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DENTAL DIGEST

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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.

Welcome to the May 2000 edition of the Dental Digest. This edition is packed with much varied and important information for all licensees. Don't forget that the Board has a copy of this newsletter and copies of all prior newsletters on its web site (http://www.msbde.state.ms.us), and you are encouraged to visit the site as often as possible, as it is frequently updated. Also, new to the web site is the addition of the Board's databases. This is an excellent tool for licensure certification and verification, as well as for Mississippi dentists who are hiring dental hygienists and dental assistants who indicate they have current dental hygiene licenses or radiology permits. The Board is enhancing this portion of the site to make it more user-friendly for dental consumers who need to locate general dentists, specialists, or anesthesia permit holders by city. Also, licensed dentists will be able to use the site as a recruiting mechanism to locate currently licensed dental hygienists and radiology permit holders by city. Look for these changes in the very near future. In the meantime, if you have any questions, feel free to contact the Board's staff, and we will be happy to assist you.

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BEGINNING A DENTAL PRACTICE
By: William T. Buchanan, D.D.S., M.S.

When a new dentist begins a dental practice, it is an awesome responsibility. The first thoughts are, am I ready? They have spent four years learning and using the cognitive, affective, and psychomotor skills taught by the school of dentistry. They have employed those skills under the direct supervision of a licensed dentist. The licensed dentist has been their counselor, coach, supporter, critic, and advocate. The new dentist leaves that protected environment and enters a world unknown to many.

The first external encounter is often with the Mississippi State Board of Dental Examiners. The application process is explained in their booklet. After completing the application, the new dentist is prepared to be "examined." The examination is a daunting experience for most of the candidates. Most have prepared well, but now they understand that success in their endeavor determines their privilege of licensure. Apprehensively, but with self assurance, they engage the process. Two weeks later they receive their Mississippi State Dental License. Gleefully they have attained another plateau of life's experiences.

Upon entering the licensed practice of dentistry, the new dentist encounters a world of statutory law, rules and regulations which were not meaningful during the years in dental school. The new dentist must complete business and governmental forms, applications for licenses, permits, and registrations. They must secure office space, contract builders, dental supply and equipment companies, hire personnel and many other activities. For the new dentist the list becomes obscured by the myriad of red tape.

The Mississippi State Board of Dental Examiners and the University of Mississippi Medical Center School of Dentistry have assisted the new dentists in creating a checklist to guide the new practitioner in the process of governmental regulation. The checklist, which accompanies this article, is thorough but brief. It is given to all senior dental students at the University of Mississippi. It is also available to all interested practitioners at either the Mississippi State Board of Dental Examiners or the University of Mississippi Medical Center School of Dentistry, Office of Academic Programs. Any dentist who needs this checklist may contact either institution.

It is our hope that this checklist facilitates the new dentist in their entry to the privilege of practice in the State of Mississippi. Congratulations and welcome to all new practitioners.

PRACTICE MANAGEMENT IV
SESSION: Wednesday. February 2, 2000
PRESENTERS: Dr. Paula Stewart, Dr. William Buchanan, and Ms. Laura Jackson

After completing four years of dental school, it is an awesome responsibility to begin a dental practice. The practice of dentistry is a privilege granted to the duly trained and examined individual by the state. The primary purpose of the state dental practice act is to regulate the practice of dentistry for the fair and just treatment of the citizens of the state. In addition to the state statutory laws, rules and regulations, there are federal statutory laws, rules, regulations and guidelines which must be followed. I have tried to list those agencies and activities that must be contacted and the appropriate actions necessary to begin the legal practice of dentistry.

CITY HALL

□ City Permit	Annual fee (tax), if applicable
□ City Water	Back flow valve need, if applicable
□ Signage	Check fee, if applicable

COUNTY

□ Circuit Court	Dental license registration
□ County Tax Assessor	Equipment, personal property tax

STATE

□ Board of Dentistry	Fictitious practice name must be approved, allow 3 months
□ Board of Dentistry	Change of address, if applicable
□ Board of Health	Radiology equipment permit (installer or previous owner)
□ Tax Identification	Number necessary for tax purposes
□ N_20_2 Inspection	Manufacturer or installer may provide, but a plumber cannot

FEDERAL

□ Tax Identification	Number necessary for tax purposes
□ DEA	Controlled substances license
□ OSHA	Occupational, Safety and Health Agency guidelines for posting
□ CDC	Communicable Disease Center guidelines for posting

BOARD ESTABLISHES RECOVERING DENTIST PROGRAM
By: Duane Forrest Hurt, D.D.S.

The Mississippi Board of Dental Examiners (Board or MSBDE) has entered into a Memorandum of Understanding with the Mississippi Impaired Physicians Committee (MIPC) of the Mississippi Medical Association (MMA) to rapidly facilitate education, intervention, treatment and after-care for impaired dentists under their jurisdiction. An impaired dentist is defined for the purposes of the agreement as a "dentist, resident or dental student in training or licensed to practice dentistry in the State of Mississippi who is chemically dependent or is unable to practice dentistry with reasonable skill and safety due to mental or emotional illness."

This administrative action spawns the first, structured and ongoing program by the Board to protect the public from impaired dentists *and* return those who are impaired to health and the productive practice of dentistry and well-being with the minimum amount of disciplinary action possible. This Memorandum of Understanding is the fruit of the work of members of the MDA's Dentist Well-Being Committee (DWBC), the Mississippi Association of Recovering Dentists (MARD), the Mississippi Impaired Physicians Program (MIPP) (which is overseen by the MIPC and is commonly referred to as "Caduceus Club"), and the Board.

The program as conceived and implemented allows an impaired dentist to self-refer to the to the Mississippi Recovering Dentists Program (MRDP), which has become an integral part of the MIPP. The impaired dentist will then be evaluated in a chemical dependency treatment center approved by the MIPP/MRDP. Once evaluation is completed, the impaired dentist must enter into and successfully complete any treatment program recommended by the center. Following successful completion of the program, the impaired dentist will then enter into a contract with the MIPP/MRDP for a period of after-care, usually five years. This after-care program will require mandatory attendance at Caduceus Club/AA meetings with written verification of attendance by the dentist's sponsor. It will also include random, unannounced, urine or blood screens to monitor for possible relapse and chemical abuse.

If the impaired dentist self-refers, is referred by a spouse, family member, staff person, friend or the Board staff to the MIPP/MRDP based solely on chemical dependency and the impaired dentist enters into a "Recovery Contract Agreement" (RCA) with MIPP/MARD, this contract will **not** be considered a public record, and will **not** be reportable to the National Practitioner Data Bank or the American Association of Dental Examiners. This assumes the RCA is completed successfully by the impaired dentist. His or her name will not be known to MSBDE members, but the executive director and the investigator of the Board, by necessity, will be notified of the name of the impaired dentist and progress through intervention, treatment and after-care. This allows the executive director and the investigator for the Board to advise federal and state agencies who may report unusual drug prescribing activity to them that the impaired dentist has already been identified and is in treatment.

If the RCA is a first time referral and the impaired dentist has not violated other statutory grounds for disciplinary action as enumerated in Miss. Code Ann. Section 73-9-61 (the Dental Practice Act), the contract will generally **not** include a restriction on the dentist's right to prescribe, administer or dispense controlled substances or other drugs having addiction-sustaining liability.

If an agreement between the Board and the MIPP/MRDP is executed based on chemical dependency and other statutory grounds for disciplinary action as enumerated in the state's Dental Practice Act (as noted in the above paragraph), such an agreement may be referred to as a "Consent Order" and **shall** be reportable to state and federal agencies as required by law. A Consent Order **will** also generally include a disciplinary action and restriction of the dentist's state and DEA licenses, including suspension and revocation.

Simply stated, if the impaired dentist seeks treatment for his/her addiction and has not had a formal complaint filed with the Board alleging violation of the state Dental Practice Act, or other statutory violations which must be considered by the Board, the dentist will enter and complete rehabilitation and be placed into after-care with the least possible administrative and/or disciplinary action by the Board. If the Board receives a formal complaint against the impaired dentist and must assert its legal authority to protect the public and order the dentist into treatment, the dentist will be liable under the Dental Practice Act for disciplinary action which may include, but not be limited to, license restriction, suspension, revocation and DEA privileges being revoked.

Nothing in the Memorandum of Understanding shall in any way limit or prevent the Mississippi State Board of Dental Examiners from executing its authority under the Dental Practice Act to protect the public and ensure that all individuals licensed to practice dentistry in the State of Mississippi can do so with reasonable skill and safety to patients. Correspondingly, the Board encourages the early identification, intervention, treatment and rehabilitation of dentists licensed to practice dentistry in Mississippi, who may be impaired due to chemical dependency or mental/emotional illness.

The MIPP and MRDP maintain an office at 625 Lakeland Drive, Suite C, Jackson, Mississippi 39208. The phone numbers to use for further information or to refer a dentist for evaluation are: 1-800-844-1446 or 1-601-420-0240. After-hour emergencies may call 1-662-453-7606 and speak with the director of MARD. He will facilitate immediate help as appropriate and necessary.

At least two and no more than three dentists will be appointed to the Board of Directors of the MIPP to advise, help, implement and participate in the process of educating, preventing, identifying, treating and after-care of families, friends, staff and the impaired dentist as necessary.

Funding for this program will be obtained, as with physicians, through an increase in the annual licensure fees. The increase will be $20 for each licensed dentist. These fees will be transferred to the MIPP/MRDP for the administrative, operational and other reasonable costs of including dentists in the MIPP's already established program. It does **not** include the cost of treatment, after-care programs or drug/urine screens. These costs will be borne by the impaired dentist. The Board, with the endorsement of the President and Board of Trustees of the MDA, is satisfied this is the only effective and comprehensive approach to funding this program.

While the Board understands its absolute responsibility to protect the public from impaired, unethical or any other dentists who might be at risk to harm patients or themselves, it actively supports this program as the state's first formal mechanism to identify, treat, follow-up and safely return the impaired dentist to his/her practice. The Board also recognizes addiction is a disease and as such requires the treatment and oversight of physicians and dentists with expertise in the area.

SUMMARY OF CHANGES TO THE MISSISSIPPI DENTAL PRACTICE ACT DURING THE 2000 LEGISLATIVE SESSION

During the 2000 Legislative Session, several changes were effected to the Mississippi Dental Practice Act. These critical amendments were finalized due to the tireless efforts of Board members; Board staff; members of the Mississippi Dental Association (MDA), Mississippi Dental Hygienists' Association (MDHA), and Mississippi Dental Society (MDS); J. Perry McGinnis, Jr., D.D.S., Dean of the University of Mississippi Medical Center School of Dentistry, and various School officials and personnel; and program heads and staff of the State's four dental hygiene programs: University of Mississippi Medical Center School of Health-Related Professions, Meridian Community College, Northeast Mississippi Community College, and Pearl River Community College. The Board is deeply grateful for all assistance provided in support of this most important legislation. The following is a brief summary of these changes.

WE NEED YOUR INPUT-SEE PAGE 26

Miss. Code Ann. § 73-9-3 (Definition of Dentistry)

1. The definition of dentistry was amended as follows:

   "Dentistry" is defined as the evaluation, diagnosis, prevention and/or treatment (nonsurgical, surgical or related procedures) of diseases, disorders and/or conditions of the oral cavity, maxillofacial area and/or the adjacent and associated structures and their impact on the human body; provided by a dentist, within the scope of his education, training and experience, in accordance with the ethics of the profession and applicable law, provided that nothing herein shall be so construed as to prevent:...

2. Dental and dental hygiene students are allowed to participate in Board-approved off-site training programs.

3. The level of supervision for auxiliaries is changed from "immediate" to "direct," a term which will be defined by the Board via regulation.

4. As far as delegating the removal of calcareous deposits, the phrase indicating that a dentist "shall" delegate the removal "only" to regularly licensed and registered dental hygienists has been changed to "may" delegate the removal "only" to regularly licensed and registered dental hygienists.

Miss. Code Ann. § 73-9-5 (Definition of Dental Hygiene)

1. The definition of dental hygiene has been amended as follows:

   ...[an] individual who has completed an accredited dental hygiene education program, passed the national dental hygiene board and is licensed by the State Board of Dental Examiners to provide, as an auxiliary to the dentist, preventive care services including, but not limited to, scaling and polishing. In fulfilling these services, dental hygienists provide treatment that helps to prevent oral disease such as dental caries and periodontal disease and for educating patients in prevention of these and other dental problems.

2. The level of supervision for dental hygienists is changed from "immediate" to "direct," a term which will be defined by the Board via regulation.

3. Any public health dental hygienist is limited to only performing oral hygiene instruction and screening while under the "general" supervision of a dentist.

Miss. Code Ann. § 73-9-7 (Selection of Board Members)

1. The annual balloting process for dental hygienists is changed to be more consistent with that conducted for dentists.

2. The Board office shall conduct an annual poll of all licensed dental hygienists and send a list of six names to the Governor for his use in appointing the state-at-large dental hygiene Board member.

3. The six names shall be a compilation of the dental hygienist in each of the six (6) districts who received the highest number of votes by the dental hygienists in that district.

4. A vote for a dentist or dental hygienist on an individual ballot shall be counted only once, regardless of the number of times that name may appear on the same ballot.

State-at-Large Board Member
Charles E. Leonard, D.D.S.
Appointed 07/01/98

Miss. Code Ann. § 73-9-23 (Licensure by Examination)

1. The citizenship requirement for dental and dental hygiene licensure in the State of Mississippi is removed (as per federal law).

2. Successful completion of all required parts of the National Board exams by dentists and dental hygienists is mandated, unless the candidate graduated from a dental or dental hygiene school prior to 1960.

3. Foreign dental and dental hygiene graduates are required to (a) be proficient in oral and written communications in English; (b) be graduates of foreign schools recognized by licensure authorities in that country; (c) have completed a minimum of 2 years of post-doctoral general dental education (for dentists) or 1 year of clinical education (for dental hygienists) in an ADA-accredited school and be certified by that school's dean as having achieved the same level of clinical and didactic competence as a graduate of that school; and (d) successfully complete all appropriate parts of the National Board exam.

4. The licensure examination is disallowed to anyone who has been found guilty of any of the disciplinary actions enumerated in Miss. Code Ann. § 73-9-61.

Miss. Code Ann. § 73-9-24 (Licensure by Credentials)

1. The standards for licensure by credentials have been strengthened and revised to ensure this section is more consistent with Code section 73-9-23 (licensure by examination).

2. An applicant must submit proof of graduation from an ADA-accredited dental or dental hygiene school.

3. Applicants must hold a license in a state whose licensure standards are equivalent to Mississippi and which state grants reciprocity or also licensure by credentials Mississippi licensees.

4. Applicants must provide certifications of licensure from all states where the candidate has ever been licensed.

5. Applicants must not be the subject of any pending investigations or disciplinary actions.

6. Applicants must not have failed a licensure examination administered by another state within the past 5 years and must never have failed a licensure examination administered by the Mississippi State Board of Dental Examiners.

7. Applicants must have successfully completed all appropriate parts of the National Board exams unless the candidate graduated prior to 1960.

8. The payment of a non-refundable fee is required as outlined in Miss. Code Ann. § 73-9-43.

9. The Board is authorized to adopt further requirements by rule or regulation as it feels necessary from time-to-time to adequately enforce licensure by credentials.

10. The Board is allowed sufficient time to thoroughly investigate a request for licensure by credentials and to deny licensure to anyone who fails to meet all criteria or who meets any of the disciplinary criteria outlined by Miss. Code Ann. § 73-9-61.

Miss. Code Ann. § 73-9-25 (Licensure Examination Schedule)

1. The annual licensure examination time period is changed from "June" of each year to anytime during the year "at the Board's discretion." Also, the Board may administer the licensure examination more than once per year, as the Board deems necessary.

2. The Board is authorized to administer any re-take or make-up examinations at the Board's discretion.

3. The examination subjects are changed to be more consistent with currently recognized terminology, e.g., "oral and maxillofacial" pathology, "oral and maxillofacial" surgery, "pediatric" dentistry, orthodontics "and dentofacial orthopedics," and "oral and maxillofacial radiology."

State-at-Large Board Member
Catherine L. Gatewood, R.D.H.
Re-Appointed 07/01/99

Miss. Code Ann. § 73-9-41 (Unlicensed Practice)

1. No one whose license is suspended or whose license has been revoked may practice, and if found to be doing so, they may be brought directly before the Board and disciplined accordingly, including the assessment of fines and costs. No longer is the Board required to go through the courts for legal action. Furthermore, the Board may issue summons, as appropriate, for any disciplinary action.

2. Anyone who simply may "offer" to practice dentistry or dental hygiene is in violation of the laws and regulations of the Board and may be disciplined accordingly.

3. Anyone practicing dentistry or dental hygiene without a license must not collect fees for services rendered, and if found to have collected fees, must return all fees collected. Also, these individuals are liable for any damages resulting from negligent conduct.

4. An avenue for appeals of Board decisions is provided which is similar to that currently used for licensed dentists and dental hygienists (i.e., Miss. Code Ann. § 73-9-65).

5. The changes to this section are similar to those provided for by Louisiana's laws.

Miss. Code Ann. § 73-9-43 (Fees)

1. The statute is changed to ensure the types of fees are more consistent in name and nature to those outlined by current Board Regulation 37.

2. The statute is changed to allow for an additional renewal assessment which will be forwarded to the Mississippi Recovering Dentists Program so that dentists may be included in this program. This is similar to legislation adopted in the 1999 Legislative Session for the Mississippi State Board of Medical Licensure. Also, legislatively-mandated maximum renewal fee amounts have been increased to accommodate this additional renewal assessment that will be forwarded to the Mississippi Recovering Dentists Program and not kept by the Board. This renewal assessment is mandatory for all licensees, regardless of being over the age of seventy (70).

3. The legislatively-mandated maximum fee amounts are increased to allow the Board sufficient room for the additional renewal assessments which may be necessary.

Miss. Code Ann. § 73-9-61 (Grounds for Disciplinary Action)

1. Disciplinary criteria is strengthened, as well as outdated language is revised.

2. In addition to revoking or suspending a license for violation of any grounds enumerated in this section, the Board also is authorized to deny issuance of a license or renewal of a current license for individuals found guilty of any of the grounds for disciplinary action in this section.

3. The misrepresentation disciplinary criteria is changed to add language for anyone who attempts to obtain, obtains, attempts to renew or renews a license by making any material misrepresentation, including the signing in his professional capacity any certificate that is known to be false.

4. The impairment disciplinary criteria is changed to add language for a licensee who has been found guilty of being impaired in the ability to practice dentistry or dental hygiene with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition.

5. The prescription of controlled substances criteria is changed to add language for a licensee who administers, prescribes,

or dispenses "prescriptive medication" outside the scope of the practice of dentistry.

6. The violation of federal or state controlled substances criteria is changed to add language for a licensee who has been convicted or found guilty of or entered a plea of nolo contendere to federal or state controlled substances laws. Also, the amendment notes that a certified copy of the conviction order or trial court judgment will be prima facie evidence of a licensee's guilt, regardless of appeal status.

7. The malpractice or gross ignorance criteria is changed to add more up-to-date language (e.g., a licensee must be found guilty of practicing incompetently or negligently, regardless of whether there is actual harm to the patient).

8. A disciplinary criteria has been added concerning a licensee who has been convicted or found guilty of or entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of dentistry or dental hygiene. Also, a certified copy of the conviction order or judgment rendered by the trial court will be prima facie evidence of a licensee's guilt, regardless of appeal status.

9. The guilt of an offense punishable by death or imprisonment criteria is changed to add language for a licensee who has been convicted or found guilty of or entered a plea of nolo contendere to, regardless of adjudication, a felony in any jurisdiction. Also, a certified copy of the conviction order or judgment rendered by the trial court will be prima facie evidence of a licensee's guilt, regardless of appeal status.

10. A disciplinary criteria has been added concerning the delegation of professional responsibilities to a person who is not qualified by training, experience or licensure to perform them.

11. A disciplinary criteria has been added concerning the refusal of a licensing authority of another state or jurisdiction to issue or renew a license, permit or certificate to practice dentistry or dental hygiene in that jurisdiction or the revocation, suspension or other restriction imposed on a license, permit or certificate issued by such licensing authority which prevents or restricts practice in that jurisdiction. Also, a certified copy of the disciplinary order or action taken by the other state or jurisdiction will be prima facie evidence of a licensee's guilt, regardless of appeal status.

12. A disciplinary criteria has been added concerning the surrender of a license or authorization to practice dentistry or dental hygiene in another state or jurisdiction when the Board has reasonable cause to believe that said surrender is made to avoid or in anticipation of a disciplinary action.

13. The unprofessional conduct disciplinary criteria is changed to add the following language: (a) failure to provide reasonable sanitary facilities or to follow Board rules and regulations regarding infection control; and (b) sexual misconduct against a patient or dental auxiliary and providing definitions for such conduct (e.g., using a licensee-patient relationship to attempt to or engage the patient in sexual conduct, or intimidating, coercing, influencing, or tricking any person employed by or for the licensee in a dental practice or educational setting for the purpose of engaging in sexual activity or activity intended for the sexual gratification of the licensee).

14. A disciplinary criteria has been added concerning a licensee's violation of a lawful order of the Board previously entered in a disciplinary or licensure hearing; failure to cooperate with any lawful request or investigation by the Board; or failure to comply with a lawfully issued subpoena of the Board.

Miss. Code Ann. § 73-9-63 (Accusations and Hearings)

1. This section is changed to delete outdated language and further clarify the accusation and hearing process.

2. The word "accusation" is replaced with "complaint," as appropriate, and complaints may be filed with the Board's executive director, as well as the Board's secretary.

3. The language concerning hearings is refined and updated. Also, the Board's executive director shall set a day for the hearing after the full Board has made a reasonable cause determination that evidence exists to have a formal disciplinary hearing.

4. The Board is authorized at its discretion to establish an investigative panel consisting of at least two people, one of whom shall be a board member, to review complaints to determine the existence of probable cause and whether such complaints should proceed to a formal hearing.

5. Language is added stipulating that nothing in this section shall prevent the Board from determining that it should investigate a licensee without a signed complaint provided that a prior determination is made that probable cause exists that a violation may have occurred.

6. The Board's current subpoena power is changed to allow the Board to also subpoena documents, etc., during the course of an investigation.

District 5 Board Member
Dana Hal Jones, D.M.D.
Appointed 07/01/99

Creation of the "Mississippi Disabled Dentist Law"

1. This is a completely new law that is almost identical to that currently codified for physicians, etc., under the licensure authority of the Mississippi State Board of Medical Licensure. It sets forth that a license shall be restricted, suspended, or revoked after a due process determination that a licensee has completely failed to practice dentistry or dental hygiene with reasonable skill and safety to patients pursuant to certain criteria.

2. Criteria for falling under the provisions of the law are as follows: (a) mental illness; (b) physical illness, including, but not limited to, deterioration through the aging process, or loss of motor skill; and (c) excessive use or abuse of drugs, including alcohol.

3. A licensee, based on reasonable cause, will be referred to an examining committee designated by the Board. The examining committee shall be composed of at least two (2) practicing dentists, three (3) practicing physicians, and shall include at least one (1) psychiatrist, if a question of mental illness is involved. The examining committee may require an independent mental or physical examination, if deemed necessary, and will report all findings to the Board for further action, if necessary. Licensees are granted the right to have a physician, etc., of their choosing present, as well, at any examination and to have that physician make a report to the Board.

4. Unless beyond a licensee's control, his/her failure to comply with any such examination shall be reported to the Board and will be grounds for his/her license to be suspended until the licensee reports for the required examination.

5. A licensee may request restrictions on his/her license, and the Board may attach additional conditions, if it deems necessary.

6. Once the examining committee's findings are reported to the Board, the Board may take whatever action (no action, suspension, restriction, revocation, etc.) it deems necessary based on the committee's report. Also, if a licensee does not agree with the examining committee's recommendations, he/she may request a formal hearing before the Board. The act also sets forth the provisions for conducting such hearings which are similar to those outlined for accusations and notices of hearings in Miss. Code Ann. § 73-9-63.

7. Neither the record of the hearing nor any order entered against a licensee may be used against him/her in any other legal proceedings except upon judicial review.

8. Should someone have his/her license restricted, suspended, or revoked, the licensee may petition at reasonable intervals to have any restrictions, etc., imposed by the Board lifted. The licensee will be referred to an examining committee, and the committee will make a written report of its findings to the Board. The Board will make its determination based on these findings.

9. The licensee may appeal any Board decision to the Chancery Court of the county of residence pursuant to the appeals process found in Miss. Code Ann. § 73-9-65.

10. Any member of the examining committee, the Board, or anyone providing information to the committee, without malice and with a reasonable belief that the action taken is warranted, shall be immune from civil liability.

Equal Treatment of Licensees

During the 2000 Legislative Session, the Legislature passed language which ultimately affects all health care regulatory boards stipulating that no state board or agency that licenses health care providers shall promulgate or enforce any rule or regulation affecting the practice of its licensees that does not apply equally to the practice of all of its licensees. This section applies to all rules and regulations promulgated and implemented by those boards or agencies both before and after July 1, 2000.

Board member, Catherine L. Gatewood, R.D.H., grading patients during the 2000 dental hygiene licensure examination.

☛ ☛ ☛ ☛ 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 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 that filing date.

As a regular feature of the Dental Digest, the MSBDE from time-to-time highlights certain regulations that have been amended/enacted. Since December 1997, the Board has amended Regulations 3, 13, 14, 27, 37, 41, 43, 47, and 49, and all of these regulations are reprinted herein in their entirety. A brief synopsis of all amendments appears before each regulation. A fee of $10.00 per copy is charged for bound copies of the Mississippi Dental Practice Act and the Board's rules and regulations; however, copies of individual regulations may be obtained by calling or writing the Board's office.

BOARD REGULATION NUMBER 3
REGULATION OF INDIVIDUALS
WITH LESS THAN FULL LICENSURE

This regulation was amended at the Board's 12/10/99 meeting to reflect that students in Mississippi ADA-accredited dental and dental hygiene schools may participate in externship programs in private dental offices.

All students, interns, externs, residents, faculty, staff, or others who engage in the practice of dentistry or dental hygiene in colleges, universities, or institutions, and who may be privileged to practice with less than full regular licensure are subject to all other provisions of the acts regulating the practice of

dentistry or dental hygiene in the State, including the rules and regulations promulgated by the Board.

Pursuant to authority granted by Miss. Code Ann. §73-9-3(7), dental or dental hygiene students are hereby authorized to practice under the supervision of instructors in any dental school, college, or dental department of any school, college, or university, or school of dental hygiene recognized by the Board, provided that if such supervised practice is conducted in a private clinic, the following additional requirements shall apply:

1. The local dentist(s) who have agreed to supervise the dental or dental hygiene students must be designated as adjunct instructors of the dental or dental hygiene school.

2. The activities of the dental or dental hygiene students shall not be carried on for profit.

3. Only final-semester dental or dental hygiene students, enrolled full-time during a regular spring or fall semester, and in good standing, shall be eligible for supervised practice at a private dental clinic.

Regulation Three adopted by the Mississippi State Board of Dental Examiners prior to 1975; amended September 25, 1992; amended December 10, 1999.

BOARD REGULATION NUMBER 13
PROCEDURES NOT DELEGATED TO AUXILIARY PERSONNEL

This regulation was amended at the Board's 09/18/98 meeting to reflect that licensed Mississippi dentists may not delegate to any dental assistants in their employ "periodontal screening and probing, or subgingival exploration for hard and soft deposits and sulcular irrigations." This regulation also was amended at the Board's 10/22/99 meeting to reflect that the placement of periodontal treatment agents may be performed by licensed Mississippi dental hygienists.

Purpose: Pursuant to the provisions of Miss. Code Ann. §§ 73-9-3 ¶ 9, 73-9-5, and 73-9-13, to further determine procedures which require the professional judgement and skill of a dentist and which, as such, may not be delegated to auxiliary personnel. Therefore, the following procedures may not be delegated to auxiliary personnel.

1. Periodontal screening and probing, or subgingival exploration for hard and soft deposits and sulcular irrigations to dental assistants and/or dental hygienists not licensed by the State of Mississippi; may be performed by licensed Mississippi dental hygienists.

2. The use of ultrasonic and/or sonic instruments to dental assistants and/or dental hygienists not licensed by the State of Mississippi; may be performed by licensed Mississippi dental hygienists.

3. The use of hand scalers other than in the removal of cement to dental assistants and/or dental hygienists not licensed by the State of Mississippi; may be performed by licensed Mississippi dental hygienists.

4. The taking of any impression of the human mouth or oral structure that will be used in the restoration, repair, or replacement of any natural or artificial teeth or for the fabrication or repair of any dental appliance. The Board has further determined that impressions for study models and opposing models, and the construction, adjustment, and cementation of temporary crowns (temporary means crowns placed while permanent restoration is being fabricated) do not require the professional judgement and skill of a dentist and may be delegated to competent dental auxiliary personnel in accordance with § 73-9-3.

5. The placement or cementation of inlays, permanent crowns, fixed bridges, removable bridges, partial dentures, or full dentures.

6. The equilibration or adjustment of occlusion on natural or artificial dentition, restoration, or sealants.

7. The activation or adjustment of orthodontic appliances.

8. Injections of drugs, medication, or anesthetics by those not authorized by Mississippi law to administer such agents.

9. Performing pulp capping, pulpotomy and other endodontic therapy.

10. Intraoral restorative procedures.

11. Placement of any subgingival medicated cords. However, the placement of periodontal treatment agents may be performed by licensed Mississippi dental hygienists.

Regulation Thirteen adopted by the Mississippi State Board of Dental Examiners on September 9, 1976; amended December 17, 1976; amended April 27, 1977; amended September 4, 1988; amended September 25, 1992; amended June 1, 1993; amended July 30, 1993; amended March 8, 1996; amended September 18, 1998; amended October 22, 1999.

BOARD REGULATION NUMBER 14
CANDIDATE PARTICIPATION IN LICENSURE EXAMINATION

This regulation was amended at the Board's 01/22/99 meeting to note that participation in any "re-take" examination is not counted as an "additional" time the candidate has taken the licensure examination.

Any candidate for licensure to practice dentistry or dental hygiene in the State of Mississippi will be allowed to take the State licensure examination twice. If the candidate fails the Board for the second time, then, in the case of a candidate for licensure to practice dentistry, the candidate must take and successfully complete one (1) academic year of clinical training in an approved dental school before being allowed to take the examination for the third, and final, time. In the case of a candidate for licensure to practice dental hygiene, the candidate must take and successfully complete six (6) months of clinical training in an approved dental hygiene school before being allowed to take the examination for the third, and final, time. These requirements do not pertain to candidates who participate in Board-approved and scheduled re-take licensure examinations; inasmuch as, the Board does not consider the re-take examinations as separate annual licensure examinations.

Regulation Fourteen adopted by the Mississippi State Board of Dental Examiners on March 10, 1978; amended January 17,

1985; amended January 19, 1990; amended September 13, 1991; amended September 25, 1992; amended January 22, 1999.

BOX SCORE
1,451 Dentists
218 Specialists
957 Dental Hygienists
1,756 Radiology Permits

BOARD REGULATION NUMBER 27
EXAMINATION REVIEW PROCEDURES

This regulation was amended at the Board's 01/22/99 meeting by adding items 9 and 10 stipulating that candidates must notify the Board in writing within 45 days of the examination if they wish to participate in the "re-take" examination, and they must note whether they wish to appeal their scores and/or participate in the re-take examination at this time. Also, scores on re-take examinations may not be appealed.

1. Each individual who takes the practical examination for licensure as a dentist or dental hygienist and does not pass the examination shall be provided with copies of his/her individual "overall grade sheet" upon notification of his/her failure of the examination. In addition, the failing candidate shall be provided with a copy of this regulation so that he/she will be fully advised of the review procedure.

2. If the failing candidate desires to see his/her failing criteria, he/she may make a written request for such information from the Board office.

3. If a failing candidate desires to request a review by this Board of his/her examination results, he/she must file a written request for review within forty-five (45) days of the date of the notice of the failure of examination. The request must be in writing, sent by certified mail, return receipt requested, and must be received in the Board office at Suite 100, 600 East Amite Street, Jackson, Mississippi 39201-2801, on or before 5:00 o'clock p.m. on the 45th day.

4. The written request for review by the Board must state with sufficient clarity the reasons why the applicant feels the results of the examination should be changed. If the Board determines that the request for review does not adequately state the reasons for review, the Board may either dismiss the review or request additional information from the candidate, and the Board may extend the forty-five (45) day deadline mentioned above in order to permit elaboration by the candidate.

5. Upon receipt of the written request for review, the Board may conduct a review of the examination results and the written request for review in a closed session. This closed session review by the Board may be conducted at a time and place to be determined by the Board in its complete discretion.

6. If the candidate requests, an informal conference will be scheduled by the Board. The informal conference may occur in closed session at a regularly scheduled Board meeting and may be attended by the individual board members attending the meeting, the Board's legal counsel or a representative of the Attorney General's office, and the candidate. The candidate may choose to be represented by counsel, however, counsel for the candidate will not be permitted to engage in discussions with the Board. Counsel for the candidate may advise the candidate, but any questions propounded by the Board to the candidate are to be answered by the candidate. The candidate will be afforded the opportunity to discuss his or her examination results with the Board, but the board will not be required to answer any questions propounded by the candidate.

7. The burden will be on the candidate to show substantial cause why the results should be changed. The board will consider the following to be adequate reasons for modification of examination results:

   a. A showing of significant procedural error in the examination process;
   b. Evidence of bias, prejudice, or discrimination in the examination process;
   c. Other significant errors which result in substantial disadvantage to the candidate.

8. After the Board has reviewed the examination results and the application for review, or after an informal conference with the candidate, the Board may retire to render its decision in closed session or it may decide that it wants to investigate further. Thereafter, the Executive Secretary of the Board shall communicate the Board's decision to the candidate. Unless the Board decides to investigate further, any decision of the Board will be final.

9. In addition to requesting a review of examination scores, candidates who failed the initial licensure examination and who qualify for participation in a Board-approved and scheduled re-take licensure examination, may file a written request to participate in the re-take examination within forty-five (45) days from the date of the notice of failure of the examination. The request must be in writing, sent by certified mail, return receipt requested, and must be received in the Board office at Suite 100, 600 East Amite Street, Jackson, Mississippi 39201-2801, on or before 5:00 o'clock p.m. on the 45th day. The examination manual for that year's licensure examination will contain criteria for participating in and successfully completing the re-take examination.

10. The failing candidate shall make the decision whether to (a) file written requests for a review of examination scores and for participation in the re-take examination; (b) file a written request for a review of examination scores; or (c) file a written request for participation in the re-take examination. Candidates who fail the re-take examination may not appeal the results of that examination; however, they may apply for the next regularly scheduled licensure examination.

Regulation Twenty-Seven adopted by the Mississippi State Board of Dental Examiners on June 4, 1987; amended September 25, 1992; amended September 20, 1996; amended January 22, 1999.

BOARD REGULATION NUMBER 37
FEE SCHEDULE

This regulation was amended at the Board's 01/23/98 meeting to reflect (1) new fees for dental licensure examination applications, (2) fees for licensure examination packets, and (3) that, in addition to dentists and dental hygienists, anyone who gains a radiology permit within ninety (90) days prior to July 1 each year may have the permit renewal fee for that year count

toward the upcoming renewal period. This regulation also was amended at the Board's 05/29/98 meeting to reflect an increase in licensure renewal fees. Additionally, this regulation was amended at the Board's 05/12/00 meeting to add provisions for an annual renewal assessment to be transmitted directly to the Mississippi Recovering Dentists Program and to note that ALL licensees must pay this renewal assessment, regardless of age.

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	$400.00
Application for dental license through credentials	$2,000.00
Application for dental specialty license	$200.00
Application for dental institutional, teaching, or provisional license	$25.00
Application for dental hygiene license	$200.00
Application for dental hygiene license through credentials	$500.00
Application for dental hygiene institutional, teaching, or provisional license	$25.00
Application for general anesthesia permit	$200.00
Application for IV sedation permit	$200.00
Application for radiology permit	$40.00
Annual dental license renewal	$150.00
Annual dental specialty license renewal	$75.00
Annual dental institutional, teaching, or provisional license renewal	$150.00
Annual dental hygiene license renewal	$75.00
Annual dental hygiene institutional, teaching, or provisional license renewal	$75.00
Annual general anesthesia permit renewal	$100.00
Annual IV sedation permit renewal	$100.00
Annual radiology permit renewal	$20.00
Penalty for delinquent renewal of dental licenses; dental specialty licenses; and dental institutional, teaching, and provisional licenses	
September 1 - September 30 (plus annual renewal fee)	$50.00
October 1 - October 31 (plus annual renewal fee)	$100.00
November 1 - November 30 (plus annual renewal fee)	$150.00
Penalty for delinquent renewal of dental hygiene licenses and dental hygiene institutional, teaching, and provisional licenses	
September 1 - September 30 (plus annual renewal fee)	$25.00
October 1 - October 31 (plus annual renewal fee)	$50.00
November 1 - November 30 (plus annual renewal fee)	$75.00
Penalty for delinquent renewal of radiology permits	
September 1 - September 30 (plus annual renewal fee)	$20.00
October 1 - October 31 (plus annual renewal fee)	$40.00
November 1 - November 30 (plus annual renewal fee)	$60.00
Annual Impaired Practitioner Renewal Fee	$20.00
Penalty for non-notification of change of address	$10.00
Penalty for duplicate renewal forms and certification cards	$10.00
Duplicate or replacement license or permit	$20.00
Certified copy of license or permit	$20.00
Certification of licensure status	$20.00
Handling fee for non-sufficient funds check	$50.00
Requests for database information	
Labels and printouts	$125.00
Diskettes	$150.00
Radiology examinations administered in Board's office	$25.00
Dental and dental hygiene licensure examination manuals	$15.00
Dental and dental hygiene licensure by credentials packets	$10.00
Laws and/or regulations	
One copy	$10.00
Additional copies (per copy)	$5.00
Disciplinary action orders (per copy)	$5.00
Newsletters (per copy)	$2.50

The payment of the annual renewal fee by any dentist or dental hygienist who receives a Mississippi license by credentials, or by any dental assistant who receives a Mississippi radiology permit, within the ninety-day (90-day) period prior to July 1 each year, shall satisfy the annual renewal fee requirements for the renewal period during which licensure or permit status was granted and for the upcoming renewal period beginning July 1 of that current year. The payment of the annual renewal fee for impaired licensees is mandatory for all licensed dentists, including licensees over the age of seventy (70).

Board Regulation Thirty-Seven adopted by the Mississippi State Board of Dental Examiners on September 25, 1992; amended December 8, 1995; amended October 4, 1996; amended May 27, 1997; amended January 23, 1998; amended May 29, 1998; amended May 12, 2000.

BOARD REGULATION NUMBER 41
CONTINUING EDUCATION

This regulation was amended at the Board's 09/18/98 meeting to reflect that continuing education credit may be given for attendance at the business portions of annual and district meetings for all organizations listed in Sections 2 and 3.

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 American Dental Association (ADA), Academy of General Dentistry (AGD), Mississippi Dental Association (MDA), Mississippi Dental Society (MDS), National Dental Association (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, and licensees successfully completing an 8-hour ACLS course, a Board-approved general anesthesia review course, or an equivalent Board-approved course, may use four (4) hours each year, of the total eight (8) 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 Mississippi Dental Hygienists' Association (MDHA), American Dental Hygienists' Association (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, and licensees successfully completing an 8-hour ACLS course, a Board-approved general anesthesia review course, or an equivalent Board-approved course, may use four (4) hours each year, of the total eight (8) hours, toward fulfilling the two-year, twenty-hour CDE requirement.

4. In addition to the providers listed in Sections 2 and 3 above, ADA-accredited dental, dental hygiene, and dental assisting teaching institutions may offer programs, seminars, or courses for dentists and dental hygienists as a means of fulfilling continuing education requirements. Prior to offering dental and dental hygiene continuing education programs, seminars, or courses, these institutions must request approval or sponsorship from the providers listed in Sections 2 and 3 above, or from the Board on a course-by-course basis. Approval or sponsorship of these programs, seminars, or courses must be clearly noted on seminar, program, or course brochures and all certificates of completion.

5. 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. Continuing education credit will be given for attendance at the business sessions of state and district meetings for those providers listed in Sections 2 and 3 above.

6. 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.

7. 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.

8. 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.

9. Each dentist or dental hygienist shall certify on the annual renewal form his or her compliance with the continuing education requirements stipulated herein.

10. 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.

11. The following disciplinary actions will be taken against dentists not meeting the requirements set forth in item number 10 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.

12. The following disciplinary actions will be taken against dental hygienists not meeting the requirements set forth in item number 10 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.

13. 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.

14. Any dentist or dental hygienist requesting reinstatement of a license which was voided for a failure to re-register or which was revoked must, within the previous twelve (12) months prior to requesting licensure reinstatement, be current in cardiopulmonary resuscitation and have acquired twenty (20) and ten (10) hours of continuing education, respectively.

15. The continuing education requirements outlined herein do not pertain to radiology courses/seminars or the mandatory radiologic safety courses and continuing education as required by Miss. Code Ann. §§ 41-58-1, 41-58-3, and 41-58-5, and all radiology course offerings require such prior approval as that delineated in Board Regulation 25.

Regulation Forty-One adopted by the Mississippi State Board of Dental Examiners December 4, 1992; amended February 5, 1993; amended August 27, 1993; amended July 29, 1994; amended April 21, 1995; amended September 22, 1995; amended December 8, 1995; amended February 9, 1996; amended August 23, 1996; amended November 8, 1996; amended March 7, 1997; amended September 18, 1998.

District 4 Board Member
Mark H. Kennedy, D.D.S.
Appointed 07/01/99

BOARD REGULATION NUMBER 43
ADVERTISING

This regulation was amended at the Board's 08/27/99 meeting to reflect a re-wording of the required advertising disclaimer in Section VI.G., as follows: "No representation is made that the quality of the dental services to be performed is greater than the quality of dental services performed by other dentists."

Purpose: To regulate advertising in order to protect consumers and maintain standards among licensed professionals, and to carry out this duty the Board must necessarily impose reasonable restrictions.

I. **Name of Dental Facility**. Since the name under which a dentist conducts his or her practice may be a factor in the selection process of the patient, and use of a trade name or an assumed name that is false or misleading in any material respect is unethical, a dentist may practice in a dental facility which uses any of the following names:

   A. The name of the dentist as it appears on his or her license and renewal certificate; or

   B. The name of a dentist who employs him or her and practices in the same facility; or

   C. A partnership name composed of the name(s) of one or more dentists practicing in the same facility; or

   D. A corporate name composed of the name(s) of one or more of the dentists practicing as employees of the corporation in the same facility; or

   E. A fictitious name, if the conditions set forth in subsection II of this Regulation are fulfilled.

II. **Fictitious Name**. Dentists licensed in the State of Mississippi who practice as individuals, partnerships, professional corporations, associations, or other group practices may use a fictitious or corporate name for the facility in which they conduct their practice if the following conditions are met:

   A. Each fictitious or corporate name shall be registered with the Board by any licensed dentist(s), who must be associated with the dental facility and who shall assume responsibility for compliance with the section. Each fictitious or corporate name must be approved by the Board prior to the use of the name. Names which in the judgment of the Board are false, misleading, or deceptive will be prohibited.

   B. Each fictitious name must list the family name(s) of the applying and responsible dentist(s).

   C. It is the obligation of each licensed dentist who works in a facility that utilizes a fictitious or corporate name to notify the Board in writing of the same.

   D. All advertisements including, but not limited to, signage, printed advertisements, and letterheads shall contain the name, as it appears on his or her license and renewal certificate, degree (D.M.D. or D.D.S.), and, if qualified, a specialty recognized by the American Dental Association of at least one licensed dentist who is associated with the dental facility and who shall, in conjunction with the licensed dentist referred to in subsection A., assume responsibility for the advertisement.

   E. In the entrance or reception area of the dental office, a chart or directory listing the names of all dentists practicing at that particular location shall be kept at all times prominently and conspicuously displayed.

   F. The names of all dentists who practice under the fictitious or corporate name shall be maintained in the records of the dental facility for five (5) years following the departure of any individual from the practice.

G. Fictitious names previously approved and registered with the Board will be considered as being in compliance with these Rules and Regulations.

H. A dentist may practice in a predominantly medical facility that uses a fictitious name.

III. **Name of Record**. Subsequent to the administration of dental service, the dentist of record shall place his or her name in the record of the patient following a description of the service rendered. If the treatment is rendered by a dentist other than the dentist of record or by a dental hygienist, the name of that person shall be placed in the record of the patient. For advertising purposes only, use of the name of a dentist no longer actively associated with the practice may be continued for a period not to exceed one (1) year. However, subsequent to the administration of dental service, it is not necessary for a dentist of record who is a sole practitioner to place his or her name in the record of the patient following a description of the service rendered.

IV. **Approval or Rejection of a Corporate Name/Trade Name**.

A. The Mississippi State Board of Dental Examiners shall notify the party submitting a proposed corporate name/ trade name within sixty (60) days after submission as to the approval or rejection of the proposed name.

B. If the proposed name is rejected, the party submitting the name shall have fifteen (15) days from receipt of the notice of the rejection to request an appearance before the Board for reconsideration of the Board's rejection. The Board shall notify the party seeking reconsideration of a rejected corporate name/trade name of its decision within thirty (30) days after the party's appearance before the Board.

V. **Specialties**. The only recognized specialties of dental practice in Mississippi as defined by the Mississippi State Board of Dental Examiners are as follows:

A. **Dental Public Health**. Dental public health is the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. It is that form of dental practice which serves the community as a patient rather than the individual. It is concerned with the dental health education of the public, with applied dental research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis. (Adopted May 1976, American Dental Association.)

B. **Endodontics**. Endodontics is the branch of dentistry which is concerned with the morphology, physiology, and pathology of the human dental pulp and periradicular tissues. Its study and practice encompass the basic and clinical sciences including biology of the normal pulp, the etiology, diagnosis, prevention, and treatment of diseases and injuries of the pulp, and associated periradicular conditions. (Adopted December 1983, American Dental Association.)

C. **Oral and Maxillofacial Pathology**. Oral pathology is the specialty of dentistry and discipline of pathology that deals with the nature, identification, and management of diseases affecting the oral and maxillofacial regions. It is a science that investigates the causes, processes, and effects of these diseases. The practice of oral pathology includes research and diagnosis of diseases using clinical, radiographic, microscopic, biochemical, or other examinations. (Adopted May 1991, American Dental Association.)

D. **Oral and Maxillofacial Surgery**. Oral and maxillofacial surgery is the specialty of dentistry which includes the diagnosis, surgical, and adjunctive treatment of diseases, injuries, and defects involving both the functional and aesthetic aspects of the hard and soft tissues of the oral and maxillofacial region. (Adopted October 1990, American Dental Association.)

E. **Orthodontics and Dentofacial Orthopedics**. Orthodontics is that area of dentistry concerned with the supervision, guidance, and correction of the growing or mature dentofacial structures, including those conditions that require movement of teeth or correction of malrelationships and malformations of their related structures and the adjustment of relationships between and among teeth and facial bones by the application of forces and/or the stimulation and redirection of functional forces within the craniofacial complex. Major responsibilities of orthodontic practice include the diagnosis, prevention, interception, and treatment of all forms of malocclusion of the teeth and associated alterations in their surrounding structures; the design, application, and control of functional and corrective appliances; and the guidance of the dentition and its supporting structures to attain and maintain optimum occlusal relations in physiologic and aesthetic harmony among facial and cranial structures. (Definition adopted December 1980 and Designation adopted October 1994, American Dental Association.)

F. **Pediatric Dentistry**. Pediatric dentistry is an age-defined specialty that provides both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs. (Adopted 1995, American Dental Association.)

G. **Periodontics**. Periodontics is that specialty of dentistry which encompasses the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function, and aesthetics of these structures and tissues. (Adopted December 1992, American Dental Association.)

H. **Prosthodontics**. Prosthodontics is that branch of dentistry pertaining to the restoration and maintenance of oral functions, comfort, appearance, and health of the patient by the restoration of natural teeth and/or the replacement of missing teeth and contiguous oral and maxillofacial tissues with artificial substitutes. (Adopted May 1976, American Dental Association.)

VI. **Fraudulent, Misleading, or Deceptive Advertising**.

A. For purposes of Miss. Code Ann. § 73-9-61, "advertising" shall include any information communicated in a manner designated to attract public attention to the practice of the licensee.

B. A dentist may provide information regarding himself or herself, his or her practice, and fixed fees associated

with routine dental services in various forms of public communications. These communications include, but are not limited to, the following:

1. Newspapers;
2. Magazines;
3. Yellow Page directories;
4. Consumer directories;
5. Outdoor advertising;
6. Radio advertising;
7. Television advertising;
8. Electronic bulletin board systems; or
9. Comparable written publications or broadcast advertising.

The dentist shall have the ultimate responsibility for all advertisements which are approved by that dentist and his or her agents or associates.

C. A dentist must disclose the fact of giving compensation or anything of value to representatives of the press, radio, television, or other communicative medium in anticipation of or in return for any advertisement (e.g., a newspaper article) unless the nature, format, or medium of such advertisement make the fact of compensation apparent.

D. Advertising may include, but is not limited to, the following information:

1. The dentist's title or degree or designation of any special area of dental practice recognized by the American Dental Association in which the dentist has met the existing educational requirements or standards for that recognized specialty;

2. Office and telephone answering hours, office location, office telephone number, residence address, and residence telephone number; and

3. Fees for a specific dental service if it is performed frequently in the dentist's practice, is usually provided at a specific fee to substantially all patients receiving the service, and is provided with little or no variance in technique or materials.

E. The following requirements shall be met when advertising a specific dental service:

1. If a range of fee is advertised (including the use of words such as "from," "as low as," or "starting at"), the minimum and maximum fees shall be fully disclosed.

2. Consultation, treatment planning, or treatment for any dental service advertised for a specific fee must be made available for a minimum of sixty (60) days following the last day of publication or broadcast of that fee or for any shorter period of time if clearly specified in the advertisement.

3. When a dental service is advertised as "free," "no charge," "without charge," or the like, such service must be made available at no cost for a minimum of sixty (60) days following the date of the last publication or broadcast of such free service or for any shorter period of time if clearly specified in the advertisement.

4. When a patient accepts the treatment plan for a dental service which was advertised by the dentist, any subsequent dental service which is reasonably and foreseeably related to the advertised service must be provided without additional charge, unless the advertisement for the dental service includes the following statement: ***"Additional charges may be incurred for related services which may be required in individual cases."*** The point size of the disclaimer for any written communication or advertisement must be the same point size as the majority of the letters in such written communication or advertisement, and the point size of the disclaimer for any videotaped or television communication or advertisement must be no smaller than 13 point. The disclaimer for any videotaped or television communication or advertisement must be run throughout the entire broadcast. Any public communication through an electronic medium (e.g., radio communications) shall contain such statement at a time and in a clearly audible tone and manner so as to convey the required information to the listener or viewer.

F. The following statements in advertising shall be deemed to be misleading to the public for purposes of this rule:

1. Statements claiming superiority of a particular method of treatment, material, drug, or appliance.

2. Statements that a certain dentist is a specialist or specializes in any branch of dentistry, unless that specialty is recognized by the American Dental Association and the Mississippi State Board of Dental Examiners and the dentist has met the existing educational requirements and standards for that recognized specialty. This includes membership in an organization that has not been recognized by the American Dental Association. If there is any question regarding this rule, the dentist should seek prior approval from the Mississippi State Board of Dental Examiners.

3. Statements such as "quality dentistry," "quality work," "staff of skilled dentists," "skilled employees," or reference to uncertified or unlicensed persons performing functions requiring a license under Miss. Code Ann. § 73-9-1, et al.

4. Statements of superior facilities at a certain office; statements that an office is "scientifically equipped" and/or has the "latest modern equipment"; references to "modern offices," "modern methods," or "modern devices"; and other similar expressions.

5. Statements that a dental operation or treatment can be performed without causing any pain.

6. Advertisements that contain the words "General Dentistry" and "Family Dentistry" in the same advertisement.

G. General dentists who list any services performed must place a disclaimer. The public communication must include immediately after the listing of services the following statement: ***"No representation is made that the quality of the dental services to be performed is***

greater than the quality of dental services performed by other dentists. " The point size of the disclaimer for any written communication or advertisement must be the same point size as the majority of the letters in such written communication or advertisement, and the point size of the disclaimer for any videotaped or television communication or advertisement must be no smaller than 13 point. The disclaimer for any videotaped or television communication or advertisement must be run throughout the entire broadcast. Any public communication through an electronic medium (e.g., radio communications) shall contain such statement at a time and in a clearly audible tone and manner so as to convey the required information to the listener or viewer.

H. Specialists may list only specialties for which they are licensed in the State of Mississippi. Specialists may list services performed but not that an individual specializes in such services.

I. In-person and telephone solicitations of dental patients by a dentist or his agent poses an inherent danger to the public because such advertising cannot be supervised, may exert pressure on the prospective patient, and often demands an immediate response without affording the prospective patient an opportunity for comparison or reflection. Unlike an advertisement appearing in print or through a broadcast medium (e.g., television or radio), in-person and telephone solicitations do not simply provide information and leave the recipient free to act or not, but is ripe with the potential for overbearing persuasion. Accordingly, in-person and telephone solicitations of dental services by a dentist or his agent is strictly prohibited.

Regulation Forty-Three adopted by the Mississippi State Board of Dental Examiners on February 5, 1993; amended April 21, 1995; amended May 30, 1995; amended March 8, 1996; amended December 6, 1996; amended March 7, 1997; amended August 27, 1999.

BOARD REGULATION NUMBER 47
LICENSURE BY CREDENTIALS

This regulation was amended at the Board's 01/23/98 meeting to amend Section 5 to reflect that all of a candidate's years of participation in an approved residency program may be used toward fulfilling the minimum five-year, active practice requirement stipulated by Miss. Code Ann. § 73-9-24(1)(a).

Purpose: To establish standards for licensure by credentials not included in Miss. Code Ann. § 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 year from the date the application for licensure by credentials is received by the Board 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 all of a candidate's years of participation in an approved residency program may be used toward fulfilling 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 adopted by the Mississippi State Board of Dental Examiners May 6, 1994; amended September 9, 1994; amended December 8, 1995; amended March 8, 1996; amended August 23, 1996; amended January 23, 1998.

DENTAL FEE REIMBURSEMENT RATE CHANGE

HB1332, approved during the 1999 Legislative Session, provides for the Division of Medicaid to increase all dental fees by 160% of the reimbursement rate that was in effect June 30, 1999. It is the intent of the Legislature to encourage more dentists to participate in the Medicaid program.

BOARD REGULATION NUMBER 49
ACTIVE STATUS

This regulation was amended at the Board's 05/12/00 meeting to add Section 4 which stipulates clinical assessment requirements for "inactive" licensees who have not actively practiced their profession for three (3) or more years.

Purpose: To define what constitutes actively practicing three (3) months in the State of Mississippi pursuant to Miss. Code Ann. § 73-9-19 ¶ 4; and to set forth the other information which may be required by the Board when considering eligibility of a dentist or dental hygienist on the "inactive" list for registration on the "active" list pursuant to Miss. Code Ann. § 73-9-19 ¶ 6.

1. Miss. Code Ann. § 73-9-19 ¶ 4 stipulates that dentists and dental hygienists must actively practice their respective professions for at least three (3) months of the immediately preceding license renewal period to be considered in active practice.

2. The Mississippi State Board of Dental Examiners has defined three (3) months to mean that a dentist or dental hygienist must actively practice dentistry or dental hygiene in the State of Mississippi a minimum of one (1) day per month for any three (3) months during the preceding license renewal period to remain on active status with the Board. Otherwise, dentists and dental hygienists will be listed as inactive.

3. As noted in Miss. Code Ann. § 73-9-19 ¶ 3, dentists and dental hygienists actively practicing in another state at a veterans hospital, federal government facility, or residency graduate school program at the time of renewal shall be listed as active.

4. When a dentist or dental hygienist, registered on the "inactive" list, seeks return to the "active" list, the Board, in addition to the written application required by § 73-9-19, may request other information as deemed necessary on an individual basis. If the dentist or dental hygienist has not practiced dentistry or dental hygiene for a period of three (3) or more years preceding the request for registration on the active list, the Board may require the applicant to submit to a clinical competency assessment administered either by the Board or other institution capable of administering such an assessment. The length and areas of testing shall be left to the discretion of the Board, and determined based on the individual needs and circumstances of each applicant. All costs attributable to the assessment shall be the responsibility of the applicant.

Regulation Forty-Nine adopted by the Mississippi State Board of Dental Examiners on March 8, 1996; amended May 12, 2000.

THINGS TO NOTE

✔ Remember that annual license renewal for the 2000-2001 renewal period begins July 1, 2000 and runs through August 31, 2000. This renewal covers **DENTAL LICENSES, SPECIALTY LICENSES, DENTAL HYGIENE LICENSES, GENERAL ANESTHESIA PERMITS, IV SEDATION PERMITS, AND RADIOLOGY PERMITS.** Note this very important date on your calendar, and please ensure the Board receives name, address, employer, and telephone number changes no later than June 27, 2000. If you do not receive a renewal notice by July 15, 2000, you should immediately contact the Board's office to avoid a possible penalty assessment.

✔ Whenever a dentist, dental hygienist, or dental assistant changes employers, that individual should notify the Board immediately upon assuming a position with another dentist. Also, please remember that if a dentist, dental hygienist, or dental assistant moves out-of-town and accepts another position with a dentist, the Board should be notified of the new home address, mailing address, home telephone number, office telephone number, and the name of the employing dentist(s).

✔ When a dentist interviews prospective dental hygienists or dental assistants, he/she should require that the dental hygienist or dental assistant present a **CURRENT CERTIFICATION CARD** indicating that the individual is either fully licensed to practice dental hygiene or that the individual has a current permit to administer radiographs. All licenses/permits are renewed on an annual basis, and the Board has found that some licensees or permit holders have attempted to gain positions or continue to work for dentists when these licensees or permit holders no longer have current and valid licenses/permits. Do not just ask to see a license or permit; always ask to see the current certification card, which is a small white card, or ask to see the individual's small white wallet certification card. Also, you may access the Board's databases via its web site (www.msbde.state.ms.us), and determine if a prospective employee (dental, dental hygiene, or radiology permit) has a currently renewed license or permit.

✔ Board Regulation 25 requires that applications for radiology permits be submitted within ninety (90) days of successfully completing a Board-approved radiology seminar. Therefore, seminar attendees must ensure that these applications are received by the Board in a timely manner; otherwise, the individual may be required to attend another Board-approved radiology seminar.

✔ Certification in Cardiopulmonary Resuscitation (CPR) must remain current at all times and not allowed to lapse, even for one day, because the licensee would at that point be in violation of Board Regulation 45. As such, please note the expiration date of your CPR certification and ensure that the certification does not lapse. Also, a CPR card should note the certification date and the expiration date, as well as the signature of the course instructor.

✔ The scoring process for the annual dental and dental hygiene licensure examinations has changed to a criteria-based scale of 0-5, and each procedure criterion has been assigned a percentage weight based on its importance to the overall procedure. Also, candidates are required to pass ALL examination procedures before being issued a license, even if they make an overall passing score on the examination. For those individuals who do not pass ALL procedures, i.e., no more than three (3) procedures, a re-take examination is now being administered within ninety (90) days of the initial examination.

✔ Did you know that your office's web site may be considered a form of advertising? Web sites are covered under the guidelines of Board Regulation 43, Section VI.B. Remember, if you place anything on your web site which is intended to attract new patients or describe your services rendered, this is considered as "advertising." We recommend that you send your web site address to the Board so that the Board may determine if your web site is solely for informational or educational purposes, or whether you are using your web site as an advertising mechanism.

✔ Board Regulation 53 deals with patient records and, in part, what the Board expects to be a part of a patient's record. Remember, even in this day of "totally automated" offices, the Board expects the patient's file to be "retrievable" at all times, even though the dentist may maintain his/her patient records solely on an office computer. The patient's file should consist, at a minimum, of radiographs; notes from each treating dentist; dates and types of treatment; patient health history, properly updated; any and all medications which have been administered, prescribed, or dispensed (both controlled and non-controlled medications); laboratory results; etc. Also, please remember that you may not refuse to give a patient his/her records, upon request, even if the patient has not fully paid his/her bill.

✔ Please remember that a dentist may delegate the removal of "calcareous deposits" only to currently licensed Mississippi dentists or dental hygienists (Miss. Code Ann. §73-9-3). The Board, at its March 11, 1994 meeting, defined "calcareous deposits" as "dental calculus, either supragingival or subgingival." Also, no dental assistant may administer radiographs without first having been issued a radiology permit by the Board and unless that radiology permit is current by virtue of an annual certification card. For further information regarding non-delegable procedures to dental auxiliaries, including dental hygienists, please refer to Board Regulation 13, which has been reprinted in its entirety in this newsletter. As always, feel free to contact the Board's office should a dentist, dental hygienist, or radiology permit holder have any questions in this regard. Failure to follow these guidelines may place a dentist's Mississippi license in jeopardy and subject to disciplinary action by the Board.

WHAT IS THE ANNUAL BALLOT FOR?

The Board is statutorily mandated by virtue of Miss. Code Ann. §73-9-7 (and as amended during the 2000 Legislative Session) to conduct an annual balloting of all licensed dentists and dental hygienists in the State of Mississippi to ascertain a list of the top three names (for dentists) and the top name (for dental hygienists) from each district to be used for possible appointment to the Board by the Governor. To accomplish this, the Board staff mails ballots, by district, to all licensed dentists and dental hygienists who list Mississippi as their mailing state. This ballot consists of three spaces for the licensee to nominate three dentists or dental hygienists from his/her district whom he/she feels worthy of being appointed to the Board. Names that are listed more than once on the ballot are counted only once. The Board staff compiles a list of all nominees, by district, derived from the ballots submitted by the licensees. From that list, the Board staff determines the top name(s) from each district and sends this list to the Governor for his/her use in making appointments to the Board for that particular year. Board members are appointed every four (4) years, and their terms are staggered (e.g., at no time will there be all new Board members; one to two districts each year are up for appointment, as well as the state-at-large dental and dental hygiene positions). The Governor must make his/her appointments from the list submitted by the Board office, and the Governor can make appointments only for positions that are scheduled to expire. Furthermore, should a Board member resign his/her position before his/her term expires, the Governor must appoint a replacement from the list submitted by the Board office for that particular year.

The Board office must follow stringent guidelines in connection with its balloting process. This is an extremely confidential process, and it must not be discussed or coordinated with any individual or group, inasmuch as the entire balloting process could be declared "invalid" by the Secretary of State. Also, since potential appointees must be confirmed by the Mississippi State Senate, the PEER Committee , the Legislature's investigative and auditing arm, often requests the Board office to produce its ballots for auditing purposes. Please remember that the only OFFICIAL BALLOT is the ballot which is mailed to all dental licensees from the BOARD OFFICE. Any other ballots or information you receive in connection with Board appointments is not an official ballot from the Board.

NOTES FROM THE INVESTIGATOR
By: Karen S. Wilson, MSBDE Investigator II

The Board is obligated by statute to investigate **all** complaints it receives. Approximately 100 cases are reported to the Board each year. Some cases are frivolous; others are serious, and the Board and its staff work diligently to ensure that all parties involved are treated fairly based on a careful, thorough investigation of the facts. A few of the most common violations are refusing to release patient records, prescribing drugs outside the course of legitimate professional practice, advertising that violates the Board's advertising rules and regulations, and being chemically impaired.

Patient Records

The NUMBER ONE complaint from patients concerns the release of dental records. This issue has been addressed by both the Board in Board Regulation Number 53 and the American Dental Association (ADA) in its Principles of Ethics and Code of Professional Conduct. Patients who request copies of their records shall be provided such copies, including radiographs, at no cost to the patient or, at a minimum, only the cost the dentist incurs in reproducing these records for the patient. **This obligation exists regardless of the patient's account being paid in full.**

Substance Abuse

By far, the biggest issue with which the Board contends is substance abuse by dentists and dental hygienists. This is considered the most urgent complaint and is acted upon immediately. Many changes are taking place to ensure that a dentist battling a substance abuse problem will have every opportunity to combat the problem without disciplinary action by the Board or without being exiled from the dental community. It is the hope that the new policies being enacted will encourage dentists with a substance abuse problem to come forward and seek help without dental careers being jeopardized.

Advertising

Although this issue may seem trivial to some, others are extremely concerned. The issue of advertising has been addressed in Board Regulation Number 43. The Board has recently amended this regulation and has reprinted it, in its entirety, in this newsletter. Also, advertising has been discussed in the newsletters since 1994. This regulation seems to cause more confusion than any other; therefore, here are a few helpful points to simplify the stipulations contained in Regulation Number 43.

1. If a general dentist lists services to be performed in an advertisement, the required disclaimer must be used, e.g., cosmetic dentistry, fillings, bleaching, or TMJ. All, or one, of these items in an advertisement would necessitate the use of the advertising disclaimer in Section VI.G. of Regulation Number 43. However, please note that a dentist who lists ONLY the availability of Nitrous Oxide does not have to use the advertising disclaimer.

2. A specialist may list services pertaining only to his/her specialty, and the practice of general dentistry may not be performed or advertised by a specialist. For example, an Oral and Maxillofacial Surgeon may advertise that he/she performs wisdom tooth extractions without an advertising disclaimer.

To make this point extremely simple: **IF YOU DO NOT HAVE A SPECIALTY LICENSE FOR A SERVICE YOU PLAN TO ADVERTISE, YOU MUST HAVE THE ADVERTISING DISCLAIMER!**

Another common violation in advertising is the use of words that imply superiority over other dentists, practices, or equipment. Words such as "gentle," "caring," "state-of-the-art," "modern," "up-to-date," and "reasonable" are not permitted in advertisements. These words, and all such similar phrasing, imply that one dentist is more caring than the other, or that one dentist has state-of-the-art equipment, while the dentist next door is still using equipment from the 1930s. It is your right to advertise; however, let's be fair and professional in how we express ourselves to the public. It is the Board's right and legislatively-mandated duty to protect the public.

Prescribing Drugs

The majority of violations investigated by the Board involve some form of drugs or abuse of prescribing privileges by licensed dentists. The four major areas of concern are prescribing to employees and family members, self-prescribing, failure to chart prescriptions, and a lack of recordkeeping of "in-house" drugs.

* What do you mean I cannot prescribe to my family or employees or myself? A dentist may not prescribe any drug which does not directly relate to a dental condition. For example, a dentist may not write prescriptions for diet pills (Fen Fen), or birth control pills (Orthotricyclene), among other such drugs which are not directly related to the legitimate dental treatment of a patient.

Prescribing to Family and Employees

State law prohibits a dentist from writing prescriptions for drugs for any reason other than in the legitimate course of professional dental practice. Historically, this method of prescribing signals a more serious problem.

Self-Prescribing

As stated above, a dentist may only prescribe drugs for a legitimate dental reason. Otherwise, this practice is considered practicing medicine without a license which is another violation of state law. This also indicates that a substance abuse problem may be occurring.

Failure to Chart Prescriptions

All prescriptions, written or telephoned, must be noted in the patient chart. The Board has determined that failure to chart prescriptions constitutes, at a minimum, a violation of its patient recordkeeping regulation (Board Regulation 53) and unprofessional conduct.

Lack of Recordkeeping of "In-House" Drugs

Federal and State regulations require accountability of all drugs received and dispensed within the dental office. This includes sample drugs furnished by pharmaceutical companies. All DEA 222 forms and invoices must be maintained, as well as a bound log noting the dates shipments were received, how much was received, and to whom and how much was dispensed on a daily basis. The dispensation of any drug in the office must also be noted in the patient chart.

In summary, when in doubt CALL THE BOARD'S OFFICE. If we are unable to answer your question, we will refer the matter to the full Board at its next available meeting. However, there are very few inquiries, indeed, which the Board's staff cannot answer.

CALCAREOUS DEPOSITS: WHAT ARE THEY AND WHO CAN REMOVE THEM?

Many questions have been addressed to the Board regarding whether dental assistants may remove calcareous deposits. As we have noted in this newsletter, "calcareous deposits" are defined by the Board as "dental calculus, either supragingival or subgingival." Furthermore, Miss. Code Ann. §73-9-3 states that licensed Mississippi dentists may delegate the removal of calcareous deposits "only" to licensed Mississippi dental hygienists. The question arose as to whether licensed Mississippi dentists could delegate the removal of these deposits to other licensed Mississippi dentists. The Board's position always has been that licensed Mississippi dentists may remove calcareous deposits. However, to alleviate further concerns regarding this issue, the Board requested an "official opinion" from the Mississippi Attorney General. The following is the official opinion regarding the issue of the removal of calcareous deposits:

> It is our opinion that, reading the statute with the intent of the legislature in mind, the final sentence of the above quoted section requires that delegation of the removal of calcareous deposits can only be to other dentists or to licensed and registered hygienists; such procedures may not be delegated to less qualified personnel.

In other words, the removal of calcareous deposits of any kind whatsoever may not be delegated to dental assistants; removing these deposits can only be performed by licensed Mississippi dentists and/or dental hygienists.

ARE YOU CHEMICALLY DEPENDENT?

The following "criteria" or "checklist" for determining chemical dependency or the warning signs for chemical dependency was distributed to dentists attending the Mississippi Dental Association's annual meeting for dentists in district two. Inasmuch as many licensees could not attend this meeting and due to the critical importance of early detection of chemical dependency, the Board wanted to distribute this information to all licensees via this newsletter. Take a moment to ask yourself these very important questions.

1. Do you drink/use drugs to overcome shyness or to feel more confident?
2. Are you having money troubles because of drinking/using?
3. Do you ever stay home from work because of drinking/using?

4. Is drinking/drug abuse causing trouble in your family?
5. Have you lost a job or a business because of drinking/using?
6. Do you drink/use when you are alone?
7. Do you drink/use to escape from your problems?
8. Do you have blackouts (loss of memory of events or actions you performed that happened while drinking/using)?
9. Do you feel remorse after drinking/using?
10. Do you need a drink/drug at a definite time every day?
11. Do you drink/use in the morning?
12. Have you ever been in a hospital because of drinking/using?
13. Has a doctor ever treated you for drinking/using?
14. Do you make promises to yourself or others about your drinking/using?
15. Do you have to keep on drinking/using once you've started?
16. Have you had an accident because of drinking/using?
17. Have you been arrested more than once for driving under the influence?
18. Has drinking/using affected your health?

If you answered YES to:

- *Any one of these questions, there is a definite warning that you have a chemical dependency problem.*
- *Any two--you probably are chemically dependent.*
- *Any three or more--you definitely need to seek help.*

Confidential HELP is available 24 Hours Per Day:
Call Duane F. Hurt, DDS, 662-453-5996
Or Tom Wiggins, DMD, 662-843-2022
Or Kay Gatewood, 800-844-1446

DENTAL HYGIENE PROGRAM UPDATE

The following dental hygiene program update was drafted by Dennis Davis Bond, D.M.D., of Northeast Mississippi Community College, based on reports prepared and submitted by all the State's dental hygiene education programs.

During the past year, several positive changes have taken place for dental hygiene education programs across the State of Mississippi. The members of the Mississippi State Board of Dental Examiners and the various dental hygiene education programs are taking this opportunity to inform the public, practicing dentists, and dental hygienists about these changes and possible future developments that will affect dental hygiene education in the State of Mississippi.

Currently, the state of Mississippi has four dental hygiene programs: three associate and one bachelor degree. These programs are located at Meridian Community College (MCC), Northeast Mississippi Community College (NEMCC), Pearl River Community College (PRCC), and the University of Mississippi--School of Health Related Professions (UMC) at the Medical Center in Jackson. The existing programs have increased the interaction between programs and are looking for innovative ways to improve the quality of dental hygiene education while increasing access for students in areas of the state where programs are not available.

In September of 2000 (tentatively scheduled for this date), Mississippi Delta Community College (MDCC), located in Morehead, will open a new ADA-accredited dental hygiene program with an entering class size of 15 students. The program will have a new clinical facility with classrooms, a pre-clinical laboratory, 10 dental operatories, 2 radiology operatories, and a panographic unit. This program will provide dental hygiene education for an area of the State with long-standing dental and dental hygiene needs. Dr. Arthur Richter is the director for the MDCC program.

The dental hygiene program at Meridian Community College graduated its first class in 1979. The program is a two-year one that awards an Associate of Arts degree. Fourteen students are admitted each fall. Clinical training is done in an on-campus clinic containing 10 operatories for patient care, plus an additional 2 for taking radiographs. A panoramic x-ray is also located within the clinic.

Students and instructors participate in various on-campus, off-campus, and community activities, such as My College Cares Day and dental hygiene presentations for local elementary schools. One MCC dental hygiene student was honored this year with the first scholarship presented by the Meridian Dental Association and was featured on Meridian's local news. MCC dental hygiene has also been featured several times on the local college cable television program. All phases of dental health education are covered in MCC's program and enhanced through community dental health activities and clinical experiences by treating patients in all categories, including children, the aged, and patients with oral and general systemic conditions.

In June of 2000, the dental hygiene program at Northeast Mississippi Community College located in Booneville will move into a new facility. This facility, located in the new Allied Health building on the NEMCC campus, will contain a large pre-clinical laboratory, 2 ten-operatory clinics, 4 radiology operatories, a panographic unit, classrooms, and expanded office and storage space. The clinical areas, classrooms, and faculty offices will be networked for intranet and Internet access. The classrooms will be equipped to allow use of multimedia technology in the classroom. NEMCC is also exploring a variety of interactive video and Internet-based didactic educational models and off-campus clinical sites to accommodate non-traditional students. The enlarged clinical facility will allow the program additional faculty and increase the incoming class size. NEMCC is also exploring cooperative agreements with other community colleges without dental hygiene programs.

The University of Mississippi Dental Hygiene program at the University of Mississippi Medical Center location is anticipating an incoming class size of 27 students; 24 seniors are expected to graduate and work in Mississippi. The senior dental hygiene students are eagerly preparing for their pre-licensure examinations and completing their last semester before graduation. The juniors are enjoying their first experiences with patients in the Dental Hygiene Clinic. Some of the clinic rotational opportunities for UMC students include the Central Mississippi Correction Facility, Veterans Administration, Jackson Medical Mall, and dental school and hospital dental departments. These rotations give the students a wide-range of educational experiences.

While the dental hygiene clinic is in a dedicated clinic area in the School of Dentistry building, all School of Health Related Programs students are enjoying the new School of Health Related Programs classroom facilities and a brand new student union. Very shortly the classroom computers will shift from stand-alone to being linked to the Internet. All students are proficient in utilizing the computer laboratories for literature searches, web searches, e-mail communication, and the preparation of classroom assignments.

The dental hygiene program at Pearl River Community College under the direction of Dr. Stan Hill has been very active in community service projects, including participating in National Children's Dental Health Month, going to local nursing homes, having table clinics at various health fairs, and going to Head Start classes to give oral hygiene instruction to children.

PRCC is proud to report that to-date 100% of our graduates have passed the National Board Examination and their respective State Board Examinations. PRCC feels it has an outstanding group of 14 graduates this year, which brings the total graduates to 100 since 1994. The application pool continues to be strong. PRCC will undergo an ADA site visit in 2001.

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 "Executive 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.** All meetings are held at Suite 100, 600 East Amite Street, Jackson, Mississippi; however, please call the office prior to any meeting to verify the correct date and time. The following dates, including agenda cut-off dates, have been tentatively set aside through August 2000 for Board meetings:

July 21, 2000 (July 14, 2000 Cut-off)
August 18, 2000 (August 11, 2000 Cut-off)

August 17, 2000 has been designated as the date for the 2000 licensure re-take examination administered to all dental and dental hygiene candidates who either failed or did not successfully complete all procedures on the initial 2000 licensure examination.

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For those dental assistants who wish to obtain radiology permits, the following institutions are offering Board-approved radiology seminars:

Gulf Coast Community College
Coast Family Health Center (Clinical Portion)
Perkinston, MS
July 22, 2000
October 7, 2000
January 13, 2001
For additional information and/or registration, please contact Ms. Michelle Cuevas at 228-896-2535.

Hinds Community College
Nursing/Allied Health Center
1750 Chadwick Drive
Jackson, MS
July 7-8, 2000
September 22-23, 2000
November 10-11, 2000
For additional information and/or registration, please contact Ms. Rebecca Davidson, C.D.A., at 601-371-3522.

Louisiana State University School of Dentistry
1100 Florida Avenue
New Orleans, LA
June 10, 2000
July 29, 2000
September 23, 2000
November 4, 2000
December 9, 2000
For additional information and/or registration, please contact Kavas H. Thunthy, D.D.S., M.S., M.Ed., at 1-800-488-2925 or 504-619-8584.

Meridian Community College
School of Dental Hygiene
910 Highway 19 North
Meridian, MS
September 20, 2000 (Tentative Date)
For additional information and/or registration, please contact Ms. Delia Bonds, R.D.H., at 601-484-8747.

Northeast Mississippi Community College
School of Dental Hygiene
Cunningham Boulevard
Booneville, MS
August 10-11, 2000
For additional information and/or registration, please contact Mr. Joel Robertson or Ms. Tiffany Johnson at 662-720-7499.

Pearl River Community College
5448 Hwy 49 South
Hattiesburg, MS
August 26, 2000
November 11, 2000
For additional information and/or registration, please contact Ms. Emily Addison, C.D.A., at 601-554-9083.

Grading examiners at the 2000 licensure examinations: From left-to-right: Frank J. Courts, Jr., D.D.S., Ph.D., Board psychometrician; C. Wyck Neely, D.D.S., District 6 Board member; Charles G. Purifoy, D.D.S., District 2 Board member; William T. "Tommy" O'Brien, III, D.D.S., former District 6 Board member; Thomas L. "Len" Jones, Jr., D.D.S., former District 4 Board member; and Dana Hal Jones, D.M.D., District 5 Board member.

DISCIPLINARY ACTIONS

The following report on disciplinary actions covers the period December 31, 1997 through May 31, 2000. According to State law, investigations by the Board are confidential until official action is taken. The following is merely a summary of each disciplinary action taken and should not be interpreted as a complete statement of all facts and matters involved in each docket. Also, the Board typically includes several provisions in its orders which may not be summarized here. Although great care has been taken to ensure accuracy of the information provided hereafter, inadvertent errors may appear, and no entity should initiate an adverse action against a dentist, dental hygienist, or dental assistant based solely on the following information. Rather, the reader should request a copy of the Board's order ($5.00 per copy) prior to making any decisions affecting licensees. A Consent Order is a negotiation between the Board and the licensee and is a procedure for resolution of a disciplinary action without the necessity of a formal hearing, and a voluntary surrender of a license has the same effect as a full revocation.

Douglas M. Akin, D.M.D., MSBDE Docket No. 99-033

Allegation Advertising deemed misleading by listing services performed, e.g. cosmetic dentistry, without the required disclaimer, and by including other misleading wording such as "gentle."

Disposition **12/10/99 Consent Order**. All future advertisements comply with laws and regulations and submit proof of compliance with Board Regulations 41 and 45. Fined $150.00 and assessed costs of $130.40.

Mr. Ghafour "Billy G." Asemani, MSBDE Docket No. 97-004

Allegation Committed acts of malpractice, gross ignorance and/or incompetency; unprofessional conduct, to be determined by the Board on a case-by-case basis, including, but not limited to, practicing deceit or fraud upon the public: failing to maintain appropriate infection control procedures; employing unlicenced persons to perform work which under State law can only be done legally by persons holding a license to practice dentistry in this State; failed to produce current cardiopulmonary resuscitation certification cards for all employees; and failed to maintain, at a minimum, complete and accurate patient records.

Disposition **01/28/98 Consent Order**. Voluntarily surrendered license with right to petition for reinstatement after one year. While surrendered, shall not, either directly or indirectly, practice dentistry, or act in the capacity of a dental hygienist or dental assistant. Fined $5,000.00 and assessed costs of $18,646.85.

03/20/98 Consent Order. On 01/26/98, Asemani announced decision to permanently surrender Mississippi license; however, later rescinded his permanent surrender. Board accepted 01/26/98 permanent surrender as unconditional.

Note Asemani filed four (4) lawsuits against the Board following the above-stated action. While the Board was preparing to defend the allegations, many new violations of state and federal laws were uncovered. The Board played a major role in the arrest of Asemani by state and federal officials. **Currently, Asemani is a federal and state fugitive from justice.**

Gene S. Barlow, D.D.S., MSBDE Docket No. 99-034

Allegation Advertising deemed misleading inasmuch as failed to run the required disclaimer in a point size as large and as bold as majority of letters in advertisement.

Disposition **02/11/00 Consent Order**. All future advertisements comply with laws and regulations and submit proof of compliance with Board Regulations 41 and 45. Fined $50.00 and assessed costs of $72.40.

Tod A. Bigelow, D.D.S., MSBDE Docket No. 98-014

Allegation Advertising deemed misleading inasmuch as advertisement contained words "pleasant environment," "excellent service," "use of the drill has been shown to fracture the enamel of the tooth. . .," and "silver fillings can also cause fracture of a tooth. . ."; and failed to run the required disclaimer in a point size as large and as bold as majority of letters in advertisement.

Disposition **01/22/99 Consent Order**. All future advertisements comply with laws and regulations and submit proof of compliance with Board Regulations 41 and 45. Fined $200.00 and assessed costs of $475.00.

Tommie L. Burchfield, Jr., D.M.D., MSBDE Docket No. 98-036

Allegation Habitual personal use of drugs; violation of the rules and regulations duly promulgated by Board; administering, dispensing or prescribing controlled substances outside the course of legitimate professional practice.

Disposition **11/20/98 Consent Order**. License indefinitely suspended/automatic stay pending certain conditions: (1) must surrender all DEA privileges; (2) cannot order, manufacture, distribute, possess, dispense, administer, or prescribe Stadol/Nubain or their generic equivalents, or any controlled substances, until such time as properly registered with the DEA and with prior written approval from Board; (3) must surrender general anesthesia permit; (4) successfully complete chemical dependency treatment and furnish monthly reports to Board; (5) cannot practice dentistry until completed treatment, personally appeared before Board, and obtained permission from Board; (6) immediately affiliate with Mississippi Recovering Physicians Program (MRPP) upon completing treatment; (7) submit to Board-administered urine and/or blood screens for 5 years; (8) obtain services of one treating physician approved by the Board; (9) subject to unannounced periodic surveillance visits by Board; and (10) adhere to all Board laws and regulations. Fined $1,500.00 and assessed costs of $675.00.

03/19/99 Administrative Order. May return to practice of dentistry inasmuch as has completed chemical dependency treatment and personally appeared before Board; shall immediately affiliate with weekly aftercare group and comply with all treatment/contract recommendations which includes ongoing AA/NA attendance and weekly Caduceus Club meetings; must provide written proof of affiliation to Board; sponsor must submit quarterly progress reports to Board; must maintain use of the opiate blocker Naltrexone in addition to other components of monitoring.
11/19/99 Administrative Order. Board reinstates DEA privileges in Schedules III, IIIN, IV, and V only; two (2) people in the office should have access to controlled substances, i.e., Licensee and designated dental assistant or dental hygienist; designee must be identified in writing to Board; under no circumstances should Licensee order, administer, dispense, or handle controlled substances without presence of designated employee; Licensee should only order controlled substances from one designated source; when ordering controlled substances, whether by invoice or DEA 222 order form, shall simultaneously provide copy of all forms to Board; Board shall have right at any time, unannounced, to conduct complete controlled substance audit; designated employee shall have the informed right to report questionable conduct to Board without recourse by Licensee or other staff; authorized to apply for intravenous sedation permit in accordance with Board Regulation 29; general anesthesia expressly prohibited; may utilize services of duly licensed anesthesiologist or CRNA to administer anesthesia in hospital setting.

William Donald Doty, D.M.D., MSBDE Docket No. 97-006

Allegation Advertising deemed misleading inasmuch as large sign/advertisement on outside door of clinic listed services performed, e.g. cosmetic dentistry, without required disclaimer.

Disposition **09/18/98 Consent Order**. All future advertisements comply with laws and regulations and submit proof of compliance with Board Regulations 41 and 45. Fined $100.00 and assessed costs of $1,552.00. All other charges were dismissed with prejudice.

Charles P. Elkins, D.D.S., MSBDE Docket No. 87-002

Allegation Habitual personal use of intoxicants. License was revoked on 09/08/97. Licensee appealed decision and court upheld Board's revocation. Made personal appearance before Board to request reinstatement of Mississippi license.

Disposition **01/22/99 Administrative Order**. Request for licensure reinstatement denied.

Treva Ellon Fields, R.D.H., MSBDE Docket No. 98-039

Allegation Practicing dental hygiene without immediate supervision or direction of a dentist; willful violation of the rules duly promulgated by the Board.

Disposition **03/19/99 Administrative Order**. License suspended 3 years/stayed after 30 consecutive days beginning 04/18/99 and ending on 05/17/99; within 2 years of order, must obtain 10 additional CE hours and submit proof of completion; within 1 year of order, must complete ethics course by David Nash, D.D.S. and submit proof of completion. Fined $250.00 and assessed costs of $1,025.00.

Donald K. Givan, D.M.D., MSBDE Docket No. 99-039

Allegation Advertising deemed misleading inasmuch as he failed to include required disclaimer after listing services, i.e., "Emphasis on Prevention & Cosmetic Dentistry"; willful violation of the rules and regulations of Board.

Disposition **02/11/00 Consent Order**. All future advertisements comply with laws and regulations and submit proof of compliance with Board Regulations 41 and 45. Fined $50.00 and assessed costs of $122.64.

Willie Earl Harkless, D.D.S., MSBDE Docket No. 97-019

Allegation Willful violation of rules and regulations of appropriate dental licensure agency of another state/jurisdiction; and guilty of an offense under the laws of another state or federal government punishable by imprisonment for term exceeding 1 year, i.e. conviction of Medicaid fraud in Louisiana.

Disposition **04/24/98 Administrative Order**. Based on Louisiana Board findings and federal court conviction and imprisonment, Mississippi Board permanently revoked license; immediately return Mississippi license to Board. Assessed investigative costs of $1,250.00.

Gary Stephen Haygood, D.D.S., MSBDE Docket No. 98-035

Allegation Background search performed on all candidates seeking dental licensure by credentials revealed he allowed unlicenced personnel to perform duties delegated only to persons holding a valid dental or dental hygiene license; falsified Mississippi application for licensure; and advertised as a Mississippi dental clinic prior to having Mississippi dental license.

Disposition **09/18/98 Administrative Order**. Request for licensure by credentials denied.

Note This case is currently under appeal with the Chancery Court for Hinds County, Mississippi.

Irvin W. Henderson, D.D.S.; MSBDE Docket No. 97-028

Allegation Willful violation of rules and regulations of Board, i.e., failure to document 40 hours of approved continuing dental education (CDE) from 09/01/95 through 08/31/97; only documented 35.5 CDE hours for two-year period ending 08/31/97.

Disposition **02/11/00 Consent Order**. Must submit proof of compliance with continuing education and cardiopulmonary resuscitation; must comply with rules and regulations of Board. Fined $500.00 and assessed costs of $63.53.

J. R. Herrington, II, D.M.D., MSBDE Docket No. 96-068

Allegation Improper maintenance of controlled substance records and inventory; administered, dispensed, and prescribed narcotic drugs or other drugs having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice.

Disposition **07/25/97 Consent Order**. License suspended for 5 years/automatic stay subject to terms and conditions:(1) affiliate with Mississippi Impaired Professionals Program (Caduceus Club) and verify this in writing; (2) obtain services of primary care physician; (3) submit to random, unannounced, and witnessed urine and/or blood screens for 5 years; (4) cannot administer, dispense, or prescribe to himself any drugs having addiction-forming or addiction-sustaining liability; (5) within 1 year of Consent Order successfully complete the course, "Physicians' Education Program in Clinical, Legal and Ethical Issues in Prescribing Abusable Drugs," sponsored by University of South Florida, or course of equivalent content and duration approved by the Board and submit proof of successful completion; (6) within 1 year shall successfully complete ethics course co-sponsored by University of Mississippi School of Dentistry and Board and submit proof of completion to Board; (7) provide proof of compliance with Board Regulations 41 and 45; (8) obey all federal, state, and local laws and all rules governing practice of dentistry; (9) fulfill all patient and inventory record-keeping requirements; and (10) office subject to periodic surveillance. Fined $500.00 and assessed costs of $3,875.00.

Marion E. Hill, D.D.S., MSBDE Docket No. 98-037

Allegation Willful violation of the rules or regulations of Board; unlicensed persons performing work only to be done by licensed Mississippi dentists; and unprofessional conduct to be determined by Board on a case-by-case basis, but which includes practicing deceit or other fraud upon the public.

Disposition **03/19/99 Administrative Order**. License suspended 3 years/stayed after 30 consecutive days beginning 04/18/99 and ending 05/17/99; within 2 years of order, must obtain 20 additional CE hours and submit proof of completion; within 1 year of order, must successfully complete dental ethics correspondence course by David Nash, D.D.S. and submit proof of completion; obey all federal, state, and local laws and rules governing practice of dentistry; fulfill recordkeeping requirements; subject to periodic surveillance by Board. Fined $1,000.00 and assessed costs of $3,575.00.

John Hough Hopkins, D.D.S., MSBDE Docket No. 97-022

Allegation Advertising deemed misleading, inasmuch as advertised reference to specialty, i.e., "aesthetic dentistry," not recognized by American Dental Association and Board; and failure to print required disclaimer following listing of services performed as large and as bold as majority of letters in said advertisement.

Disposition **04/24/98 Consent Order**. All future advertisements comply with rules and regulations of Board; successfully complete either dental ethics course co-sponsored by UMC School of Dentistry and Board, or successfully complete dental ethics course by David A. Nash, D.D.S. and submit proof of completion; provide proof of compliance with Board Regulations 41 and 45. Fined $2,500.00 and assessed costs of $464.00.

D. Mitchell Hutto, D.D.S., MSBDE Docket No. 97-003

Allegation Impaired practitioner (making Methamphetamine in office and admitted learning how from Internet); prescribed controlled substances outside scope of dentistry; and poor patient records.

Disposition **09/26/97 Consent Order**. License indefinitely suspended/automatic stay pending compliance with order and entering treatment for addiction; must surrender DEA number and immediately enter treatment program; successfully complete all phases of treatment and appear before Board to report and request approval to return to work; must not treat himself or family members; subject to unannounced random urine tests by Board and under surveillance for 5 years from date of order; if allowed to return to practice, must not violate any Board laws and regulations and must maintain appropriate patient records.

03/20/98 Surrender of License. Violated Consent Order; in lieu of hearing and possible revocation voluntarily surrendered license to practice dentistry in Mississippi; and Board accepted license surrender as unconditional.

Paige E. Keeter, R.D.H., MSBDE Docket No. 97-026

Allegation Willful violation of rules and regulations of Board, i.e., failure to document 20 hours of approved continuing dental hygiene education (CDHE) during previous 2 consecutive years, i.e., documented 10 hours of CDHE for two-year period ending 08/31/97.

Disposition **02/11/00 Consent Order**. In all future random CDHE audits, ensure compliance in every respect with rules and regulations of Board; and submit proof of compliance with current CE and CPR. Fined $250.00 and assessed costs of $164.01.

Chester Layne, D.D.S., MSBDE Docket No. 96-073

Allegation Administering, dispensing and prescribing controlled substances outside scope of dentistry; unprofessional conduct including practicing deceit or other fraud upon public; improper maintenance of controlled substances records and inventory; and insufficient or non-existent patient records.

Disposition **07/31/98 Consent Order**. License placed on probation for 3 years subject to certain terms: (1) surrender all DEA privileges for Schedules II-V; (2) must not order, possess, distribute, manufacture, dispense, administer, or prescribe controlled substances until again registered with DEA after Board approval; (3) shall not order Stadol/Nubain; (4) shall submit to comprehensive evaluation for chemical dependency at Board-approved treatment center and provide a written report of evaluation to Board; (5) shall not treat himself or family members; (6) subject to random, unannounced urine tests for 3 years; (7) shall not administer, dispense, or prescribe to himself any addiction-forming or sustaining drugs; (8) within one year of order must attend "Physicians' Education Program in Clinical, Legal and Ethical Issues in Prescribing Abusable Drugs" sponsored by University of South Florida; (9) shall obey all federal, state, and local laws governing

practice of dentistry; (10) must maintain accurate patient records; (11) subject to periodic unannounced surveillance visits by Board; (12) may petition Board for removal of conditions after expiration of 1 year; and (13) provide proof of compliance with CE and CPR regulations. Fined $1,000.00 and assessed costs of $5,300.00.

Chester Layne, D.D.S., MSBDE Docket No. 98-045

Allegation Willful violation of rules or regulations of dental licensure agency of another state or jurisdiction; and unprofessional conduct to be determined by Board on case-by-case basis, which includes, but is not limited to, (a) misrepresentation in obtaining license, (b) practicing deceit or fraud upon the public, (c) violation of terms and conditions in 07/31/98 Consent Order, and (d) having been disciplined by appropriate licensure agency of another state or jurisdiction.

Disposition **03/19/99 Administrative Order**. License revoked effective 04/18/99; must take immediate steps to close practice by specified date.

Note This case is on appeal with the Chancery Court of Lee County, Mississippi.

Robert E. Maddux, D.D.S., MSBDE Docket No. 99-009

Allegation Advertising deemed misleading, inasmuch as failed to include required disclaimer after listing services, i.e., "Cosmetic Dentistry."

Disposition **02/11/2000 Consent Order**. In all future advertisements, thoroughly review said advertisements and ensure compliance with rules and regulations of Board; provide proof of compliance with Board Regulations 41 and 45. Fined $50.00 and assessed costs of $70.00.

George A. May, Jr., D.D.S., MSBDE Docket No. 98-033

Allegation Impaired practitioner; alcohol dependence.

Disposition **10/08/98 Consent Order**. Voluntarily entered chemical dependency treatment upon notification by Board; license indefinitely suspended/automatic stay pending certain conditions: (1) surrender DEA permit for Schedules II-V; (2) not permitted to order, distribute, etc., Stadol/Nubain or generic equivalents until prior approval from Board; (3) successfully complete all phases of treatment, execute medical releases, reports furnished to Board, must not practice dentistry until treatment complete and appears before Board, and Board may still restrict license; (4) proof of compliance with Regulations 41 and 45; (5) must affiliate with Mississippi Recovering Physicians Program (at meeting, Board allowed him to affiliate with Tennessee Dental Association's program); (6) must receive periodic reports from Tennessee recovery program; (7) must obtain services of treating physician approved by Board, cannot treat family members or himself, and if treating physician prescribes narcotics Board must be notified in writing within 24 hours; (8) submit to random, unannounced and witnessed urine and/or blood screens for 5 years; and (9) periodic surveillance by Board. Assessed costs of $1,100.00. **01/22/99 Administrative Order**. Personally appeared before Board to request return to practice; successfully completed treatment and allowed to return practice; shall take immediate steps to affiliate with Concerned Dentists Committee of Tennessee Dental Association and affiliation must be in writing; and quarterly reports must be submitted to Board.

William E. Middleton, Jr., D.D.S., MSBDE Docket No. 97-032

Allegation Willful violation of rules and regulations of Board, i.e., failure to document 40 hours of approved continuing dental education (CDE) from 09/01/95 through 08/31/97; documented 13 hours of CDE for two-year period ending 08/31/97.

Disposition **02/11/00 Consent Order**. Must submit proof of compliance with CE and CPR; must comply with rules and regulations of Board. Fined $500.00 and assessed costs of $162.81.

James A. Nicholson, D. D. S., MSBDE Docket No. 98-044

Allegation Failure to register fictitious or corporate name, i.e., TMJ Center; failure to include required disclaimer after listing services.

Disposition **01/22/99 Consent Order**. Must make written request for approval of fictitious name; submit proof of compliance with Board Regulations 41 and 45. Fined $100.00 and assessed costs of $225.00.

Buddy O'Campo, D.M.D., MSBDE Docket No. 88-003

Allegation Falsified application for Mississippi dental license; administered, dispensed and prescribed controlled substances outside course of legitimate professional practice; license was revoked on 04/15/88; made personal appearance before Board to request license reinstatement.

Disposition **10/22/99 Administrative Order**. Declined request for license reinstatement; shall not at any time in future be authorized to practice dentistry in the State of Mississippi.

Christy Goff Parker, R.D.H., MSBDE Docket No. 97-027

Allegation Willful violation of rules and regulations of Board, i.e., failure to document 20 hours of approved continuing dental hygiene education (CDHE) during previous 2 consecutive years; documented 19 hours of CDHE for two-year period ending 08/31/97.

Disposition **03/17/00 Consent Order**. In all future random CE audits, shall ensure compliance with rules and regulations of Board; must submit proof of compliance with CE and CPR. Fined $250.00 and assessed costs in the amount of $175.78.

Julia Ann Zuccaro Richards, R.D.H., MSBDE Docket No. 99-012

Allegation Impaired dental hygienist; substance abuse; obtaining or attempting to obtain narcotic drugs, or other drugs having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice; and violation of certain regulations of Board.

Disposition **07/30/99 Consent Order**. Unconditional surrender of Mississippi dental hygiene license.

Gene Allen Roark, D.D.S., MSBDE Docket No. 99-023

Allegation Impaired practitioner; substance abuse; ordered, dispensed and/or administered controlled substances outside the course of legitimate professional practice.

Disposition **10/22/99 Consent Order**. License indefinitely suspended/automatic stay subject to certain terms and conditions: (1) surrender all DEA privileges in Schedules II-V; (2) not order, manufacture, distribute, posses, dispense, administer, or prescribe Stadol/Nubain or their generic equivalents, or any controlled substances, until such time as properly registered with the DEA and with prior written approval from Board; (3) successfully complete chemical dependency treatment at treatment facility approved in advance and in writing by Board and furnishing monthly reports to Board; (4) not practice dentistry until complete treatment, personally appear before Board, and obtain permission from Board; (5) immediately affiliate with Mississippi Recovering Physicians Program (MRPP) upon completing treatment; (6) submit to Board-administered urine and/or blood screens for 5 years; (7) must obtain services of one treating physician approved by Board; (8) subject to unannounced periodic surveillance visits by Board; (9) adhere to all Board laws and regulations; and (10) must provide proof of compliance with Board Regulations 41 and 45. Assessed costs of $1,183.70.

Hal M. Schrock, D.D.S., MSBDE Docket No. 99-015

Allegation Advertising deemed misleading, e.g., failed to include required disclaimer as large and as bold as majority of the letters in such advertisement; and incorporating in said advertisement the statements "Will Do Your Surgical Extractions Painlessly."

Disposition **02/11/00 Consent Order**. Must submit proof of compliance with Regulations 41 and 45; and ensure all future advertisements comply with Board Regulation Number 43. Fined $400.00 and assessed costs of $118.73.

Catherine A. Stephens, D.M.D., MSBDE Docket No. 99-047

Allegation Advertising deemed misleading, e.g., failed to include required disclaimer after listing services, i.e., "Cosmetic Dentistry."

Disposition **02/11/00 Consent Order**. Must submit proof of compliance with Regulations 41 and 45; and ensure all future advertisements comply with Board Regulation Number 43. Fined $100.00 and assessed costs of $69.50.

Margaret L. Stuckey, R.D.H., MSBDE Docket No. 98-074

Allegation Impaired dental hygienist; substance abuse; obtaining or attempting to obtain narcotic drugs, or other drugs having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice; and violation of certain regulations of the Board.

Disposition **04/30/99 Consent Order**. Unconditional surrender of Mississippi dental hygiene license.

Norman C. Underwood, D.D.S., MSBDE Docket No. 99-036

Allegation Advertising deemed misleading, e.g., failed to register fictitious name of Brookhollow Family Dentistry prior to use; failed to include required disclaimer after listing services, i.e., "crowns, dentures, . . .".

Disposition **02/11/00 Consent Order**. All future advertisements comply with laws and regulations of Board; submit proof of compliance with Board Regulations 41 and 45. Fined $100.00 and assessed costs of $80.00.

Jimmy Dale Vance, D.D.S., MSBDE Docket No. 98-011

Allegation Impaired practitioner; substance abuse; violation of rules and regulations of Board; and administering, dispensing or prescribing any narcotic drug, or any other drug having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice.

Disposition **10/22/99 Consent Order**. License indefinitely suspended/automatic stay pending certain conditions: (1) must surrender all DEA privileges in Schedules II-V; (2) not order, manufacture, distribute, possess, dispense, administer or prescribe any controlled substances in said schedules until such time as properly registered with DEA with prior written approval from Board; (3) cannot order, manufacture, distribute, possess, dispense, administer or prescribe Stadol/Nubain or generic equivalents until such time authorized to do so by prior written approval of Board; (4) cannot practice dentistry until has submitted to and completed comprehensive evaluation for chemical dependancy at treatment facility approved in advance and in writing by Board and personally appear before Board and obtain written authorization from Board to return to practice; (5) upon completion of treatment, shall immediately affiliate with Mississippi Recovering Physicians Program (MRPP); (6) must obtain services of one treating physician approved by the Board; (7) shall not treat himself or family members; (8) shall fill all prescriptions at only 1 pharmacy and advise Board in writing of identify and address of said pharmacy; (9) submit to random, unannounced and witnessed urine and/or blood screens for 5 years; (10) shall not administer, dispense or prescribe to himself any drugs having addiction-forming or addiction-sustaining liability; and (11) subject to periodic surveillance by Board. Fined $2,000.00 and assessed costs of $736.50.

Thomas H. Wiggins, Jr., D.M.D., MSBDE Docket No. 98-034

Allegation Impaired practitioner; substance abuse; violation of rules and regulations of Board; and administering, dispensing or prescribing any narcotic drug or any other drug having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice.

Disposition **11/20/98 Consent Order**. License indefinitely suspended/automatic stay pending certain conditions: (1) surrender all DEA privileges for Schedules II-V; (2) not order, manufacture, distribute, posses, dispense, administer, or prescribe Stadol/Nubain or their generic equivalents without prior written approval from Board; (3) successfully complete chemical dependency treatment at treatment facility approved in advance and in writing by Board and furnish monthly reports to Board; (4) not practice dentistry until complete treatment, personally appear before Board, and obtain permission from Board; (5) immediately affiliate with Mississippi Recovering Physicians Program (MRPP) upon completing treatment; (6) submit to Board-administered urine and/or blood screens for 5 years; (7) obtain services of one treating physician

approved by Board; (8) subject to unannounced periodic surveillance by Board; and (9) adhere to all Board laws and regulations. Fined $1,500.00 and assessed costs of $2,325.00.
01/22/99 Administrative Order. May return to practice of dentistry; having completed chemical dependency treatment and personally appearing before the Board, shall immediately affiliate with Concerned Dentists Committee of Tennessee Dental Association and comply with all treatment/contract recommendations; must provide written proof of affiliation sent to Board; and sponsor must submit quarterly progress reports to the Board.
11/19/99 Administrative Order. Return DEA privileges in Schedules III, IIIN, IV, and V.

Lloyd B. Wolfe, Jr., D.M.D., MSBDE Docket No. 98-008

Allegation Chemically dependent; violation of rules and regulations of Board pertaining to supervision of dental auxiliary personnel; unprofessional conduct pertaining to manner obtained controlled substances from various sources for personal consumption.

Disposition **10/22/99 Consent Order**. License indefinitely suspended/automatic stay pending certain conditions: (1) submit to and complete comprehensive evaluation for chemical dependancy at Board-approved treatment facility and comply with all treatment recommendations; (2) shall not practice dentistry until successfully completed all required phases of treatment, personally appeared before Board, and obtained written authorization from Board to return to practice; (3) upon completion immediately affiliate with Mississippi Recovering Physicians Program (MRPP) with affiliation verified in writing; (4) obtain services of one treating physician, one dentist and one pharmacy, all verified in writing to Board; (5) shall not attempt to register with DEA without prior written approval from Board; (6) not order, manufacture, distribute, posses, dispense, administer, or prescribe Stadol/Nubain or their generic equivalents; (7) submit to random, unannounced and witnessed urine and/or blood screens for 5 years; (8) shall not administer, dispense or prescribe to himself any drugs having addiction-forming or addiction-sustaining liability; (9) subject to periodic surveillance by Board; and (10) may petition Board for release of conditions after 3 years. Fined $2,000.00 and assessed costs of $17,711.57.
11/19/99 Administrative Order. May return to practice; completed chemical dependency treatment and personally appeared before Board; no formal residential treatment recommended; follow all terms and conditions set forth in prior Consent Order; continue Sunday Aftercare Group at CDC; affiliate with Mississippi Recovering Physicians Program (MRPP) and attend Caduceus Club meetings; attend minimum of 3 Alcoholics Anonymous or Narcotics Anonymous meetings weekly; designate primary physician to coordinate medical treatment; subject to random urine and/or drug screens.

BOARD NEEDS INPUT

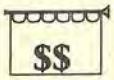
At its meeting on 03/17/00, the Board considered correspondence received from the Mississippi Association of Orthodontists concerning amending Board Regulation 13 (procedures which may not be delegated to auxiliaries, a copy of which is reprinted in its entirety in this newsletter) to reflect that dental auxiliaries may not perform the final placement, cementation, or bonding of orthodontic bands, brackets, and appliances. At that same meeting, the Board directed that input be solicited from all Mississippi licensees via this newsletter. Please submit your written comments as to whether you feel this is a procedure properly delegated to dental auxiliaries, and whether you feel other orthodontic procedures should or should not be delegated to dental auxiliaries. The Board will discuss this matter at its 07/21/00 Board meeting, and all written comments must be received in the Board's office on or before close of business (5:00 p.m.), Friday, July 14, 2000. These comments may be mailed, faxed, or e-mailed to the Board at the various addresses listed on the cover page of this newsletter.

ELECTRONIC RECORDKEEPING IN THE DENTAL OFFICE

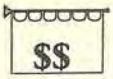
Many questions have been addressed to the Board concerning electronic recordkeeping policies and what documents should be maintained in a patient file outside of the electronic recordkeeping concept. The Board discussed this issue at its 02/11/00 meeting, and determined that, at a minimum, a separate patient file should be maintained containing the following signed and/or original documents: signed patient consent form; signed permission from the patient, parent, or guardian for records release; and signed medical health history form. The following policy statement was adopted by the Board at that meeting:

> For the protection of both the licensed dentist and the patient, the Mississippi State Board of Dental Examiners strongly urges all licensed dentists to maintain, at a minimum, properly executed, non-electronic paper copies of the following documents: patient consent form, permission for release of records, and medical health history form.

2000 DENTAL LICENSURE EXAMINATION CANDIDATES WORKING HARD ON ENDODONTIC AND TYPODONT EXERCISES



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	$400.00
Application for Dental Hygiene License	$200.00
Application for Dental License through Credentials.	$2,000.00
Application for Dental Hygiene License through Credentials	$500.00
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	$150.00
Annual Dental Specialty License Renewal	$75.00
Annual Dental Hygienist License Renewal	$75.00
Annual Dental Institutional, Teaching, or Provisional License Renewal.	$150.00
Annual Dental Hygiene Institutional, Teaching, or Provisional License Renewal.	$75.00
Annual Radiology Permit Renewal	$20.00
Annual General Anesthesia Permit Renewal	$100.00
Annual IV Sedation Permit Renewal	$100.00
Duplicate License or Permit	$20.00
Certification of Licensure or Permit Status	$20.00
Certified Copy of License or Permit	$20.00
Handling fee for Insufficient Funds Checks	$50.00
Requests for Database Information	
Labels & Printouts	$125.00
Diskettes	$150.00
Radiology Examinations Administered in MSBDE Offices	$25.00
One Copy of MSBDE Laws and/or Regulations	$10.00
Additional Copies (Per Copy)	$5.00
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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 employer, home, business, mailing, or satellite address/telephone, please use this form to notify the MSBDE of such. Otherwise, keep this form in your files should you need to notify the MSBDE of a future change of information. 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 this form via facsimile to (601)944-9624, or you may e-mail any changes via the Board's web site: http://www.msbde.state.ms.us. Please call (601)944-9622 if you have any questions.

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