MISSISSIPPI STATE BOARD OF DENTAL EXAMINERS

Suite C, 580 Springridge Road
Post Office Box 1960
Clinton, Mississippi 39060-1960

Telephone: 601-924-9622
Facsimile: 601-924-9623

DENTAL DIGEST

Volume 2 | DECEMBER 1995 | Number 2

The Mississippi State Board of Dental Examiners is a legislatively-mandated state regulatory agency charged with the responsibilities of examining, licensing, registering, and regulating the practices of dentistry and dental hygiene to ensure competency (through examination and licensure) and ethics (through registration and regulation) among all dental professionals in the State of Mississippi for the ultimate goal of safeguarding and enhancing the health and welfare of the citizens of this State. As such, the Mississippi State Board of Dental Examiners is neither affiliated with nor functions as a subsidiary of any private or professional organization.

DIRECT FROM THE DIRECTOR

Welcome to the December 1995 edition of the Dental Digest. Currently, the Mississippi State Board of Dental Examiners ("the MSBDE") publishes the Dental Digest semi-annually; however, beginning 1996 the Board hopes to increase its newsletter publication to a minimum of three (3) times each year. The MSBDE realizes the importance of informing all licensees of the myriad of changes taking place in the dental profession. Furthermore, the MSBDE strongly encourages contributions of interesting and noteworthy articles from its licensees. If you have information which you feel may be beneficial to other professionals, please contact the MSBDE's offices.

Since publication of the December 1994 newsletter, the MSBDE has received many compliments on the format and content of its publication, and I would like to take this opportunity to express the MSBDE's sincere appreciation for these comments.

It has been an extremely busy period for the MSBDE since the last Dental Digest. Also, one of the MSBDE's long-time employees has retired. Martha Crumby was with the MSBDE for fourteen (14) outstanding years--through the good times and through the bad times. Martha's most recent position with the Board was as its Administrative Assistant II, and she will be sorely missed. The Board extends its most heartfelt thanks for Martha's countless hours of devoted service to the Board, and her shoes will be extremely difficult to fill. As one Board member put it, Martha's retirement from the Board can be compared to "your computer's hard disk crashing"! Martha, farewell and "thanks for the memories."

Needless to say, this edition of the Dental Digest is jam-packed with pertinent information for all dental professionals in our State. Enjoy! □

MSBDE BOARD MEMBERS

Theodore C. Jones, D.D.S., President
Member-at-Large, Ridgeland

William T. O'Brien, III, D.D.S., Secretary
District Six, Natchez

Lewis E. Alexander, D.D.S.
District Five, Long Beach

James A. Bounds, D.M.D.
District Three, Laurel

Catherine L. Gatewood, R.D.H.
Dental Hygiene Member, Clinton

Thomas L. Jones, Jr., D.D.S.
District Four, Clinton

Fred A. Murphree, D.D.S.
District One, Tupelo

Andrew R. Townes, D.D.S.
District Two, Grenada

MSBDE STAFF

Leah Diane Howell, Executive Director
Vacant, Administrative Assistant II
Vacant, Secretary Executive
Vacant, Accounting/Auditing Technician

MSBDE ADDS NEW PROCEDURES TO THE CLINICAL LICENSURE EXAM

Beginning with the examination for licensure in June 1996, candidates will be required to demonstrate proficiency in endodontic access preparations. The candidate will prepare an endodontic access on an extracted maxillary incisor and a mandibular molar.

The access preparations will be graded on outline form, unroofing the pulp chamber, straight line access to all orifices, and removal of pulpal remnants. A mandatory zero will be given for perforation of any part of the tooth, inability to locate canals, or failure to complete the procedure in the allotted test time.

Another clinical requirement that has been changed is that the pin amalgam procedure has been deleted. In substitution, the candidate will be required to restore a molar with amalgam, with a minimum of three surfaces.

--William T. O'Brien, III, D.D.S. ☐

CHANGES IN THE DENTAL HYGIENE BOARD

In an effort to increase efficiency and accommodate the growing number of dental hygienists taking the Mississippi licensure examination, some basic changes have been made. For instance, the dental hygiene examination will be given in one day. The jurisprudence portion of the examination will begin at 7:30 a.m., Monday, June 10, 1996, and a brief, but thorough, orientation will follow. Afterwards, the hygiene candidates will report to their assigned units at a designated time.

Dental hygiene candidates will be permitted to use ultrasonic scalers. However, each candidate must be responsible for providing his/her machine and proper adaptor for an A-Dec Unit. Candidates also will be required to ensure a duplicate FMX is available for the patient. No radiographs submitted to the MSBDE will be returned to candidates or patients.

The MSBDE will be distributing the instructions and criteria for the examination somewhat earlier than it has in previous years. The MSBDE feels this will help candidates to be better prepared and also will allow more time for patient selection. These changes have been instituted to help candidates have a smoother examination and allow the MSBDE to more expediently process the results, as the MSBDE anticipates approximately 60-65 dental hygiene candidates for the 1996 examination. The MSBDE plans to have a very smooth, successful examination and welcomes many new dental hygienists to practice in the State of Mississippi.

--Catherine L. Gatewood, R.D.H. ☐

! Any dentist holding a Mississippi license, provisional or otherwise, who is on staff either part-time or full-time at the Dental School or any hygiene schools in Mississippi and who has patient contact in the clinics must be current in continuing education and cardiopulmonary resuscitation.

ANNUAL REGISTRATION: •TO DO OR NOT TO DO, THAT IS THE QUESTION•

The annual renewal process for 1995-1996 was handled somewhat differently this year, compared to the manner in which this process was handled in prior years. The MSBDE purchased new database management software far superior to the software it had used for the past several years. The new software enables the MSBDE to further automate and streamline the annual renewal process through, for instance, providing pre-printed renewal forms for licensees. By doing so, only CHANGES to a licensee's information had to be typed on the profile sheet and returned to the MSBDE.

During this past renewal period, the MSBDE noted various "DOs and DON'Ts" that it felt should be shared with its licensees as an aid in timely completing renewal forms for the 1996-1997 renewal period. The following is a thumbnail sketch of a few problems the staff encountered along the sometime "long and winding road" to completion of annual registration.

DO remember that if you are an unmarried female licensee, your maiden name is the last name with which you were born. For example, Mary Jane Smith has never been married; thus, her maiden name is "Smith."

DO NOT cut off the bottom portion of your profile sheet. Remember that the entire, fully completed, original profile sheet must be returned to the MSBDE office with the applicable annual renewal fee.

DO NOT retype all information provided on the profile sheet. **DO** type only changed or additional information.

DO remember that the permit or license issue name is the name under which your license/permit originally was issued; consequently, this name does not change each time you remarry.

DO NOT complete the section "FOR BOARD USE ONLY." This section of your profile sheet will be completed by the MSBDE staff who will note pertinent information as to when your renewal actually was received, the renewal (plus penalties) paid, the check or money order number, and the date the certification card was mailed.

DO sign and date all profile sheets. Dental assistants and dental hygienists must sign their individual profile sheets; the employing dentist does not sign these sheets for them.

DO remember that dentists and dental hygienists must indicate the number of months they practiced in Mississippi during the previous 12-month period. This does not mean that a licensee should list the total number of months that individual has practiced since being granted a Mississippi

license (e.g., no number over twelve (12) should be noted.)

DO NOT fail to immediately contact the MSBDE's office if you do not receive a profile sheet for annual license/permit renewal by either the second week of July (for dentists and dental hygienists) or the second week of October (for dental assistants). You may have moved and failed to notify the MSBDE of a change of address. All annual registration notices are sent first-class mail, and the MSBDE cannot be held responsible for the untimely or non-delivery of mail by the United States Postal Service. The MSBDE has mailed these annual renewal notices at the same time of the year for many years; therefore, please note these very important dates on your calendars.

DO remember that failure to receive a profile sheet may not be used as a reason for not paying the required late registration penalty. The MSBDE maintains a printout of all licensees mailed annual renewal notices and verifies each name on the list as that individual's profile sheet is placed in an envelope marked "URGENT--ANNUAL REGISTRATION ENCLOSED" and taken to the main branch of the United States Post Office in Jackson, Mississippi.

DO remember to very carefully read all instructions and note the correct fees to remit to the MSBDE. The total amount due the MSBDE is provided for you on your profile sheet. □

• TAKE NOTE •

- All dental facilities operating or advertising under fictitious names, as defined in Board Regulation 43, Section II, have up to one year from the date of the initial adoption of Board Regulation 43, April 21, 1995, to register these fictitious names with the MSBDE. Even dentists whose facilities have been listed under fictitious names for years have to register these fictitious names with the Board in accordance with the stipulations of Board Regulation 43, Section II.

- Dentists successfully completing Advanced Cardiac Life Support (ACLS) may count these course hours toward meeting continuing education and cardiopulmonary resuscitation requirements.

- Dentists completing the requirements for a specialty (e.g., graduating from specialty schools) must mail fully completed specialty license applications a minimum of sixty (60) days prior to the date the licensees wish to begin announcing as specialists. Please remember that Board approval of a specialty application must be achieved prior to a licensee holding himself/herself out as a specialist.

- As for dentists wishing to announce as specialists, any licensee who wishes to administer general anesthesia or intravenous sedation must first be granted a permit by the MSBDE to do so. Consequently, fully completed applications for these permits must be mailed a minimum of sixty (60) days prior to the date the licensee wishes to begin utilizing general anesthesia or intravenous sedation. Further, the licensee may not begin utilizing either type of sedation unless that licensee has been granted the requisite permit from the MSBDE. Also, successfully passing a site visit is a prerequisite to final approval of any general anesthesia or intravenous sedation permit.

- Remember that dentists and dental hygienists must maintain a record of all continuing education courses taken, consisting of the date, location, number of hours, and certificates of course completion or correspondence from course sponsors verifying attendance. Handwritten notes, pre-registration materials, handwritten or typed cards signed only by the licensee, badges, brochures, etc., ARE NOT ACCEPTABLE as proof of compliance with Board Regulation 41. Yearly compliance audits began this year and will be accomplished each year hereafter for the immediately preceding two-year continuing education reporting period. Furthermore, continuing education records must be maintained a minimum of three (3) years from the date of course attendance. Finally, a licensee must at all times be current in Cardiopulmonary Resuscitation (CPR), and should maintain copies of outdated CPR cards for a minimum of three (3) years.

- It is permissible to telephone the MSBDE to advise of a change of address; however, all telephone calls must be followed by a written communication, either via mail or facsimile, verifying the change of address. This ensures the accuracy of the information imparted to the MSBDE.

- Dentists who advertise using the phrases "family dentistry" or "general dentistry" may not use these phrases together in the same advertisement. For example, an advertisement MAY NOT state that a dentist practices "general and family dentistry." However, an advertisement MAY state that a dentist practices "family dentistry" or that the dentist practices "general dentistry." The MSBDE considers use of the phrase "family and general dentistry" in the same advertisement to be false and misleading and also in violation of Board Regulation 43. □

DIVERSION BY HEALTH PROFESSIONALS

The traditional social consciousness of the dental profession is manifest in the "Dentists Awareness Program," part of the Colorado Prescription Drug Abuse Task Force. The Task Force, which includes dentists throughout Colorado, faculty at the

University of Colorado School of Dentistry, and the Concerned Colorado Dentists Committee (a peer-helping-peer-dentist volunteer group) has developed the Dentists Awareness Program.

The Dentists Awareness Program of the Colorado Prescription Drug Abuse Task Force presents simple steps that every dentist can easily implement without increased costs of service to the patients. Dentists motivated to participate in this straightforward program gain satisfaction from knowing that the availability of prescription drugs on the street will be diminished and that once again dentistry is in the forefront of social action.

! Specialists who limit their practices to the specialty may perform only those services defined by that particular specialty and cannot perform any services that may be considered "general dentistry." Also, remember to first obtain a specialty license from the MSBDE prior to advertising as a specialist.

THE FOUR D's

Diversion of drugs from dentistry is best understood in terms of the Four D's typology. This set of designations is a central part of the Colorado Prescription Drug Abuse Task Force's presentation.

Dated Dentists: The "dated dentist" is the busiest practitioner in town. So busy, in fact, that they are unable to keep abreast of the new non-steroidal anti-inflammatory drugs (NSAIDS). They are unaware of the potential for drug diversion and will prescribe for a patient telephoning with a complaint of pain on a Sunday afternoon.

Duped Dentists: Many dentists have been duped into providing drugs for illicit purposes at one time or another. They may have had a funny feeling about the individual. Some scam artists may be addicts, others just out to make a good living by diverting drugs from dentists, selling them for exorbitant prices to addicts who clamor for "clean" drugs of known potency (e.g. Vicodin = $10/tab, Denver street price).

Disabled Dentists: These dentists have their judgement impaired by their own use of pharmaceuticals and/or alcohol. They are unable to properly judge the impact of their actions, as they affect their patients or themselves. Pharmaceuticals kept on-hand for office dispensing, patients' returned prescriptions, and most seriously, fraudulent prescriptions for fictitious patients are all methods of obtaining drugs for personal consumption.

Dishonest Dentists: This is, happily, the smallest of the four D's group. Occasionally narcotics officers find a dentist diverting drugs for the sole purpose of sale to the highest bidder on the street. A small percentage of disabled dentists turns to selling prescription drugs to support their habits.

DIVERSION OF DRUGS: HOW IT HAPPENS

Drug scams in dentistry are largely related to specific diagnoses and can be difficult to detect. When a patient, usually on an emergency, presents a cracked tooth, an open root canal treatment, the complaint of throbbing tooth pain, or temporomandibular cranio-facial pain, it is possible that the dentist is being set up for a scam.

There are certain "give-aways" that the wary dentist should be attuned to. Scams usually happen late in the day, when the dentist wants to go home and relax. A dentist may not want to open and drain a hot tooth 15 minutes before closing time for a patient he has never met before. It is so much easier to mediate it with some antibiotics and analgesics and treat it in the morning. When appointment time comes without the patient showing up, then the dentist may recall that the patient knew exactly what medicine to request, or was allergic to all NSAIDS, leaving little choice for phone prescribing other than something like Vicodin, which is the number one scammed drug from dentists in Colorado.

Scams come in all shapes and sizes, so it is important to stick to the proper protocols of prescribing. Scammers count on the dentist not knowing about the potential for scams. If a patient is just passing through, the dentist should find out where they are going, and call ahead to see if there is, in fact, such a dentist at that destination. The dentist should be suspicious of individuals who are allergic to everything but the drug they mention to use as the one that works. Another give-away is an extraordinarily developed technical vocabulary about the diagnosis and the best way to treat the condition. Scammers are incredibly knowledgeable about their conditions.

Fabricated injury is something else to consider. Though more prevalent in medical scams, artificially controlled injuries occur quite often in dentistry too. Certain patients will have "never ending root canal treatment," showing up for instrumentation appointments and then disappearing or prolonging the treatment with complaints of severe intra-operative treatment pain. Consider how may tablets of narcotic analgesics a scammer can get from one tooth! An excellent way to obstruct Scammers is to discuss them at local professional meetings. It is especially effective if information moves between the pharmacy society and the dental society. Once the modus operandi is known, the game is over.

For more information on the "Dentists Awareness Program," contact the author at (719) 544-6787. This article has been reprinted with the permission of Robert M. Saunders, D.M.D., CAC II.

--Dentists and Diversion
By Robert M. Saunders, D.M.D., CAC II
Elector and Trainer
Colorado Prescription Drug Abuse Task Force. □

NOTEWORTHY DATES

As the Mississippi State Board of Dental Examiners is a legislatively-mandated regulatory agency, its meetings are open to the public. However, due to the confidential and/or sensitive nature of certain aspects of the

Board's business, the Board may vote to go into "Closed Session." **Also, no items will be added to the agenda of any Board meeting as of one week prior to the date of that meeting.** Currently, meetings are held at the Courtyard by Marriott in Jackson, Mississippi; however, please call the Board's office (601-924-9622) prior to any meeting to verify the correct date, time, and location. The following dates, including agenda cut-off dates, have been set aside through June 1996 for Board meetings:

Friday, February 9, 1996 (February 2, 1996 Cut-Off)
Friday, March 8, 1996 (March 1, 1996 Cut-Off)
Friday, April 12, 1996 (April 5, 1996 Cut-Off)
Monday, June 10 through Friday, June 14, 1996
(June 3, 1996 Cut-Off)

Dr. Willie Hill with the University of Mississippi School of Dentistry will present a Board-approved general anesthesia review course. **This course is recommended for those Mississippi dental licensees who currently hold General Anesthesia or IV Sedation permits as a means for ensuring adherence to renewal guidelines in Board Regulation 29.** The course costs $150.00 and has been approved for 8 hours of CDE. Pertinent information follows:

! Any dentist, dental hygienist, or dental assistant who does not promptly notify the MSBDE of a change of address may be assessed a $10.00 penalty.

March 30, 1996
UMC School of Dentistry, Jackson, Mississippi

For additional information and/or registration, please contact
Ms. Ann Hall with the University of Mississippi
Office of Continuing Education at 601-984-1300.

For those dental assistants who wish to obtain radiology permits, the following dates in 1996 have been set aside by Hinds Community College, Louisiana State University, and the University of Tennessee for radiology seminars:

Hinds Community College--Jackson, MS

January 12-13, 1996
April 26-27, 1996
July 19-20, 1996
October 4-5, 1996

You should register a minimum of two (2) weeks prior to each seminar. For additional information, please contact
Ms. Becky Davidson, Hinds Community College,
Nursing/Allied Health Center, at 601-371-3522.

Louisiana State University--Baton Rouge, LA

January 20, 1996
March 9, 1996
April 27, 1996
June 8, 1996
August 17, 1996

For additional information, please contact
the Continuing Education Department at
Louisiana State University,
504-948-8584, or toll free in Louisiana
at 800-223-1569, extension 8584.

University of Tennessee--Memphis, TN

July 19-20, 1996

For additional information, you may contact
Mr. Mike Spikes at 901-448-5386. ☐

THE "NEVERENDING ROOT CANAL" SCAM

The crook approaches a dentist with an open root canal, which he claims another dentist started but could not, for some reason, finish. The crook arranges for the new dentist to operate and requests an anesthetic. The crook then complains that the anesthetic has made him ill (stomach cramps, etc.) and that he cannot continue with the procedure at that time.

Another appointment is scheduled, at which time the crook asks the dentist to prescribe "something for the pain" to hold him over until the appointment. The crook will then cancel the appointment and try to re-schedule, with an accompanying prescription to last him until the next appointment. He then will fail to show up for the second appointment, and can take his "problem" and his scam to another unsuspecting dentist.

SOLUTIONS FOR THE "NEVERENDING ROOT CANAL" SCAM

1. If absolutely necessary to prescribe something, utilize the minimum strength and dosage which will achieve the desired results; be suspicious of a patient who "has to have" a particular medication, or who seems too knowledgeable about what medications work for him and which ones do not.

2. Obtain complete identification information on all new patients and record that information.

3. Attempt to contact the patient's previous dentist, the one who started the root canal operation but did not finish it, and try to learn why the procedure was not completed initially.

--Submitted by Detective John Gray, Denver Police Department
reprinted from Drug Diversion Scenarios and Scams, 1992 ☐

WHY DO WE DO WHAT WE DO

Many questions and comments have been received by the MSBDE's office regarding a few functions which were handled differently this past year. First, the annual ballots soliciting nominations for MSBDE membership were copied on color-coded paper for each dental district. As part of this balloting process, the MSBDE's office determined it necessary to employ an internal control mechanism to ensure that no licensee voted more than once. Therefore, small numbers in red ink were placed on the back of each ballot. Prior to printing envelopes for the mailout, a temporary office worker hired from a local temporary service sorted the dental database in a random, scrambled manner. Afterwards, envelopes were printed on a laser printer, turned face down on the counter, and subsequently stuffed with the ballots. Furthermore, the ballots which had been numbered were scrambled prior to placement in the mailing envelopes. The MSBDE office staff underwent these scrupulous, extraordinary precautions to ensure that no one would have any means of determining how an individual licensee voted for MSBDE membership nominations. Furthermore, during the 1996 balloting process a different internal control approach will be utilized to ensure the integrity of the balloting process. However, licensees may rest assured that all necessary and appropriate methods are employed at all times to ensure the confidentiality of the annual balloting process.

Second, as part of the 1995-1996 annual renewal process, the MSBDE office required all changes in names, addresses, telephone numbers, etc., to be TYPED on the renewal form. Many licensees have contacted the MSBDE office inquiring as to why information must be typed and what to do if no typewriter was available. The MSBDE's office, when fully staffed, is composed only of four (4) full-time, permanent positions. Furthermore, the annual renewal process encompasses thousands of renewal forms and is in addition to the normal, day-to-day workload the MSBDE's staff must handle. Handwriting that is legible to one individual in many instances is not legible to another. In years past, the MSBDE's office has received handwritten renewal cards so terribly written, that the staff took a good part of the day trying to determine what the licensee intended to write on the renewal card. Thus, the MSBDE's Director felt it necessary to require typewritten changes on renewal forms to ensure the accuracy of the information the staff received and entered into the various databases.

If a licensee does not have a typewriter, a computer may be used. Also, most every office has access to either a typewriter or a computer. Please remember, too, that the MSBDE simplified the annual renewal process this year by pre-printing licensee information on each annual renewal "profile sheet." Consequently, licensees only had to type CHANGES and not re-type the entire form or complete the entire form in handwriting, as has been required in the past. Thus, the MSBDE has streamlined the annual process not only for its benefit but also for the individual licensee. Remember that the MSBDE staff must process approximately **4,000 profiles** during the July 1 through November 30 time period. Remember, too, that there is a "method to our madness," and that the MSBDE office continuously strives to enhance and to automate its various State-mandated regulatory responsibilities. □

! Theodore C. Jones, D.D.S., President of the MSBDE, was recently inducted into the Tougaloo College Hall of Fame for Medicine. Congratulations Dr. Jones on such an outstanding achievement!!!!

DENTAL OFFICE PROVIDES PRECEPTORSHIP FOR CDA IN MISSISSIPPI

The Dental Assisting National Board (DANB) is a national, independent, not-for-profit, credentialing agency established in 1948 for the express purpose of discerning competency in dental assisting. DANB is recognized as the certifying and testing agency for dental assistants by the American Dental Association.

DANB offers several pathways for anyone working in the dental office to become a CDA in General Chairside Assisting, as well as specialty programs for the Certified Orthodontic Assistant (COA), Certified Oral and Maxillofacial Surgery Assistant (COMSA), and Certified Dental Practice Management Assistant (CDPMA). As of August 31, 1995, there were registered 28,080 CDAs, 1,002 COAs, 89 COMSAs, and 365 CDPMAs for a total of **29,836 certified assistants**; 195 certificants were from Mississippi.

The CDA examination consists of three components: (1) Infection Control (ICE); (2) Dental Radiation Health and Safety (RHS); and (3) General Chairside (GC). In order to provide a "career ladder" opportunity, on-the-job trained assistants can take the first two components at any time, and the GC component after gaining two years of dental assisting experience. The experience can be likened to a "PRECEPTORSHIP" in your office. (Graduates of ADA-accredited dental assisting programs are eligible to take the complete CDA examination.) Proof of high school graduation (or equivalent) and current CPR certification are required before a DANB credential may be earned. Certification must be renewed annually by earning 12 DANB-approved continuing education credits.

The ICE and RHS examinations also may be taken separately, with no education or experience prerequisites. Twenty-two states require or accept the RHS examination or CDA credential for regulatory compliance. The Mississippi State Board of Dental Examiners accepts the RHS component as qualification for the required Mississippi Radiology Permit. Since June 1991, 9,816 RHS exams were administered nationwide, 95 in Mississippi. The average 1994-95 national RHS pass rate was 80.1%.

DANB began administering the ICE in June 1991 because of the escalating importance of infection control in the dental office. It has become a successful means for dental assistants to confirm knowledge of OSHA requirements and CDC and ADA guidelines on infection control. ICE also is a component that must be passed to earn COA and COMSA credentials. Currently,

4,295 ICE examinations have been administered nationwide, and 76 Mississippi dental assistants have passed the ICE exam since its inception. The average 1994-95 national ICE passing rate was 78.7%.

I would like to see each dentist in Mississippi support and encourage all members of their dental team to work toward certification, and take advantage of the opportunity to become a preceptor for a CDA-to be. The entire CDA exam costs $70.00; each component can be taken for $25.00. In addition to testing sites for the four-times yearly paper and pencil administrations in Mississippi, a computerized version of the CDA exam and its components are available on demand at over 200 sites nationwide.

! The Mississippi State Board of Dental Examiners vehemently opposes the legalization of "Denturism" in the State of Mississippi. It feels the public's best interest can only be served by the use of scientifically trained, licensed dentists to diagnose, prescribe construction, and insert dentures and other restorative appliances. It further feels that to do otherwise would misguide the public to its detriment. (Adopted by the MSBDE, November 3, 1995 and officially recorded in its Minutes.)

For additional information and applications, please contact:

Richard D Hengl, Executive Director
Dental Assisting National Board, Inc.
216 East Ontario Street
Chicago, IL 60611
312-642-3368 or 1-800-FOR-DANB

--By Arlene Shelby, CDA
Instructor, Dental Assisting Technology
Hinds Community College

REGULATION HIGHLIGHT

As part of its legislatively-mandated regulatory responsibilities, the MSBDE must enforce the laws of this State and enact any regulations necessary to ensure the consistent and ethical compliance with these laws. Accordingly, when deemed appropriate and as a means of establishing uniform policies for all dental professionals in Mississippi, the MSBDE enacts and/or amends regulations. Whenever a regulation is enacted or amended, it must be filed immediately with the Mississippi Secretary of State and is not considered approved until thirty (30) days after filing. At this time, a "final filing" must be effected with the Mississippi Secretary of State, and the adopted or amended regulation becomes final thirty (30) days after the filing date.

As a regular feature of the Dental Digest, the MSBDE from time-to-time highlights certain regulations that have been amended/enacted. Accordingly, Board Regulations 13-A, 29, 37, 41, 45, and 47 have been reprinted in this edition of the Dental Digest. Please carefully review each Regulation, note the changes, and place them with your other Board regulations.

BOARD REGULATION #13-A

Purpose: To establish procedures for subgingival treatment with antibiotic impregnated fiber or like material.

Pursuant to the provisions in § 73-9-3, ¶ 9, § 73-9-5, and § 73-9-13, Miss. Code Ann.:

The Mississippi State Board of Dental Examiners has determined that the subgingival treatment with any antibiotic impregnated fiber or like material is restricted to a licensed dentist.

Regulation Thirteen-A adopted by the Mississippi State Board of Dental Examiners 3 November 1995.

BOARD REGULATION #29

I. Definitions
   A. LOCAL ANESTHESIA. The elimination of sensations, especially pain in one part of the body, by topical application or regional injection of a drug.
   B. GENERAL ANESTHESIA. A controlled state of unconsciousness, accompanied by a partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command, produced by a pharmacologic method.
   C. INTRAVENOUS OR PARENTERAL CONSCIOUS SEDATION. A depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command, produced by a pharmacologic method.

II. Any person licensed to practice dentistry in the State of Mississippi shall be authorized to use anesthesia in accordance with the provisions of this section.

III. LOCAL ANESTHESIA. All licensed dentists are authorized to use local anesthesia.

IV. GENERAL ANESTHESIA. No dentist shall use general anesthesia in his office on an out-patient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board.
   A. In order to receive such permit, the dentist must apply on a prescribed application form to the Board, submit specified application fee, and produce evidence showing that he or she:
      1. Has completed a minimum of one year of advanced training in anesthesiology and related academic subjects (or its equivalent) beyond the undergraduate dental school level in a training program as described in Part II of the American Dental Association's "Guide-

lines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry;" or

2. Is a diplomat of the American Board of Oral and Maxillofacial Surgery, or is eligible for examination by the American Board of Oral and Maxillofacial Surgery, or is a member of the American Association of Oral and Maxillofacial Surgeons; or
3. Employs or works in conjunction with a qualified anesthesiologist or certified nurse anesthetist who is a member of the anesthesiology staff in an accredited hospital, provided that such anesthesiologist or nurse anesthetist must remain on the premises of the dental facility until any patient given a general anesthetic regains consciousness and is discharged; and
4. Has a properly equipped facility for the administration of general anesthesia staffed with a supervised team of auxiliary personnel capable of reasonably assisting the dentist with procedures, problems and emergencies incident thereto. Adequacy of the facility and competence of the anesthesia team shall be determined by the Board as outlined below.
5. Holds an Advanced Cardiac Life Support (ACLS) certificate. Those holding a general anesthesia permit at the time of the enactment of this regulation must be ACLS certified beginning with the 1994 registration.

B. Facilities

1. The Board adopts the standards regarding the equipment within a facility as set forth by the American Association of Oral and Maxillofacial Surgeons in the Office Anesthesia Evaluation Manual, latest edition, as the standards by which each dentist administering general or IV anesthesia must meet. Certification of offices by the American Association of Oral and Maxillofacial Surgeons as meeting the standards adopted constitutes a *prima facie* showing that the dentist meets the standards.
2. In addition to complying with the standards adopted in subsection 1 of this section, the dentist shall be required to show that the facility is staffed with a team of personnel capable of handling procedures, problems and emergencies incident to the administration of general anesthesia.
3. Copies of the Office Anesthesia Evaluation Manual are available from the American Association of Oral and Maxillofacial Surgeons (AAOMS), Post Office Box 3501, Libertyville, Illinois 60198.
4. Any dentist administering general or IV anesthesia at a facility other than his own office or facility must insure that the proper equipment and personnel as required in subsections one (1) and two (2) of this section are present.

C. Prior to the issuance of such permit the Board shall conduct an on-site inspection of the facility, equipment and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board and the cost thereof shall be included in the general anesthesia permit fee. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.

D. Renewal

1. Any dentist holding a permit of authorization issued by the Board shall be subject to review and such permit must be renewed annually.
2. The Board shall, in accordance with its laws and rules and regulations, together with appropriate and required information and renewal fee, renew the general anesthesia permit annually unless the holder is informed in writing that a reevaluation of his credentials and/or facilities is to be required. In determining whether such reevaluation is necessary, the Board shall consider such factors as it deems pertinent including, but not limited to, patient complaints and reports of adverse occurrences.

E. Advanced Cardiac Life Support and CPR

Any dentist using general anesthesia shall be ACLS certified and his auxiliary personnel must meet the requirements set forth in Board Regulation 45.

V. INTRAVENOUS OR PARENTERAL SEDATION

The issuance of a permit for general anesthesia shall include the privileges of administering intravenous or parenteral sedation in accordance with the provisions of this section.

A. No dentist shall use intravenous or parenteral sedation on an outpatient basis for dental patients unless such dentist possesses a permit of authorization issued by the Board.

B. Each dentist who is licensed to practice dentistry in the state who desires to use intravenous or parenteral sedation must apply on a prescribed

form to the Board and submit specified application fee.

C. A dentist may employ or use intravenous or parenteral sedation on an outpatient basis for dental patients provided he:

1. Has received formal training in the use of intravenous or parenteral sedation; and
2. Is certified by the institution where the training was received to be competent in the administration of intravenous or parenteral sedation. Such certification shall specify the type, the number of hours and the length of training; the minimum number of didactic hours shall be forty (40); the minimum number of patient contact hours shall be twenty (20); the preceding is necessary for recognition of the formal training program. This formal training program shall be sponsored by or affiliated with a university, teaching hospital or other facility approved by the Board or part of the undergraduate curriculum of an accredited dental school; and
3. Is competent to handle all emergencies relating to intravenous or parenteral sedation.
4. Holds an Advanced Cardiac Life Support (ACLS) certificate. Those holding an intravenous or parenteral sedation permit at the time of the enactment of this regulation must be ACLS certified beginning with the 1994 registration.

D. Facilities

A dentist utilizing intravenous or parenteral sedation shall do so in a properly equipped facility for the administration of intravenous or parenteral sedation, staffed with supervised auxiliary personnel, capable of reasonably handling procedures, problem, and emergencies incident thereto.

1. The Board adopts the standards regarding the equipment within a facility as set forth by the American Association of Oral and Maxillofacial Surgeons in the Office Anesthesia Evaluation Manual, latest edition, as the standards by which each dentist administering general or IV anesthesia must meet. Certification of offices by the American Association of Oral and Maxillofacial Surgeons as meeting the standards adopted constitutes a *prima facie* showing that the dentist meets the standards.

E. Prior to the issuance of such permit the Board, at it discretion, shall conduct an on-site inspection of the facility, equipment and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.

F. Advanced Cardiac Life Support and CPR

Any dentist utilizing intravenous or parenteral sedation shall be ACLS certified and his auxiliary personnel must meet the requirements set forth in Board Regulation 45.

G. Dentists qualified to administer intravenous or parenteral sedation may administer Nitrous-Oxide inhalation conscious sedation.

H. Renewal

The Board shall, in accordance with its laws and rules and regulations, together with appropriate and required information and renewal fee, renew the intravenous permit annually unless the holder is informed in writing that a reevaluation of his credentials and/or facilities is to be required. In determining whether such reevaluation is necessary, the Board shall consider such factors as it deems pertinent including, but not limited to, patient complaints and reports of adverse occurrences.

VI. NITROUS-OXIDE INHALATION CONSCIOUS SEDATION

A. A dentist may employ or use Nitrous-Oxide inhalation conscious sedation on an outpatient basis for dental patients provided he:

1. Has completed no less than a two-day course of training as described in the American Dental Association's "Guidelines for Teaching and Comprehensive Control of Pain and Anxiety in Dentistry" or its equivalent; or
2. Has training equivalent to that described above while a student in an undergraduate dental school program; and
3. Has adequate equipment with fail-safe features and a 25% minimum oxygen flow.

B. Cardiopulmonary Resuscitation

A dentist utilizing nitrous-oxide inhalation conscious sedation and his auxiliary personnel must meet the requirements set forth in Board Regulation 45.

VII. PENALTY

Violations of any provisions of this act shall subject the dentist to disciplinary action after a hearing as provided by the Mississippi Laws Pertaining to the Practice of Dentistry.

Regulation Twenty-Nine amended by the Mississippi State Board of Dental Examiners 8 December, 1995.

BOARD REGULATION #37
Fee Schedule

Pursuant to the provisions in Miss. Code Ann. § 73-9-43, the Secretary shall collect in advance all fees as provided for in this Regulation and as currently established by the Board:

Application for dental license	$300.00
Application for a dental license throughcredentials	$2,000.00
Application for specialty certificate	$200.00
Application for dental hygienist license	$150.00
Application for a dental hygiene license through credentials	$1,000.00
Application for institutional, teaching, or provisional license	$25.00
Application for general anesthesia permit	$200.00
Application for I.V. sedation permit	$200.00
Application for radiology permit	$40.00
Annual dentist registration	$100.00
Annual specialty registration	$50.00
Annual dental hygienist registration	$50.00
Annual institutional, teaching, or provisional registration	$100.00
Annual general anesthesia/sedation permit registration	$50.00
Annual radiology permit registration	$20.00
Duplicate license	$20.00
Certificate of good standing/recommendation	$20.00
Certified copy of license	$20.00
Handling fee for non-sufficient funds check	$50.00
Requests for database information (labels and printouts)	$125.00
Requests for database information (diskettes)	$150.00
Radiology examinations administered in Board's office	$25.00
One copy of Board's laws and/or regulations	$10.00
Additional copies of Board's laws and/or regulations (per copy)	$5.00
Penalty for non-notification of change of address and/or duplicate mailouts performed by the Board	$10.00
Newsletter (per copy)	$2.50

Board Regulation 37 amended by the Mississippi State Board of Dental Examiners on 8 December, 1995.

BOARD REGULATION #41

Purpose: To Establish Continuing Education Requirements of Dentists and Dental Hygienists.

1. Continuing Dental Education (CDE) requirements will be effective on July 1, 1993 immediately following adoption of this regulation by the Mississippi State Board of Dental Examiners and reporting will be incorporated with the annual registration to be submitted one year following the effective date of this regulation, which period shall be from September 1 through August 31 of each year.
2. With the initial reporting ending August 31, 1995, every licensed dentist shall be required to have forty (40) hours documented, approved continuing education. Every year thereafter, each licensed dentist shall have forty (40) hours of continuing education for the previous two (2) consecutive years. Approved CDE shall consist of courses approved by the ADA, AGD, MDA, MDS, NDA, or other courses or activities specifically approved by the Board for CDE credit. No more than four (4) hours per year on the subject of CPR (Cardiopulmonary Resuscitation) shall be allowed toward the two-year, forty-hour requirement, and dentists successfully completing an eight-hour, two-year CPR certification course are allowed to use four (4) hours each year, of the total eight (8) hours, toward fulfilling the two-year, forty-hour CDE requirement. Furthermore, licensees successfully completing a 16-hour Advanced Cardiac Life Support (ACLS) course may use eight (8) hours each year, of the total sixteen (16) hours, toward fulfilling the two-year, forty-hour CDE requirement. Finally, dentists may attend courses offered and approved by any of the additional organizations listed in Section 3 of this Regulation and use such attendance as a means of fulfilling continuing education requirements.
3. With the initial reporting ending August 31, 1995, every licensed dental hygienist shall be required to have twenty (20) hours documented, approved continuing education. Every year thereafter, each licensed dental hygienist shall have twenty (20) hours of continuing education for the previous two (2) consecutive years. Approved CDE for dental hygienists shall consist of courses approved by the MDHA, ADHA, MDA, MDS, AGD, ADA, NDA, or other courses or activities specifically approved by the Board for CDE credit. No more than four (4) hours per year on the subject of CPR (Cardiopulmonary Resuscitation) shall be allowed toward the two-year, twenty-hour requirement, and dental hygienists successfully completing an eight-hour, two-year CPR certification course are allowed to use four (4) hours each year, of the total eight (8) hours, toward fulfilling the two-year, twenty-hour CDE requirement. Furthermore, licensees successfully completing a 16-hour Advanced Cardiac Life Support (ACLS) course may use eight (8) hours each year, of the total sixteen (16) hours, toward fulfilling the two-year, twenty-hour CDE requirement.
4. Continuing Education credit will not be given for video courses (unless viewed while attending approved study club meetings, continuing education courses, or through group satellite uplinks as part of approved courses), audio courses, reading, or correspondence courses. However, provided the course directly relates to the practices of dentistry or dental hygiene, attendance at approved Continuing Medical Education (CME) courses may be used to satisfy the minimum continuing education requirements of Sections 2 and 3 above.
5. Instructors of Continuing Education Courses only shall receive one-time credit for a course, and shall receive the same credit for the course as participants.
6. Unless otherwise ordered by the Board, continuing education hours required by disciplinary order shall not be used to satisfy the continuing education requirements for license renewal.
7. A record of courses taken, the date, location, number of hours for such course, and certificates of attendance shall be kept by the dentist or hygienist for a minimum of three (3) years from the date of attendance and shall be

made available for review at any time by any member of the Board or by any designated agent of the Board. Further, when a Board member or any designated agent thereof shall conduct any authorized investigation, any and all continuing education records will be reviewed and/or audited by such Board member or authorized agent during the course of the investigation. Finally, when any licensee is noticed to appear before the Board to show cause why that licensee's dental or dental hygiene license should not be suspended, revoked, or have other action taken against it, that licensee is required to present proof of compliance with this Regulation.

8. Each dentist or hygienist shall certify on the annual registration card the number of CDE hours completed by him/her in the preceding reporting period.
9. False certification of the number of hours completed, or the failure to attend and complete the required amount of CDE shall subject the dentist or hygienist to disciplinary action, including revocation of license.
10. The following disciplinary actions will be taken against dentists not meeting the requirements set forth in item number 9 above:
    - First Offense: Five Hundred and No/100 Dollars ($500.00) fine.
    - Second Offense: One Thousand Five Hundred and No/100 Dollars ($1,500.00) fine plus a thirty (30) day suspension of license.
    - Third Offense: Five Thousand and No/100 Dollars ($5,000.00) fine plus a six (6) month suspension of license.
11. The following disciplinary actions will be taken against dental hygienists not meeting the requirements set forth in item number 9 above:
    - First Offense: Two Hundred Fifty and No/100 Dollars ($250.00) fine.
    - Second Offense: Seven Hundred Fifty and No/100 Dollars ($750.00) fine plus a thirty (30) day suspension of license.
    - Third Offense: Two Thousand Five Hundred and No/100 Dollars ($2,500.00) fine plus a six (6) month suspension of license.
12. Any dentist or dental hygienist requesting a change from inactive to active status is not required to meet the continuing education or cardiopulmonary resuscitation requirements for the reporting period during which that dentist or dental hygienist was inactive. However, any dentist or dental hygienist requesting active status must, within the previous twelve (12) months prior to requesting active status, be current in cardiopulmonary resuscitation and have acquired twenty (20) and ten (10) hours of continuing education, respectively.

SAMPLE CERTIFICATION CARD OMITTED

Regulation Forty-One amended by the Mississippi State Board of Dental Examiners 8 December, 1995.

BOARD REGULATION #45

Purpose: To establish Cardiopulmonary Resuscitation requirements for dentists, dental hygienists, and all other dental auxiliary personnel.

1. Cardiopulmonary Resuscitation (CPR) requirements will be effective on July 1, 1994, and reporting will be incorporated with the annual registration to be submitted July 1, 1995. Refer to Board Regulation #41 concerning reporting requirements.
2. All dentists and dental hygienists licensed by the State of Mississippi and holding active licenses shall be currently certified in Cardiopulmonary Resuscitation. Further, all auxiliary personnel involved in direct patient care must be certified in Cardiopulmonary Resuscitation. All auxiliaries must be certified in CPR within one hundred eighty (180) days of employment or, if currently employed, within one hundred eighty (180) days of the date of amendment of this Regulation.
3. Proof of certification shall be maintained by the dentist or dental hygienist for the time period specified in Board Regulation 41 and shall be made available for review at any time by any member of the Board or by any designated agent of the Board. When a Board member or any designated agent thereof shall conduct any authorized investigation, any and all proof of certification in cardiopulmonary resuscitation will be reviewed and/or audited by such Board member or authorized agent during the course of the investigation. Finally, when any licensee is noticed to appear before the Board to show cause why that licensee's dental or dental hygiene license should not be suspended, revoked, or have other action taken against it, that licensee is required to present proof of compliance with this Regulation.
4. False certification of CPR courses or failure to comply with this regulation shall subject the dentist or dental hygienist to disciplinary action, including revocation of license.
5. Participation in approved Advanced Cardiac Life Support (ACLS), American Heart Association, or American Red Cross courses may be used to fulfill the requirements of this Regulation.
6. Any dentist or dental hygienist requesting a change from inactive to active status is not required to meet the CPR requirements for the reporting period during which that dentist or dental hygienist was inactive. However, any dentist or dental hygienist requesting active status must, within the previous twelve (12) months prior to requesting active status, be certified in cardiopulmonary resuscitation.

Regulation Forty-Five amended by the Mississippi State Board of Dental Examiners 8 December, 1995.

BOARD REGULATION #47

Purpose: To establish standards for licensure by credentials not included in Mississippi Code of 1972, Annotated, Section 73-9-24.

1. Any candidate for licensure to practice dentistry on the basis of credentials who graduated from dental school

after 1960 will be required to have taken and successfully completed the Joint Commission of National Dental Examinations National Board. Candidates for licensure by credentials graduating before 1960 are exempt from this requirement, as the National Boards were not universally mandatory and available prior to this time.

2. Any candidate for licensure to practice dental hygiene on the basis of credentials who graduated from dental hygiene school after 1960 will be required to have taken and successfully completed the National Board Dental Hygiene Examination. Candidates for licensure by credentials graduating before 1960 are exempt from this requirement, as the National Boards were not available prior to this time.
3. The Mississippi State Board of Dental Examiners has determined there is no "equivalent examination" to the Joint Commission on National Dental Examinations or the National Board Dental Hygiene Examination.
4. The Mississippi State Board of Dental Examiners has determined that a dentist or dental hygienist must practice a minimum of ninety (90) days per calendar year to be considered as actively practicing for the past five (5) years, pursuant to Miss. Code Ann. § 73-9-24(1)(a).
5. The Mississippi State Board of Dental Examiners has determined that a candidate's years of participation in an approved residency program may be used to fulfill the minimum five-year, active practice requirement stipulated by Miss. Code Ann. § 73-9-24(1)(a).
6. The Board may, at its discretion, charge a fee for all applications for licensure by credentials. Refer to Board Regulation 37 for the current fees charged for licensure by credentials.
7. All application fees for licensure by credentials must be paid by certified check or money order, and are non-refundable.

Regulation Forty-Seven amended by the Mississippi State Board of Dental Examiners 8 December, 1995. □

DENTISTS LICENSED JULY 1, 1995 THROUGH DECEMBER 31, 1995

Congratulations to the following individuals who qualified for licensure to practice dentistry in Mississippi. A "(C)" represents those individuals who obtained licensure through credentialing, and a "(P)" denotes those individuals who have been granted provisional, provisional teaching, or provisional fellowship licenses.

DR BRENDON WILLIAM BERG (C)
PASCAGOULA, MS

DR KENNETH WAYNE JOHNSON (C)
MEMPHIS, TN

DR DANIEL B SARUBIN (P)
JACKSON, MS

DR RONALD JON TREVISANI (P)
COLUMBUS, MS

DR CARL DAVID BLOOM (C)
GULFPORT, MS

DR CYNTHIA L KLEINEGGER (P)
JACKSON, MS

DR DEMARCUS D SMITH IV (C)
NEW ORLEANS, LA

DR PAUL J WALTERS (C)
NEW ORLEANS, LA

Correction Notice: Dr. Jeffrey Lamone Knight was incorrectly listed in the July 1995 Dental Digest as being licensed through credentialing. Dr. Knight participated in and successfully completed the 1995 annual dental licensure examination. □

DENTAL HYGIENISTS LICENSED JULY 1, 1995 THROUGH DECEMBER 31, 1995

Congratulations to the following individuals who qualified for licensure to practice dental hygiene in Mississippi. A "(C)" represents those individuals who obtained licensure through credentialing; a "(P)" denotes those individuals who have been granted provisional, provisional teaching, or provisional fellowship licenses; and a "(B)" denotes those individuals who successfully completed the 1995 dental hygiene licensure examination and subsequently passed the National Board Dental Hygiene Examination.

DONA LEE DUNN RDH (C)
OXFORD, MS

SUSAN JEAN GERACI RDH (C)
BILOXI, MS

REBA RENEE MILLS RDH (B)
LUCEDALE, MS

TAMMY LYNN SULLIVAN RDH (B)
PHILADELPHIA, MS □

RADIOLOGY PERMITS ISSUED JULY 1, 1995 THROUGH DECEMBER 31, 1995

Congratulations to the following individuals who qualified for and received radiology permits. A radiology permit entitles that individual to administer radiographs as required within the scope of his/her duties as a dental assistant. Dental assistants who do not have radiology permits are not licensed to and must not administer radiographs. An asterisk represents an individual who is a Certified Dental Assistant, and two asterisks represent an individual who is a graduate of a dental assistant program. You will note that some individuals qualify in both categories. The MSBDE conducts periodic site visits to ensure that radiographs are administered only by those dental assistants who have qualified for and have received the appropriate radiology permit. If it is found that a dental assistant is administering radiographs without a radiology permit, the dentist employing that individual may be subject to formal disciplinary action by this Board.

KATHY MARIE ABBOTT
VICKSBURG, MS

KELLY O'BRIAN ALLEN
NATCHEZ, MS

SUE ELLEN BALLINGER
PASCAGOULA, MS

HELEN RENA BANKS
COLLINS, MS

JENNIFER LEE ALLEN
GULFPORT, MS

TINA LOUISE BACKSTROM
RICHTON, MS

SUSAN SMITH BANE
RIENZI, MS

LELL ALYNE BARTMAN
GULFPORT, MS

CRYSTAL MARIA BASTINE
PETAL, MS

BRENDA FAYE BAVIDO
TAYLORSVILLE, MS

MARIAN LEIGH BLACKWELL
ELLISVILLE, MS

JUDY C BLYTHE
ENTERPRISE, MS

MISTY MICHELLE BOND
LAUREL, MS

TRICIA MARIE BOOTY
CLINTON, MS

PATRICIA ANN BOUDREAUX
BILOXI, MS

GWEN P BOWLES
VICKSBURG, MS

ANGELA LEE BREWER
PASS CHRISTIAN, MS

BRENDA DARLENE BROCK
HICKORY, MS

BRENDA KAY BROOKS
SALTILLO, MS

VANESSA KAY BROWN
LAUREL, MS

PATRICIA MICHELLE BROWNING
GREENWOOD, MS

BEVERLY NICHOLE BURNS
JACKSON, MS

LINDA ANNE BYRANT **
JACKSON, MS

MALLARI CUMMINS CAIN
VAIDEN, MS

SHILOH MARIE CARR
SALTILLO, MS

ANGELA KNIGHT CLARK
SOUTHAVEN, MS

SYLVIA EVETTE CLARK
WINONA, MS

KEISHA L COLEMAN
JACKSON, MS

LINDA LEE CONTI
VICKSBURG, MS

MELISSA LYNN COX
BILOXI, MS

SANDRA MICHELLE CULPEPPER **
COLUMBIA, MS

LISA RADACH CULVER
HICKORY FLAT, MS

SHEILA KAY DAVIS
ABERDEEN, MS

PENNY ANN DELONG
VIDALIA, LA

BEKKI ELLEN DESCHAINE
BILOXI, MS

MARY ELIZABETH DICKEY
WOODVILLE, MS

CHRISTY JASPER DREW *
CRYSTAL SPRINGS, MS

DAPHNE MICHELE FELDER
MCCOMB, MS

CHRISTINA MARIE FOSTER *
BRANDON, MS

FELICIA RENEE FRANKLIN **
COLUMBIA, MS

STEVEY LYNN GADDIS
JACKSON, MS

CINDY LOU GAHAGAN
CORINTH, MS

JANET GLISSON GARDNER
HEIDELBERG, MS

HOLLY MICHELLE GIESBRECHT
LELAND, MS

KIMBERLY ANN GOODMAN
MERIDIAN, MS

JENNIFER TRAYLOR GRAY
TUPELO, MS

STACY DAWN GREEN
SANDERSVILLE, MS

TERESSA LYNNE GUNTHARP
FULTON, MS

LEANNIA DOREEN GUTHRIE
MOSELLE, MS

PAMELA ELIE HAMILTON
RIDGELAND, MS

LONDON SHEA HANCOCK
LAUREL, MS

ANGEL ELIZABETH HARLESS
MOSELLE, MS

LUCIA MICHELLE HARRIS
BILOXI, MS

SHIRLEY JANE HAYNIE
CORINTH, MS

MARY DELL HIGGINS
WEIR, MS

CHARLOTTE MARIE HOLCOMB* **
PURVIS, MS

GWENDOLYN D HOLCOMB
ROLLING FORK, MS

SAMMIE KAY HOLLY
MADISON, MS

THERESA ANN HOWELL
BROOKHAVEN, MS

SHERYL LYNN HUTTON *
JACKSON, MS

STEPHANIE DIANN JACKSON * **
JACKSON, MS

NANCY C JENKINS
LOUISVILLE, MS

KIMBERLY GRISHAM JOHNSON
ABERDEEN, MS

MICHELE LYNN JOHNSON **
BRANDON, MS

SHANTA LOVETTE KEYES
GULFPORT, MS

MEMRIE L KIKER
CLEVELAND, MS

LAURICE PIERCE KIRK
JACKSON, MS

AMY ELIZABETH KITTRELL
OVETT, MS

TOMI LYNN LADNIER
LUCEDALE, MS

NATASHA JO LAWRENCE
KOSCIUSKO, MS

DEBORAH S LEA
CARSON, MS

JENNY REBECCA LIDNER
JACKSON, MS

CHRISTY LAPAGE LOFTON * **
HATTIESBURG, MS

DEBORAH MICHELLE LOGAN
COLLINS, MS

DELENA WUERTZ LONG
PURVIS, MS

AMY M LONGMIRE **
RIDGELAND, MS

DANA CAROL MABRY
MERIDIAN, MS

MELISSA ANN MCBRIDE
TAYLORSVILLE, MS

BECKY ARTZ MCCASKILL
VICKSBURG, MS

RAINA D MCCLURE
OXFORD, MS

JACKIE CHATHAM MCGREW
MERIDIAN, MS

CAROL MAE MCKENZIE
GLOSTER, MS

MELLISSIA ANN MCNEASE
HATTIESBURG, MS

DEBBIE ROLLISON MCPHAIL
RAYMOND, MS

SHERYL ANN MEADOWS
LAUREL, MS

CAROLYN ANN MERCIER
BROOKHAVEN, MS

KIMBERLY A MILAN
CLEVELAND, MS

MONICA LYNNE MORRIS * **
JACKSON, MS

NICKIE DIANE MOSLEY
WAYNESBORO, MS

SHARI SMITH MOSLEY
CLEVELAND, MS

ANGELA BETTINNA MOSS
CORINTH, MS

PAMELA LEE NEAVES
KOSCIUSKO, MS

RADONNA DENISE NIX
SMITHVILLE, MS

DEBORAH MITCHELL NOWELL
LOUISVILLE, MS

KIMBERLEY ANN PALMER
MEMPHIS, TN

MICHELE LEE PEASE
COLDWATER, MS

BARBARA JEAN PERRYMAN
WAYNESBORO, MS

STACY MCINVALE PHILLIPS **
OLIVE BRANCH, MS

BROOKE NOELL POWELL
LAUREL, MS

TOMMI STEAN POWERS
HERNANDO, MS

INGRID DAYNE PRICE
MERIDIAN, MS

LISA CAROL PRYOR
OLIVE BRANCH, MS

AMY L PURSELL
LUCEDALE, MS

JOYCE LYNN PURSLEY
PASCAGOULA, MS

JANICE REGINA RAY
COLLINSVILLE, MS

PATRICIA ANN RAY
GREENVILLE, MS

LINDA ELAINE RAYBURN
COLUMBUS, MS

JEANNIE BELINDA REEVES
LAUREL, MS

CARRIE DANIELLE REID
LAUREL, MS

JENNIFER CUMMINS REID
HATTIESBURG, MS

ALTA FITCH RICHARDSON
JACKSON, MS

HELEN CLAIRE SALMON
GREENVILLE, MS

SHERYL ANN SANDIFER
VIDALIA, LA

DANA W SAUCIER
CENTREVILLE, MS

ELIZABETH ANNE SCHWINGER
VICKSBURG, MS

CAROLYN DIANE SCOTT
CENTREVILLE, MS

DIANE C SCOTT
PASCAGOULA, MS

VONDA JOHNSON SCOTT
GOLDEN, MS

AMBERLEE A SCRIMPSHIRE
LAUREL, MS

DAVA MARIE SCURRIA
PORT GIBSON, MS

JUDITH KAY SEVIER
DALEVILLE, MS

SYLVIA MARIE SHEPHERD
SOUTHAVEN, MS

CYNTHIA LEE SILKWOOD
GULFPORT, MS

SANDRA J SIMMONS
TUPELO, MS

SONDRA CHRISTIAN SIMS
WEST POINT, MS

DIRKLAND TREVIANNOUS SMITH
JACKSON, MS

JACQUELINE LAVERN SMITH
LORMAN, MS

VICKI GIBSON SMITH
LUCEDALE, MS

JOYCE RENEE' SODAY
YAZOO, MS

CONNIE RENEE SORRELS
HAZLEHURST, MS

DAWN THERESA STEPHENS
COLUMBUS, MS

TONYA MAE STEWART
LAUREL, MS

MELANIE KAY STRICKLAND
LAUREL, MS

GINA DENISE TAYLOR
BYHALIA, MS

TAMMY PRITCHETT TIBBETTS
MERIDIAN, MS

JULIE J TODD
SOSO, MS

SHARON JEANINE TRAYNOR
OCEAN SPRINGS, MS

JENNIFER SONNEK TURNER
VICKSBURG, MS

CHIQUITA MECHELLE WALLACE
YAZOO CITY, MS

DAPHNE C WATROUS
GAUTIER, MS

KRISTA ANNE WELLS
VICKSBURG, MS

KATAYOON WHITEHEAD
JACKSON, MS

EILEEN DIANE WILSON
CORINTH, MS

JEFF RANDALL WILSON **
JACKSON, MS

LORI R WIMBERLY
MARION, MS

PATRICIA ANN WORK
HOLLY SPRINGS, MS

□

DENTAL LICENSES VOIDED JULY 1, 1995 THROUGH DECEMBER 31, 1995

The following individuals have had their licenses to practice dentistry in the State of Mississippi voided. A "(D)" denotes those individuals who are deceased; a "(R)" denotes those individuals who requested that their licenses be voided; a "(P)" denotes provisional licenses that were voided, in most instances because the licensee subsequently was licensed through the credentialing process; and a "(V)" denotes those individuals whose licenses were revoked. According to the laws of the State of Mississippi, anyone whose license has been voided or revoked no longer may practice dentistry in this State.

DR MARTIN H BAKER (R)
HATTIESBURG, MS

DR JOHN W BATEMAN JR (R)
BATON ROUGE, LA

DR CLIFFORD SANDERS BELL (R)
INVERNESS, MS

DR HARRIS RADCLIFF BROWN
MOBILE, AL

DR HARVEY M CAMPBELL
TUPELO, MS

DR JOE L CANNON (R)
MEMPHIS, TN

DR CHARLIE J CREWS JR (D)
NEW ALBANY, MS

DR JOHN WILLIAM DAVIS
GEORGETOWN, SC

DR WARREN H DYE
CENTREVILLE, MS

DR STEVE C FUTRIS
MEMPHIS, TN

DR J RUSSELL GOODLOE JR (R)
MOBILE, AL

DR L TATE HAYMON (R)
LUMBERTON, NC

DR J R HERRINGTON SR (R)
JACKSON, MS

DR JOSEPH FRANK HOLMES (R)
SPRING, TX

DR JAMES L MCMILLAN (R)
ORANGE BEACH, AL

DR DAVID M MILLER JR
HATTIESBURG, MS

DR OLLO J MOLLERE (R)
GULFPORT, MS

DR DONALD R MONTGOMERY (D)
JACKSON, MS

DR CHARLES E MOORE (R)
TUPELO, MS

DR CHARLES J NAIL JR
WEST POINT, MS

DR MICHAEL L NIOLET (D)
LONG BEACH, MS

DR CONRAD F NORDHOLM (R)
HATTIESBURG, MS

DR FRANK C PATE JR
LINCOLN, AL

DR PETER PAVLOV
OCEAN SPRINGS, MS

DR JOHNNY C PEARCE
MEMPHIS, TN

DR STEPHEN PITALO
BILOXI, MS

DR JOHN S PITTMAN (R)
GREENWOOD, MS

DR GEORGE E POWERS
GULFPORT, MS

DR ANDREW J PRICE JR (R)
GULFPORT, MS

DR WILLIAM ZIRKLE RAY (D)
MERIDIAN, MS

DR P D SADLER (R)
MARION, AL

DR ROBERT SHAYE (P)
JACKSON, MS

DR ALEX C SHOTTS JR
JACKSON, MS

DR JAMES E SMITH
DESTIN, FL

DR JOHN MCHUGH SMITH (R)
BATON ROUGE, LA

DR M MONROE STEWART (R)
JACKSON, MS

DR E J STRINGER (D)
COLUMBUS, MS

DR JAMES H TAYLOR
CARTHAGE, MS

DR AARON TRUBMAN (R)
JACKSON, MS

DR ROLAND D TURNER (R)
PASCAGOULA, MS

DR V VEERISETTY
HOUSTON, TX

DR WALTER A WALKER (R)
ATHENS, AL

DR W R WEAVER (D)
BROOKHAVEN, MS

DR DERRIL L WEBB (R)
DESTIN, FL

DR JENNIFER J WRIGHT (R)
TUSCALOOSA, AL

DR ROBERT PRICE WRIGHT (R)
TUSCALOOSA, AL

DR HELEN MARY ZYLMAN (R)
ANN ARBOR, MI

□

DENTAL HYGIENE LICENSES VOIDED JULY 1, 1995 THROUGH DECEMBER 31, 1995

The following individuals have had their licenses to practice dental hygiene in the State of Mississippi voided. A "(D)" denotes those individuals who are deceased; a "(R)" denotes those individuals who requested that their licenses be voided; a "(P)" denotes provisional licenses that were voided, in most instances because the licensee subsequently was licensed through the credentialing process; and a "(V)" denotes those individuals whose licenses were revoked. According to the laws of the State of Mississippi, anyone whose license has been voided or revoked no longer may practice dentistry in this State.

GRETCHEN E BALDERSON RDH
MOBILE, AL

SARA W BURROW RDH (R)
JACKSON, MS

LEAH ALLEN DAVIDS RDH
MARIETTA, GA

DEBORAH GILLENWATER RDH
SAN ANGELO, TX

DIANNE T HAYMON RDH (R)
LUMBERTON, NC

LYNNE C HUDSON RDH (R)
POCAHONTAS, TN

TERRI B KEENUM RDH
ALTUS, OK

KATHRYN G MARLEY RDH
MADISON, MS

ROSEMARY R MAYO RDH (R)
FRIENDSWOOD, TX

TAMARA ANN METZER RDH (R)
SELMER, TN

AMY STANFORD MIZE RDH (R)
SALTILLO, MS

DIANE P MOREY RDH (R)
FARGO, ND

BETTY B POPE RDH (R)
MURFREESBORO, TN

ELIZABETH ODOM REED RDH
COLUMBUS, MS

SUSAN PRESTON THOMPSON RDH (R)
TALLAHASSEE, FL

TONI H THOMPSON RDH (R)
NEW ORLEANS, LA

TONJA MARIE WOOD RDH (R)
BIRMINGHAM, AL

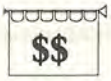
□

RADIOLOGY PERMITS VOIDED JULY 1, 1995 THROUGH DECEMBER 31, 1995

The following individuals have had their radiology permits voided; consequently, should these individuals continue to be employed as dental assistants, they no longer may administer radiographs as part of their dental assisting practice. A "(R)" denotes those individuals who requested that their radiology permits be voided.

LUCILLE M WATTS (R)
KOSCUISKO, MS

□



CURRENT MSBDE FEES

The following fees represent current amounts charged for applications, renewals, and other services rendered by the MSBDE. These fees are subject to change and must be paid by money order, personal check, or cashier's check in advance of any request.

Application for Dental License	$300.00
Application for Dental Hygiene License	$150.00
Application for Dental License through Credentials.	$2,000.00
Application for Dental Hygiene License through Credentials	$1,000.00
Application for Institutional, Teaching, or Provisional License	$25.00
Application for Specialty License	$200.00
Application for General Anesthesia Permit	$200.00
Application for I.V. Sedation Permit	$200.00
Application for Radiology Permit (Including Initial Registration Fee)	$60.00
Annual Dental License Renewal	$100.00
Annual Dental Specialty License Renewal	$50.00
Annual Dental Hygienist Renewal	$50.00
Annual Institutional, Teaching, or Provisional Renewal.	$100.00
Annual Radiology Permit Renewal	$20.00
Annual General Anesthesia Permit Renewal	$50.00
Annual IV Sedation Permit Renewal	$50.00
Duplicate License	$20.00
Certificate of Good Standing/Recommendation	$20.00
Certified Copy of License	$20.00
Handling fee for Insufficient Funds Checks	$50.00
Requests for Database Information (Labels, Printouts, and Disks)*	$125.00
Radiology Examinations Administered in MSBDE Offices	$25.00
One Copy of MSBDE Laws and/or Regulations	$10.00
Additional Copies of MSBDE Laws and/or Regulations (Per Copy)	$5.00
Duplicate MSBDE Mailouts Necessitated by Non-Notification of Change of Address	$10.00
Newsletter (Per Copy)	$2.50

*This is the minimum charge per request. Additional charges may be assessed as determined on a case-by-case basis.

☐ ☐

MSBDE NEWSLETTER
Suite C, 580 Springridge Road
Post Office Box 1960
Clinton, MS 39060-1960

PLACE
STAMP
HERE

MISSISSIPPI STATE BOARD OF DENTAL EXAMINERS
POST OFFICE BOX 1960
CLINTON, MS 39060-1960

MSBDE NEWSLETTER
Suite C, 580 Springridge Road
Post Office Box 1960
Clinton, MS 39060-1960

BULK RATE
U.S. POSTAGE PAID
JACKSON, MS
PERMIT NO. 437

CHANGE OF ADDRESS NOTIFICATION

Pursuant to Miss. Code Ann. § 73-9-19, every licensed dentist and dental hygienist "shall promptly keep the board advised of any change in address of his office or residence." Additionally, Board Regulation 25, VI.A., stipulates that "[e]very person holding a radiology permit shall promptly keep the Board advised of any change of mailing address." Therefore, if you have changed your home, business, mailing, or satellite address, please use this form to notify the MSBDE of such. Otherwise, keep the form in your files should you need to notify the MSBDE of a future change of address. You may cut along the dotted line, affix a postage stamp to the reverse side of this form, and mail it directly to the Mississippi State Board of Dental Examiners. If you wish, you may send the form via facsimile to (601)924-9623. Please call (601)924-9622 should you have any questions.

Full Name: _____ MS License No.:_____

Old Address: _____

_____

New Address: _____

_____

Telephone: _____ Effective Date of Change:_____

Type of Change: ☐ Home Address ☐ Office Address ☐ Mailing Address ☐ SatelliteAddress