many dental stakeholders. The Board's role is to ensure that only competent and trained practitioners enter the dental workforce providing services within the scope and training of their dental education. Miscellaneous "housekeeping changes" may be addressed in the next legislative session.

COMPLAINT COMMITTEE

Chair: Dale Brewster, DDS

All members of the dental team are subject to the same important public protection measures: established standards for license and registration; approved training courses; ethical guidance; and enforceable procedures for dealing with registrants whose fitness to practice or performance has been

called into question.

The Board addressed a total of thirty-one (31) complaints in the period of July, 2011 through July, 2012 (16 complaints were addressed in 2009; 24 complaints addressed in 2010). The Board took disciplinary action against five licensees. The complaints are comprised of misleading advertising, standard of care issues, and unprofessional conduct.

The Board receives many inquiries from dental assistants who desire to be registered with the Board. Of concern to the Board was the number of dental assistants performing expanded duties without being registered. Although the dentist is not directly responsible for the dental assistant's registration, the dentist remains responsible for the duties that the dental assistant performs under the dentist's supervision; the dentist is ultimately accountable to the Board for any infraction. A link to the laws and rules pertaining to dentistry and ADA's Code of conduct can be found on the Board's web site. Dr. Dale Brewster (Stanley) continued to provide outstanding leadership as the Chair of the Complaint Committee during the past year.

CONTINUING EDUCATION

Chair: Catherine Cornell, RDH

Most inquiries related to the revisions of code are in regard to continuing education requirements and approval for continuing education courses. Sponsors of any continuing education program must assure courses being offered are approved by the NDSBDE's CE Committee by submitting the CE approval form which can be found on the Board's web site (www.nddentalboard.org). The form asks for program content information and course outline as well as presenter CVs. Inquiries regarding approval must be submitted directly to the Board 60 days prior to CE event. Continuing education requirements allow 16 of the 32 required hours to be online

clinical education. Ethics and jurisprudence CE is required as part of the 32 hours for dentists, and 16 hours for dental hygienists and dental assistants (8 online education hours allowed) during each two year renewal cycle.

An online version of the open book ethics and jurisprudence exam is available to licensees at no cost. To take the online exam, go to the Board's web site. The licensee is required to enter first and last name exactly as it appears on your license and registration, license number and your SSN. Once 60 questions are answered correctly, the exam is completed and 2 CEU's are awarded electronically. In the event that the test is completed and not enough questions have been correctly answered, the incorrectly answered questions re-appear in random order until the correct number has been answered correctly.

ANESTHESIA COMMITTEE

Chair: Troy Petersen, DMD, MD

The Board receives many inquiries regarding minimal sedation requirements. When nitrous oxide/oxygen is used in combination with any additional single enteral drug, a minimal sedation permit is required. The NDSBDE recognizes that dentists who lack appropriate education and training for such procedures put patients at risk. For this reason, the Committee requires permit applicants to have predoctoral or advanced training, exposure and/or experiences in anxiety and pain control. These requirements are included for minimal and moderate sedation permit applicants. Site evaluations are required for all sedation permits. Site evaluation information can be obtained from the Executive Director. Sedation permit holders are required to have 4 CEU's related to sedation upon renewal of the sedation permit.

The Board appreciates Dr. Troy Petersen's (Grand Forks) guidance as chair of the NDSBDE Anesthesia Committee.

Anesthesia permit statistics for 7/15/2011 - 7/14/2012

Type of permit	Number of permits
General anesthesia/deep sedation (A)	26
Moderate parenteral sedation (B)	4
Moderate enteral sedation (C)	4
Minimal sedation permit (D)	3

APPLICATION REVIEW COMMITTEE

Chair: Rob Lauf, DDS

ND statute requires the dentist to report within 60 days any illegal, unethical, or errant behavior or conduct including dental malpractice judgment or settlements [See 43-28-18.1 Duty to report.]. Failure to report such incidents to the Board is grounds for disciplinary action [See 43-28-18.21] The Application Review Committee reviews applications when licensees have reported any action taken by law enforcement or other sanctioning bodies. The Committee monitors the license status and events which may influence public safety and which would therefore be of concern to the Board. Applicants who self-report may also be contacted by the Committee to ensure that efforts are being made toward compliance. Licensees who are reported to the Board by credentialing agencies or insurance corporations may also be contacted by the Committee. Although several reports were reviewed by the Board, no disciplinary actions resulted during the past calendar year.

LICENSE STATUS:

Registrations expire on December thirty-first 2012 for registered dental assistants (dentists and dental hygienists renew in odd numbered years). The Board reminds all licensees of the importance of timely completion of the renewal process. The Board is unable to make exceptions for tardy renewals and must therefore enforce statute related to the renewal process. It is the licensee's responsibility to inform the board of their current mailing address to insure notification for renewals and other Board communications [See NDCC § 43-28-23].

Licenses and registration statistics for 7/15/2011 - 7/14/2012

Licensee	In state	Total licenses	Inactive license
Dentist	372	428	38
Dental hygienist	518	733	68
Dental assistant	480	618	n/a
TOTAL OF ALL LICENSES:	1885		

CLINICAL EXAMINATIONS:

The clinical examination process administered through several different regional board testing agencies remains dynamic causing the ND Board to re-evaluate its position on the regional boards routinely. The Board remains vigilant in scrutinizing changes related to development of all regional clinical examinations. North Dakota is currently a member state in two regional examinations; the Western Regional Examining Board's organization as well as a long time member state with the Central Regional Dental Testing Service. Board members (past and present) generously dedicate much of their time to these organizations in addition to attending annual meetings and serving on various advisory and standing committees which guide the organizations. Direct involvement benefits the Board by allowing members to have first hand information on the validity and content of the examination. The Board can then determine which of these exams shall be accepted as a requirement for licensure and promulgate rules accordingly.

WEB SITE STATUS:

The Board's latest addition to its website is the Ethics and Jurisprudence Examination. Licensees may opt to take the exam online to fulfill continuing education requirements for ethics and jurisprudence. The exam was designed as an educational tool in that the test is an open book test, and the test is fail-proof; fail proof because test questions may reappear if a passing score is not achieved at the conclusion of the 90 questions. Answering 60 questions correctly automatically concludes the test. Upon successful completion of the exam, the licensee is credited for 2 hours of continuing education toward the ethics and jurisprudence CE requirement. There is no cost for taking the exam.

*Respectfully submitted,
Rita Sommers,
Executive Director*



NORTH DAKOTA STATE BOARD OF DENTAL EXAMINERS

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NEXT FORMAL MEETING OF THE NDSBDE

Thursday, January 11, 2013

8:00 AM CST

Hilton Garden Inn, Grand Forks, ND



NAME AND/OR ADDRESS CHANGE

Pursuant to the North Dakota Century Code, licensed and registered dentists, hygienists, and registered dental assistants shall notify the Executive Director of the Board within thirty days of a new address. A dentist must provide a new business address. A registered dental hygienist or a registered dental assistant is required to provide a new mailing address as well. Failure to provide this information to the Board may result in loss of registration of license or penalty. You can notify the Board using the following form. The form can be mailed to: NDSBDE, P.O. Box 7246, Bismarck, ND 58507-7246 or transmitted via facsimile to (701) 224-9824.

NAME (last, first, middle): _____

FORMER NAME (if applicable): _____

OLD ADDRESS: Street _____

City/State/Zip _____

NEW ADDRESS (if applicable): _____

City/State/Zip _____

License Number _____ Daytime Phone Number _____

Signature _____ Effective Date _____

The change of address is for my:

Home Address

Office Address

Mailing Address

Satellite Address