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PRESIDENT'S MESSAGE

"With the holidays and 2020 now in the rear-view mirror, the NDBDE wishes to thank you for kind words, support and efforts during such trying times."

Your commitment to our ND dental patients and all healthcare workers during this evolving pandemic has demonstrated dentistry's commitment to public safety. 2020 will likely be considered one of the most challenging years not only for dentistry, but many other aspects of day-to-day routines. Dental offices have once more demonstrated ability to meet the demands of optimizing public safety, even in the midst of a pandemic.

Recognizing the importance of communication between the Board and dental licensees, the NDBDE has expanded its website, to include a "COVID" page with useful information and links to important resources. We must each remain committed to keeping dental offices safe, incorporating guidance from OSHA, the CDC and the ND Department of Health. We have all learned a great deal about remaining productive and safe – even during a pandemic.

The Board has modified licensing requirements for new dental and dental hygiene graduates. Following the Governor's Executive Order, manikin-based exams were accepted for new graduate dentists while revisions of dental hygiene rules were not required. The Order waived a "live patient requirement" for dental clinical board examinations by authorizing the Board to accept results from the manikin-based regional clinical board examinations. The Board recognizes that demonstration of hands-on skills is a significant part of minimal competency testing and is presently working to amending language in the Administrative Rules authorizing the acceptance of manikin-based exams for new graduates.

The NDBDE has proposed amendments to the Administrative Rules for dentists, dental hygienists, and dental assistants as well as related to the use of sedation and anesthesia. The process for amending administrative rules is methodical, lengthy, and open to input and recommendations from outside the board itself. The best way to stay informed and involved during each such process is to periodically visit the Board's website. One and a half years at the drawing board has produced a very comprehensive rules amendment draft now under review by the office of the ND Attorney General. The most recent Admin Rules draft as presented to the ND Attorney General's office, may be found at <https://www.nddentalboard.org/laws-and-rules/activity.asp>. Subsequent to the AG's amendments and approval, the rules will then be submitted to the Legislative Council for final approval.

The Board held more meetings in the first six months of 2020 than are usually held in a three-year period! I wish to thank Dr. Mike Goebel for his five-year commitment of service to the NDBDE, sharing valuable knowledge and guidance to the board. We all wish Dr. Goebel the best in retirement after many years of pediatric dental practice. Dr. Keim and Ms. Marsh also have completed their first five-year term.

The Board of Dental Examiners wishes you each a safe and prosperous new year.

Sincerely, Greg Evanoff, DDS
President, NDBDE

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Teledentistry

Although in-person, in-office examinations are a standard procedure for a comprehensive dental examination, technology has permitted dentists to expand aspects useful in evaluation options for appropriate care in some, but not all, circumstances. The Board recognizes the advancements in telehealth through technology presently available. It is essential that care rendered through such means 1) abide by laws and rules pertaining to dentistry in North Dakota, 2) assure appropriate professional assessment of related conditions and structures to determine the suitability for an/or contraindications for care in order to 3) assure optimal public safety. In addition, record keeping, health data, and privacy rights must also be maintained in compliance with North Dakota law. The Board does not view telehealth as a means for an equivalent method of obtaining a complete and comprehensive dental examination. However, teledentistry can provide a portal between the dental team and a patient in need of urgent or immediate care through a cost effective and

(continued) >>>>>>>>>>

PROPOSED RULES

At the time of printing this publication, the rules process remains incomplete and the Board proposed rules may be adopted or certain rules may be stricken from the rule by other regulatory bodies, such as the Attorney General's office, or members of the Legislative Council's Administrative Rules Committee.

The Board adopted, revised or deleted 43 definitions affecting all professions, the majority seen in the dentists anesthesia and sedation section.

The anesthesia section of the administrative rules has been expanded dramatically. Requirements of sedation & anesthesia site evaluations have been moved to administrative rules creating a rather lengthy but important section.

In previous newsletters the Board has included a complete copy of the amendments. Due to the volume of amendments, the Board advises its readers to visit www.nddentalboard.org, find the **Laws & Regulations** tab and review the **Legislative Activity** page. Updates to the rules will be posted to the web page as they occur.

Amendments are found all five sections of Title 20 Administrative Rules; definitions, dentists, dental assisting, dental hygienists, and fees. FYI: The most recent fee change for dentists and dental hygienists occurred in 2008.

The Board appreciates licensees and entities who provided assistance in development of the amendments.

time saving triage tool enabling real time evaluation (as opposed to examination) via synchronous or asynchronous methods. It is each dentist's legal responsibility to ensure all aspects of an appropriate examination have been conducted and that all records have been reviewed prior to establishing a diagnosis and subsequent treatment. Communications must be consistent with a "face to face" appointment, including risks and benefits of treatment.

In it's role to protect the public, the NDBDE supports teledentistry derived from well documented evidence-based practice standards.

Reminder: Who is exempt from CE?

Dentists and hygienists who have their license on **INACTIVE STATUS** are exempt from providing CE to renew inactive status. Also, a licensee who has endured a severe hardship and has been, unable to fulfill the CE requirement, may be exempt. For example, a deployed member of the military or a military spouse. Because the Board accepts online webinars AND online self-study, obtaining CE is more convenient than ever!



Newly **Licensed** by **Examination** DDS, RDH, or RDA's are exempt from CE during the cycle in which they were licensed or registered. **Licensed by Credential?** **SAVE** proof of CE submitted with your initial application for License by Credential that was taken **WITHIN 24** months of renewal. Clinical CE obtained within the 24 month period **PRIOR** to renewal is accepted by the Board even if you submitted the CE as part of your initial application. The exception being CPR/BLS requirements which must be **MAINTAINED** at all times.

Dear COVID, You've Got Mail !



Dear COVID, Is teledentistry an option for my practice?

COVID comment: YES!! Telehealth is not new to dentistry. There are several ways to implement telehealth/teledentistry into your practice. Contact all patients prior to dental treatment. Telephone **screen** for symptoms consistent with COVID-19. If the patient reports symptoms of COVID-19, avoid non emergent dental care. Communicate with insurers to understand availability of teledentistry services. Telehealth is viewed as a cost-effective alternative to in-office triage or visits, however, understandably, there are limitations. Teledentistry is a very dynamic tool and has parameters for use. To date, the NDBDE has not drafted rules to regulate teledentistry, even so, various modalities have been useful in many offices without specific legislation.

Dear COVID, as dental practitioners, we want to get rid of you sooner than later and fast!!



COVID comment: Barring any hiccups in getting the word out and distribution, initial doses for Phase 1a includes the dental team. Paid and unpaid persons serving in health care settings who have the potential for direct or indirect exposure to patients or infectious materials should be vaccinated according to this tier.

Dear COVID, You got me! I tested positive. Looks like we are roommates for a while.

Answer: Sorry, but if you tested positive for COVID-19, follow the guidelines. Stay home except to get medical care of course. Separate yourself from others, so do not at work. Notify your close contacts. Nobody wants to be your roommate for now!

Dear COVID, I think I may be positive, but have not been tested.

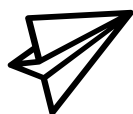
Answer: We all know the symptoms by now. But these symptoms can also be due to other illnesses. So monitor yourself, and if you have a fever or any symptoms, it doesn't mean you have COVID, but you should immediately get tested. Remain out of public places, workplaces, schools and other settings for the duration of your monitoring period. See:

https://www.health.nd.gov/sites/www/files/documents/Files/MSS/coronavirus/Factsheet_for_People_Who_are_Close_Contacts.pdf

What should I do if I become ill during the monitoring period?

Answer: Unless it is an emergency, DO NOT GO to a clinic or hospital without first calling ahead. Calling first will help the clinic or hospital prepare to greet you and take care of you in the safest possible way. If you must go to the hospital before calling, notify staff immediately that you are being monitored for COVID-19. For additional COVID-19 questions, call the NDDoH public health hotline at 1-866-207-2880, between 8 a.m.-5 p.m. Monday through Friday.

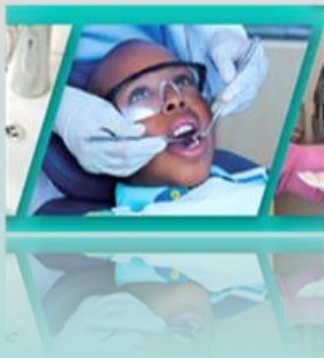
I was in close contact to a COVID-19 case, now what? It is very important for you to monitor your health daily so that you can be taken care of and treated quickly if you get sick. Based on what is known from other coronavirus infections, 14 days is the longest time between when you were last exposed to COVID-19 and when symptoms begin. Take your temperature 2 times a day: once in the morning and again in the evening. You should also check your temperature anytime you feel like you have a fever or feel feverish. Write down your temperature twice a day, every day along with any of the symptoms listed below. If you have fever (100.4°F or higher), cough, shortness of breath, or other symptoms such as loss of taste/smell, chills, sore throat, body aches, headache, diarrhea, or nausea/vomiting, you should be tested for COVID-19.



EYE ON IT

N2O: At its Sept 2020 meeting, the Board reviewed its latest version of proposed Administrative Rules amendments. The next step being a public hearing to be followed by a comment period. The Board will address the comments at a future meeting TBA.

The nitrous oxide section of the Administrative Rules was moved to a new section found under the sedation and anesthesia section. The Board also introduced rules authorizing a registered dental assistant or a registered dental hygienist properly trained to administer nitrous oxide inhalation therapy. A board approved course must be a minimum of 12 hours. Currently an RDA or RDH may monitor a patient who has been inducted by a dentist into nitrous oxide relative analgesia and may also terminate or reduce the amount of nitrous previously administered by the dentist.



Professional Development

The NDBDE requires compliance with the current CDC Guidelines.

Going into 2020, and due to COVID-19 the CDC website was changing almost daily! For dental resources: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html>

For the most up to date COVID-19 Interim Guidance regarding infection prevention and control practices.

To order books, fact sheets, pamphlets and educational materials at CDC-INFO On Demand click on the following link:

[CDC Publications on Demand](#)

Reminder: QDA and RDA renewal deadline 12/31/2020.

If you failed to renew there is still time. The grace period ends 3/01/2021.

CHANGE OF ADDRESS FORM

Submit to: NDBDE, PO Box 7246, Bismarck, ND 58507-7246 or Email to: info@nddentalboard.org

Last Name:
First Name:
Middle Initial:
Profession:
License Number:
Current Phone Number:
Current Email Address:
Current Fax Number:

Old Business Address

Street:
City:
State:
Zip Code:

Old Home Address

Street:
City:
State:
Zip Code:

New Business Address

Street (line 1):
Street (line 2):
City:
State:
Zip Code:

New Home Address

Street (line 1):
Street (line 2):
City:
State:
Zip Code:

Do you also have either a sedation or anesthesia permit? A new site evaluation may be required.

Dentist Licensees Should Maintain Awareness of Assistant Duties.

Is your dental assistant registered? The Board has received several reports of dental assistants providing duties beyond those authorized by the Administrative Rules. Each dentist is ultimately responsible for actions and care provided by the dental team. The Administrative Rules divide dental assistants into three levels of authorized procedures. Approved duties are also separated by the level of supervision each duty requires (direct supervision, indirect or general supervision). The Board has proposed new duties (yet to be enacted) for non-registered dental assistants as well as for registered dental assistants. The Board recommends that non-registered dental assistants who have direct patient contact maintain current CPR certification.

A Qualified Dental Assistant (QDA) must be registered with the Board by submitting the appropriate application, evidence of on-the-job training in addition to providing test results from the Dental Assisting National Board (DANB). The QDA must maintain current CPR and renew the registration by December 31st of even numbered years. A QDA must also complete at least 16 hours of continuing education every two years, related to the clinical practice of dentistry. Once registered, the QDA may take radiographs in addition to the other basic dental assisting duties identified in the Administrative Rules.

A Registered Dental Assistant (RDA) must likewise be registered with the Board by submitting evidence of either on-the-job training and DANB certification or completing a dental assisting educational program approved by the Board. The RDA must maintain CPR and renew the registration by December 31st of even numbered years. A RDA must also complete at least 16 hours of continuing education every two years related to the clinical practice of dentistry. Once registered, the RDA may provide a list of duties which are organized by the level of supervision required for the duty being performed.

RDA/RDH Supervision and Duties Chart can be found on this page:

<https://www.nddentalboard.org/practitioners/Assistant/index.asp>

WORTH REPEATING

The North Dakota Board of Dental Examiners issues one renewal reminder via USPS and one reminder by way of email. The Board will use email to communicate renewal reminders and important changes in statute, regulations and policies related to dentistry. Failure to provide a working email address will prevent you from receiving these important updates. If you are unable to receive email to communicate with the Board, please notify the Board.

**IT IS UP TO YOU
TO STAY
INFORMED** 

NDBDE meetings, dates, time and venue for all public meeting notices of the Board may be found at:

<https://apps.nd.gov/sos/ndpmn/mainmenu.htm>

or

<https://www.nddentalboard.org/about/meetings/agendas.asp>

The Board issued several letters of concern in 2020 but did not conclude any Settlement Agreements in 2020.

Complaints 2020

All complaints are initially reviewed to determine whether laws or rules have been potentially violated. Violations of the laws in 2020 encompassed a wide variety of allegations and issues mostly related to lack of communication between doctor/patient, and practicing outside the scope of practice. The Board also receives many complaints

regarding dental auxiliary wishing to remain anonymous who are being asked to provide dental office duties which they are not legally allowed to provide. Complaints are sometimes submitted to the Board by other licensees via emails to the Board. Complaints should be submitted on forms which can be found under the Consumer tab on the Board's website. Anonymous complaints in the workplace are difficult to investigate and very challenging. There is still a course of action which the Board can take, however, the investigation process may be obstructed and the Board may be unable to corroborate claims. The Board may move to investigate an anonymous complaint and can investigate to the extent possible given the information received. However, the issue is usually--- not enough information is received.

