



The Dental Digest

Mississippi State Board of Dental Examiners

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The Mississippi State Board of Dental Examiners is charged with the responsibilities of examining, licensing, registering, and regulating dentistry and dental hygiene to ensure competency and ethics 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 Board is neither affiliated with nor functions as a subsidiary of any private or professional organization.

Welcome to the June 2006 edition of the Dental Digest. The primary focus will be information for our dental hygienists regarding participation in the Mississippi Professionals Health Program (MPHP) and biennial/on-line renewal for dental hygienists and radiology permit holders. You should thoroughly review the "Regulation Highlight" section, as amendments have been made to several Board regulations. As always, you will want to review "Things to Note," as this section contains a variety of information useful to our licensees and permit holders. Additionally, the Board's forms, laws, regulations, newsletters, examination manuals, databases, statistics, frequently asked questions, etc., are on our web site (<http://www.msbde.state.ms.us>). The Board's web site is being completely revamped to include dynamic statistical information updated each time the Board updates its licensee search feature. Also, we will have an enhanced web site search feature and hot link buttons. Enjoy the newsletter, and, as always, feel free to contact our office if you have any questions.

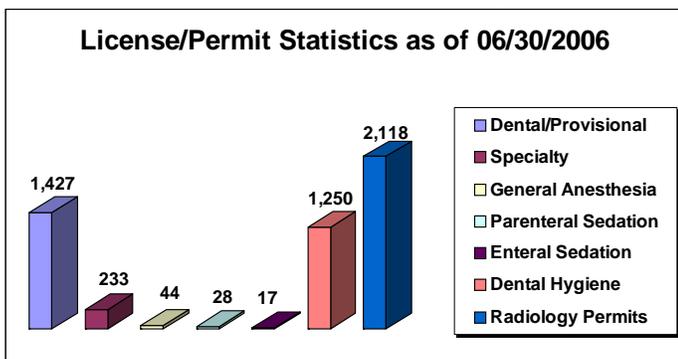


As part of its legislatively-mandated regulatory responsibilities, the MSBDE must enforce the laws of this State and enact any regulations necessary to ensure consistent and ethical compliance with these laws. Accordingly, when deemed appropriate and as a means of establishing uniform policies for all 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 that 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. Also, interested parties may visit the administrative procedures section of the Mississippi Secretary of State's web site (<http://www.sos.state.ms.us/busserv/AdminProcs/Default.asp>) and select the Mississippi State Board of Dental Examiners and appropriate month from the pull-down menus to view amendments to or adoption of MSBDE regulations.

As a regular feature of the Dental Digest, the MSBDE highlights regulations that have been amended/enacted. Since the June 2005 newsletter, the MSBDE has amended Regulations 7, 14, 27, 29, 37, and 43. When possible, regulations have been reprinted in their entirety; however, depending on the amendments, a synopsis for some regulations may be provided for your review. A fee of \$10.00 per copy is charged for bound copies of the Mississippi Dental Practice Act and the MSBDE's rules and regulations; however, copies of individual regulations may be obtained by calling or writing the MSBDE's office. Also, copies of the MSBDE's laws and regulations may be obtained from its web site (<http://www.msbde.state.ms.us>) in Adobe Acrobat format. Just click on the "Laws & Regulations" button to view or print the MSBDE's laws and regulations.



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BOARD REGULATION 7 PROVISIONAL AND SPECIALTY LICENSURE

On April 14, 2006, the Board amended Regulation 7 by inserting the words "board-approved licensure examination" in all appropriate places as a housekeeping measure, inasmuch as the Board has become a member of the Council of Interstate Testing Agencies (CITA) and has accepted the Louisiana State Board of Dentistry (LSBD) clinical licensure examination as also fulfilling Mississippi's licensure by examination requirements. This regulation is not being reprinted in this newsletter but is available on the Board's web site (<http://www.msbde.state.ms.us>).

BOARD REGULATION 14 CANDIDATE PARTICIPATION IN LICENSURE EXAMINATION

On April 14, 2006, the Board amended Regulation 14 as a housekeeping measure now that the Board has noted its acceptance of other state or regional licensure examinations. Also, the Board stipulated the following: (a) the number of years a candidate has to apply for licensure by examination in Mississippi from successful completion of a Board-approved licensure examination, i.e., five (5) years; (b) the 90-day active practice requirement per year prior to applying for licensure by examination in Mississippi; (c) that a candidate must successfully complete a Mississippi jurisprudence examination within ninety (90) days from making application for a license by examination; and (d) other miscellaneous changes as deemed appropriate by the Board. This regulation is not being reprinted in this newsletter but is available on the Board's web site (<http://www.msbde.state.ms.us>).

BOARD REGULATION 27 EXAMINATION REVIEW PROCEDURES

On April 14, 2006, the Board amended Regulation 27 as a housekeeping measure now that CITA administers the Board's licensure examination. In effect, the Board stipulated the following: (a) all appeals of failing examination scores must be handled through the Board-approved state or regional testing agency responsible for administering the examination; (b) the results of those appeals are deemed final by this Board; and (c) no further appeals will be made to this Board. This regulation is not being reprinted in this newsletter but is available on the Board's web site (<http://www.msbde.state.ms.us>).

BOARD REGULATION 29 ADMINISTRATION OF ANESTHESIA

On December 2, 2005, the Board amended Regulation 29 in several areas, e.g., adding definitions for "Clinically Oriented Experiences," "Clinical Patient Cases," and "Special Health Care Needs Patients," amending the definition of "Parenteral Conscious Sedation"; amending language concerning CRNAs; and changing the number of didactic hours, clinically oriented experiences, and clinical patient cases for obtaining an enteral conscious sedation permit.

On February 24, 2006, the Board again amended Regulation 29 by adding definitions for "dental facility" and "hospital facility"; inserting the word "dental" before the word "facility" to denote the difference between "dental" and "hospital" facilities; and establishing guidelines for administration of anesthesia in dental facilities versus hospital facilities. This regulation is being reprinted in its entirety in this newsletter and also is available on the Board's web site (<http://www.msbde.state.ms.us>).

Purpose: Pursuant to Miss. Code Ann. § 73-9-13, to promulgate rules for the administration of anesthesia in the dental office to allow dentists to provide patients with the benefits of anxiety and pain control in a safe and efficacious manner.

1. Definitions of Terminology Used Herein
 - a. Analgnesia - the diminution or elimination of pain.
 - b. Anti-Anxiety Sedative - a sedative agent administered in a dosage intended to reduce anxiety without diminishing consciousness or protective reflexes.
 - c. Anxiolysis - pharmacological reduction of anxiety through the administration of a minor tranquilizer, which allows for uninterrupted interactive ability in a totally awake patient with no compromise in the ability to maintain a patient airway continuously and without assistance.
 - d. Behavioral Management - the use of pharmacological or psychological techniques, singly or in combination, to modify behavior to a level that dental treatment can be performed effectively and efficiently.
 - e. Clinically Oriented Experiences - clinical patient cases which are presented outside a clinical environment and in an instructional setting, e.g., video presentations.
 - f. Clinical Patient Cases - procedures involving live patients either performed or observed in a clinical environment and in an instructional setting.
 - g. Combination Inhalation Enteral Anxiolysis - when nitrous-oxide is used in combination with an enteral agent with the intent of achieving anxiolysis only, and the appropriate dosage of agents is administered.
 - h. Competent - displaying special skill or knowledge derived from training and experience.
 - i. Conscious Sedation - a minimally depressed level of consciousness beyond anxiolysis that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, and that is produced by pharmacologic or non-pharmacologic agents, or a combination thereof. In accordance with this particular definition, the drugs or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely (also see definitions for Combination Inhalation Enteral Anxiolysis, Enteral Conscious Sedation, General Anesthesia, and Parenteral Conscious Sedation.)
 - j. Dental Facility - the office where a permit holder practices dentistry and provides anesthesia/sedation services.
 - k. Dental Facility Inspection - an on-site inspection to determine if a dental facility where the applicant proposes to provide anesthesia/sedation is supplied, equipped, staffed and maintained in a condition to support provision of anesthesia/sedation services that meet the minimum standard of care; may be required by the Board prior to the issuance of a sedation/anesthesia permit or any time during the term of the permit.
 - l. Direct Supervision - the dentist responsible for the sedation/anesthesia procedure shall be physically present in the office and shall be continuously aware of the patient's physical status and well being.
 - m. Enteral Conscious Sedation - conscious sedation that is achieved by administration of pharmacological agents through the alimentary tract either orally or rectally.
 - n. General Anesthesia - the intended controlled state of depressed consciousness produced by pharmacologic agents and accompanied by a partial or complete loss of protective reflexes, including the ability to maintain an airway and respond purposefully to physical stimulation or verbal commands.

- o. **Hospital Facility** - a "hospital" or "ambulatory surgical facility" as those terms are defined in Miss. Code Ann. § 41-7-173(h).
 - p. **Immediately Available** - on-site in the dental facility and available for immediate use.
 - q. **Local Anesthesia** - the elimination of sensations, especially pain, in one part of the body by the regional application or injection of a drug.
 - r. **May** - indicates freedom or liberty to follow a reasonable alternative.
 - s. **Minor Psychoedative** - pharmacological agents which allow for uninterrupted interactive ability in a patient with no compromise in the ability to maintain a patient airway continuously and without assistance and carry a margin of safety wide enough to render unintended loss of consciousness unlikely.
 - t. **Must or Shall** - indicates an imperative need or duty or both; an essential or indispensable item; mandatory.
 - u. **Nitrous-Oxide Inhalation Anxiolysis** - the inhalational use of nitrous oxide for anxiolysis and/or analgesia.
 - v. **Parenteral Conscious Sedation** - the intravenous, intramuscular, subcutaneous, intranasal, or transdermal administration of pharmacological agents with the intent to obtain a depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal commands.
 - w. **Protective Reflexes** - includes the ability to swallow and cough.
 - x. **Special Health Care Needs Patients** - persons having a physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, health care intervention, and/or use of specialized services or programs; the condition may be developmental or acquired and may cause limitations in performing daily self-maintenance activities or substantial limitations in a major life activity; and health care for special needs patients is beyond that considered routine and requires specialized knowledge, increased awareness and attention, and accommodation.
 - y. **Vested Adult** - a responsible adult who is the legal parent or guardian, or designee of a legal parent or guardian, entrusted with the care of a patient following the administration of anxiolysis, general anesthesia, or conscious sedation.
2. **General Guidelines for Using Anesthesia**
- a. Any person licensed to practice dentistry in the State of Mississippi shall be authorized to use anesthesia in accordance with the provisions of this section.
 - b. All drugs utilized by licensed dentists for anxiolysis, enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia shall be selected and utilized in accordance with the drug manufacturer's guidelines as set forth in Food and Drug Administration (hereinafter referred to as "FDA") approved labeling or peer-reviewed scientific literature, including, but not limited to, indications of usage, dosage amounts, and safety requirements for each drug so utilized.
 - c. Appropriate safety training and equipment for each drug utilized will be required.
 - d. When anesthesia is administered in a dental facility, the following general guidelines apply:
 - (1) A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or Certified Registered Nurse Anesthetist (hereinafter referred to as "CRNA") who practices in an accredited hospital, provided

that such anesthesiologist or CRNA remains on the premises of the dental facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged.

- (2) Prior to applying to the Mississippi Board of Nursing (hereinafter "Nursing Board") to enter into a Nursing Board-approved collaborative/consultative relationship with a CRNA which includes protocols/practice guidelines for the administration of enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia by a CRNA, the operating dentist must possess a currently valid Board-issued anesthesia permit which is commensurate with the level of anesthesia being administered by the CRNA, and which permit has been issued in accordance with the guidelines hereinafter stipulated.



District I annual meeting, from left-to-right: A. Roddy Scarbrough, DMD; Thurmond Beasley, DDS; Eleanor A. Gill, DMD; Joseph S. Young, DMD; Walter D. Diaz, DDS; J. Walt Starr, Jr., DMD; and John Robinson, Jr., DDS

- e. When anesthesia is administered in a hospital facility, the following general guideline applies:
 - (1) A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or CRNA who practices in an accredited hospital pursuant to the provisions of the "Minimum Standards of Operation for Mississippi Hospitals," as published by the Mississippi State Department of Health, provided that such anesthesiologist or CRNA remains on the premises of the hospital facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged. The accredited hospital's department of anesthesia, or in the absence thereof the department or surgery, has the responsibility for establishing general policies and procedures for the administration of anesthesia.
3. **Board Permits Not Required**
- For the following, Board permits are not required:
- a. **Local Anesthesia.** All licensed dentists are herein authorized to use local anesthesia.
 - b. **Nitrous-Oxide Inhalation Anxiolysis.** A licensed dentist may employ or use nitrous-oxide inhalation anxiolysis on an outpatient basis for dental patients without making application to the Board, provided such dentist satisfies one or more of the following criteria prior to ad-

ministration of nitrous-oxide inhalation anxiolysis:

(1) Completion of not less than a two-day course of training as described in the American Dental Association's (hereinafter referred to as "ADA") "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry," or its equivalent.

(2) Completion of training equivalent to that described above while a student in an ADA-accredited undergraduate dental school program.

c. **Combination Inhalation Enteral Anxiolysis.** A licensed dentist may employ or use combination inhalation enteral anxiolysis on an outpatient basis for dental patients without making application to the Board, i.e., the use of nitrous-oxide in combination with other agents to produce anxiolysis within appropriate dosages.

4. Board Permits Required

For the following, Board permits are required:

a. **Enteral Conscious Sedation.** No licensed dentist shall use enteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. For example, conscious sedation can be achieved through inhalation agents and/or multiple doses of oral medications. Regardless of the enteral technique utilized, a dentist must have a permit to sedate a patient beyond anxiolysis.

b. **Parenteral Conscious Sedation.** No licensed dentist shall use parenteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for parenteral conscious sedation shall include the privileges of administering enteral conscious sedation in accordance with the provisions of this section.

c. **General Anesthesia.** No licensed dentist shall use general anesthesia in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for general anesthesia shall include the privileges of administering parenteral conscious sedation and enteral conscious sedation in accordance with the provisions of this section.

5. Criteria and Application for Anesthesia Permits

a. **Enteral Conscious Sedation.** A permit is required prior to administration of enteral conscious sedation, and in order to receive such permit, the dentist must do the following:

- (1) Apply on a prescribed application form to the Board;
- (2) Submit the specified application fee as stipulated in Section 10 of this regulation;
- (3) Produce evidence of a current Advanced Cardiac Life Support (hereinafter referred to as "ACLS") certificate, or a certificate from a Board-approved course; and
- (4) Provide evidence of one or more of the following:

(a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of enteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of enteral conscious sedation. Such certification shall specify the type, number of hours, and length of training. For dentists who administer enteral conscious sedation

to patients who are eighteen (18) years of age or under, or who are nineteen (19) years of age or over and who are deemed to be patients with special health care needs as previously defined, the minimum number of didactic hours shall be fifty (50), and the minimum number of clinical patient cases shall be ten (10). For those dentists who administer enteral conscious sedation to patients who are nineteen (19) years of age or older and who are not deemed to be patients with special health care needs, the minimum number of didactic hours shall be twenty-two (22) and the minimum number of clinically oriented experiences shall be fifteen (15). The training program must include physical evaluation, enteral conscious sedation, airway management monitoring, and emergency management. The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in enteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

(b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage enteral conscious sedation, commensurate with these guidelines.

(c) Until June 30, 2005, fulfillment of all requirements for grandfathering concerning administration of enteral conscious sedation by successfully completing an appropriate examination which includes:

- (i) Demonstration of five (5) or more years of routinely administering enteral conscious sedation immediately prior to making application for an enteral conscious sedation permit;
- (ii) Discussion and review of three (3) cases including anesthetic technique;
- (iii) Review of records; and
- (iv) Demonstration of managing emergencies.

b. **Parenteral Conscious Sedation.** A permit is required prior to administration of parenteral conscious sedation, and in order to receive such permit, the dentist must do the following:

- (1) Apply on a prescribed application form to the Board;
- (2) Submit the specified application fee as stipulated in Section 10 of this regulation;
- (3) Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
- (4) Provide evidence of one or more of the following:

(a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of

parenteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of parenteral conscious sedation. Such certification shall specify the type, number of hours, and length of training. The minimum number of didactic hours shall be sixty (60), and the minimum number of clinical patient cases shall be twenty (20). The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in parenteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage parenteral conscious sedation, commensurate with these guidelines.
- c. **General Anesthesia.** A permit is required prior to administration of general anesthesia, and in order to receive such permit, the dentist must do the following:
 - (1) Apply on a prescribed application form to the Board;
 - (2) Submit the specified application fee as stipulated in Section 10 of this regulation;
 - (3) Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
 - (4) Provide evidence of one or more of the following:
 - (a) Completion of an advanced training program in anesthesia and related academic subjects beyond the undergraduate dental curriculum that satisfies the requirements described in Parts I, II, and III of the ADA's "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry" at the time training was commenced.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage general anesthesia, commensurate with these guidelines.

- 6. **Facilities Wherein Anesthesia Is Administered**
 - a. All facilities wherein any anesthesia is administered must be properly equipped for the administration of anesthesia and staffed with a supervised team of auxiliary personnel capable of reasonably assisting the dentist with procedures, problems, and emergencies incident thereto. The adequacy of the dental facility and competence of the anesthesia team shall be determined by the Board.
 - b. The Board adopts the standards regarding the equipment within a dental facility as set forth by the American Association of Oral and Maxillofacial Surgeons (hereinafter referred to as "AAOMS") in the "Office Anesthesia Evaluation Manual," latest edition, as the standards by which each dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia must meet. Certification of offices by AAOMS as meeting the standards adopted constitutes a *prima facie* showing that the dentist meets the standards. Copies of the "Office Anesthesia Evaluation Manual" are available from AAOMS at 9700 West Bryn Mawr Avenue, Rosemont, IL 60018-5701.
 - c. Any dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia at a dental facility other than that dentist's own office or dental facility must ensure that the proper equipment and personnel as required above are present.
- 7. **Site Visits and Periodic Inspections Pertaining to Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits**
 - a. Prior to the issuance of such permits the Board shall conduct an on-site inspection of the dental facility, equipment, and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board, and the cost thereof shall be included in the anesthesia permit application fee. Evaluations shall be performed by a minimum of two (2) qualified experts, as determined by the Board.
 - b. Any missing or malfunctioning equipment shall be called to the attention of the applicant, and a permit shall not be issued until the Board's experts determine that all equipment is available and properly functioning. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.
 - c. All facilities wherein enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia may be administered shall be inspected at least once every five (5) years beginning from the date of the initial permit, as designated by the Board, to ensure that all equipment is of the appropriate type and in good working order. The Board also shall have the discretion to inspect any dental facility at any time for good cause. Any permitted dentist with missing or malfunctioning equipment shall cease administering anesthesia until his/her dental facility has been properly equipped with the required equipment or until such malfunctioning equipment has been satisfactorily repaired and until such time as the Board is in receipt of proof that the equipment has been repaired to the Board's satisfaction.



District II annual meeting, from left-to-right: Joseph S. Young, DMD; A. Roddy Scarbrough, DMD, Eleanor A. Gill, DMD, James M. Huoni, DMD, and Robert L. Smith, Jr., DDS

8. Advanced Cardiac Life Support and Cardiopulmonary Resuscitation
 - a. Any dentist using enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia shall at all times be ACLS certified or hold a certificate from a Board-approved course, and his/her auxiliary personnel must meet the requirements for Cardiopulmonary Resuscitation (hereinafter referred to as "CPR") as set forth in Board Regulation 45.
 - b. A dentist utilizing nitrous-oxide inhalation analgesia and his/her auxiliary personnel must meet the requirements for CPR as set forth in Board Regulation 45.
9. Renewal of Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits
 - a. Any dentist holding a permit of authorization issued by the Board shall be subject to review, and such permit must be renewed at the same time as the dentist renews his/her Mississippi dental license.
 - b. The Board shall, in accordance with its laws, rules, and regulations, together with the appropriate and required information and renewal fee, renew the enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, unless the holder is informed in writing that a re-evaluation of credentials and/or facilities is to be required. In determining whether such re-evaluation is necessary, the Board shall consider such factors as it deems pertinent, including, but not limited to, patient complaints and reports of adverse occurrences.
 - c. At the time the dentist renews his/her enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, he/she shall submit proof of current ACLS certification and current CPR certification for all dental auxiliaries who have direct patient care responsibilities.
 - d. Certification cards issued by the Board upon renewal of anesthesia permits shall indicate the date wherein the required periodic five (5) year inspection is due to be performed by the Board.
10. Permit Fees

For the purpose of determining permit fees only, the fees for enteral conscious sedation and/or parenteral conscious sedation permits shall be deemed to be equivalent to those as set forth in Miss. Code Ann. § 73-9-43 and Board Regulation 37 for general anesthesia permits.
11. Penalties for Non-Compliance

Violating the provisions of this regulation shall subject the dentist to disciplinary action, after a hearing, as provided by the Mississippi laws pertaining to the practice of dentistry.

Regulation Twenty-Nine adopted by the Mississippi State Board of Dental Examiners June 4, 1987; amended May 4, 1990; amended September 25, 1992; amended December 4, 1992; amended December 8, 1995; amended February 9, 1996; amended July 21, 2000; amended December 7, 2001; amended March 5, 2004; amended November 19, 2004; amended January 7, 2005; amended December 2, 2005; amended February 24, 2006.

BOARD REGULATION 37 LICENSE RENEWAL AND FEE SCHEDULE

On August 5, 2005, the Board amended Regulation 37 to stipulate biennial renewal for dentists beginning 2005-2007 and dental hygienists and radiology permit holders beginning 2006-2008. Furthermore, references to IV Sedation Permit were changed to Parenteral Conscious Sedation Permit, and fees for Enteral Conscious Sedation Permits were added commensurate with fee language in Board Regulation 29.

On February 24, 2006, the Board again amended Regulation 37 to reduce the fees for applying for a license by examination (reduced to \$250 for dentists and \$150 for dental hygienists) and increase the fees for applying for a license by credentials (increased to \$2,500 for dentists and \$750 for dental hygienists).

On June 16, 2006, the Board once again amended Regulation 37 to mandate a \$25 per year renewal assessment for dental hygienists to participate in the Mississippi Professionals Health Program (MPHP). Paragraph 2 of Regulation 37 now reads as follows:

The payment of the 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 September 1, shall satisfy the renewal fee requirements for the renewal period during which licensure or permit status was granted and for the upcoming renewal period beginning September 1 of that current year.
The payment of the renewal fee for impaired licenses is mandatory for all currently licensed dentists and dental hygienists.

This regulation is not being reprinted in this newsletter but is available on the Board's web site (<http://www.msbd.state.ms.us>).



District V annual meeting, from left-to-right: A. Roddy Scarbrough, DMD, Alvin L. Felts, Jr., DDS, Eleanor A. Gill, DMD, Joseph S. Young, DMD, and Ms. Connie Lane

BOARD REGULATION 43 ADVERTISING

On December 2, 2005, the Board amended Regulation 43 by changing the first sentence of section 3 to read as follows:

All advertisements shall contain the full name and degree of the practitioner who either will provide services referenced in the advertisement or who is a principal shareholder, owner, or partner in the dental practice.

On February 24, 2006, the Board **RESCINDED** the December 2, 2005 amendment to section 3, which, in essence, caused section 3 of Regulation 43 to revert to its original language, which reads as follows:

All advertisements shall contain the full name and degree of the practitioner who will provide services. If services are referenced in the advertisement, the advertisement shall state either "general practice" or "general dentistry," or the American Dental Association recognized specialty that the practitioner practices immediately following the name and degree of the practi-

tioner. The word "family" may be substituted for the word "general."

This regulation is not being reprinted in this newsletter but is available on the Board's web site (<http://www.msbd.state.ms.us>).

DENTAL HYGIENISTS IN MPHP



For the past six (6) years, the Board and the Mississippi Professionals Health Program (MPHP), formerly known as the Mississippi Recovering Dentists Program, have worked together in assisting dentists with potentially impairing conditions such as mental/emotional illness and addiction disorders. The results have been **WONDERFUL!** Dentists have been able to return to their profession, reunite with their families, and, literally, have their lives saved. A great deal of assistance has come from dentists throughout our State in their willingness to step forward and help their peers and friends.

On June 16, 2006, the Board amended Regulation 37 which, effectively, mandates an additional \$25 per year renewal fee for dental hygienists' participation in the MPHP. The Board will begin biennial renewal for dental hygienists and radiology permit holders beginning September 1, 2006, and, as such, dental hygienists will be required to remit \$50 for the MPHP for their two-year renewal period. This fee will be transferred to the MPHP for treatment, monitoring, and scholarships for dental hygienists with potentially impairing conditions. Addiction and psychiatric illnesses cross all social barriers, and there are dental hygienists who need help. You can help your fellow dental hygienists with a simple telephone call to the MPHP at 1-800-844-1446. The confidentiality provided by the MPHP has proven to be quite successful. I **STRONGLY** encourage you to help the Board and the MPHP help others.

Submitted by Thomas H. Wiggins, Jr., D.M.D.



District VI annual meeting, from left-to-right: James R. Hupp, DMD; T. Delton Moore, Jr., DDS; Robert W. Rives, DDS; William T. O'Brien, III, DDS; Barbara L. O'Brien, RDH; James R. Dumas, Jr., DDS; A. Roddy Scarbrough, DMD; Joseph S. Young, DMD; Ms. Connie Lane; Eleanor A. Gill, DMD; Angela Neely Overstreet, DMD; and Sherry C. Pippin, DMD



THINGS TO NOTE

- K** As mentioned in the "Regulation Highlight" section, at its meeting on 02/24/2006, the Board amended Regulation 29 (administration of anesthesia) regarding, among other issues, administration of anesthesia utilizing CRNAs in dental or hospital facilities. In essence, if anesthesia is administered by a CRNA in a dental facility, the dentist must possess a currently valid Board-issued anesthesia permit commensurate with the level of anesthesia being administered by the CRNA, and the dentist must have entered into a Mississippi Board of Nursing collaborative/consultative relationship with a CRNA which includes protocols/practice guidelines for the administration of anesthesia by the CRNA.
- K** At its 12/02/2005 meeting, the Board determined that nothing in Regulation 29 prohibits a dentist from utilizing Halcion for dental procedures.
- K** At its 08/05/2005 meeting, the Board voted unanimously to join the Council of Interstate Testing Agencies (CITA) as a regional testing agency, with the caveat that Mississippi would continue to administer its licensure examination and would select who functions as clinical floor examiners and grading examiners during the conduct of its examination.
- K** At its 10/28/2005 meeting, the Board determined that candidates who successfully complete the CITA dental and dental hygiene examinations will have five (5) years from the date of successful completion of those examinations to apply for licensure by examination in the State of Mississippi. Furthermore, at its 04/14/2006 meeting, the Board further determined that candidates must demonstrate a minimum of ninety (90) days of active practice each year during the period of time from examination completion to application for licensure by examination with the Board.
- K** At its 02/24/2006 meeting, the Board unanimously approved accepting the Louisiana licensure examination as fulfilling licensure by examination requirements here in Mississippi. Also, just prior to the Board's 02/24/2006 meeting, the Louisiana State Board of Dentistry (LSBD) voted unanimously to accept Mississippi's licensure examination as fulfilling its licensure by examination requirements. These decisions are effective with the 2006 testing session and are **NOT** retroactive. According to correspondence recently received from the LSBD, the LSBD allows candidates one (1) year from the date of successful completion of a Louisiana-approved clinical licensure examination to apply for licensure by examination in the State of Louisiana.
- K** On 02/10/2006, the Board administered the first CITA dental patient-based examination at the UMMC School of Dentistry. Of the 36 dental candidates, the Board had 6 failures, all of which were on the restorative section, with no failures on the periodontal section. On 04/28/2006, dental candidates were administered manikin and patient-based re-examinations, and the Board reported one (1) failure for the entirety of its 2005-2006 testing session.
- K** On 05/19/2006, the Board administered the first CITA dental hygiene examination at the UMMC School of Dentistry. Of the 67 dental hygiene candidates, the Board had 4 failures. A re-examination is scheduled for 08/04/2006 at the UMMC School of Dentistry.

K At its 04/14/2006 meeting, the Board determined that licensed Mississippi dentists who initially take impressions for athletic mouthguards **MUST** actually fabricate, adjust, and deliver the athletic mouthguard, i.e., the fabrication and final delivery of the mouthguard **CANNOT** be performed by members of the athletic department, as this is construed as practicing dentistry.

K At its 06/16/2006 meeting, the Board responded to a request from the American Association of Oral & Maxillofacial Surgeons (AAOMS) concerning microdermabrasion being performed in Mississippi dental offices. The Board responded by referencing a 01/23/1998 determination which reads as follows:

At its meeting on January 23, 1998, the Mississippi State Board of Dental Examiners determined that a licensee may perform dental procedures, including hair transplants, for which said licensee received training as part of the curriculum of a dental school accredited by the Council on Dental Education of the American Dental Association, all in accordance with the definition of "dentistry" as currently defined by Miss. Code Ann. § 73-9-3 (Supp. 1972).

K The following determinations have been made by the Board regarding appropriate procedures performed by dental auxiliaries:

(At its 02/24/2006 meeting, the Board determined that licensed Mississippi dental hygienists and dental assistants are **NOT** allowed to perform sulcular debridement of periodontal pockets using a Diode dental laser.

(At its 06/16/2006 meeting, the Board determined that licensed Mississippi dental hygienists and dental assistants are **NOT** allowed to remove facial hair with lasers in a dental office.

(At its 06/16/2006 meeting, the Board reaffirmed a previous determination that licensed Mississippi dental hygienists and dental assistants **MAY** place and pack retraction cords under the direct supervision of a licensed dentist. However, pursuant to item number 11 in Regulation 13 (supervision and delegation of procedures to dental auxiliaries), licensed Mississippi dental hygienists and dental assistants **MAY NOT** place any subgingival medicated cords; although, the placement of periodontal treatment agents **MAY** be performed by licensed Mississippi dental hygienists.

K To fulfill the forty (40) required continuing education hours during the two-year reporting period, licensed dentists **SHALL** obtain a minimum of twenty (20) hours of clinical continuing education. To fulfill the twenty (20) required continuing education hours during the two-year reporting period, licensed dental hygienists **SHALL** obtain a minimum of ten (10) hours of clinical continuing education. Clinical continuing education is defined as **personal attendance at clinical courses pertaining to the actual delivery of dental services to patients.**

K For licensed Mississippi dentists and dental hygienists to remain on "active" status, they **MUST** fulfill all continuing education requirements and **MUST** at all times be current in CPR or ACLS. ACLS is required for dentists with anesthesia permits. Dentists and dental hygienists who are listed as "inactive" for three (3) or more years and who have not practiced their profession in another state or jurisdiction **MUST** successfully complete a clinical assessment prior to returning to "active" status.

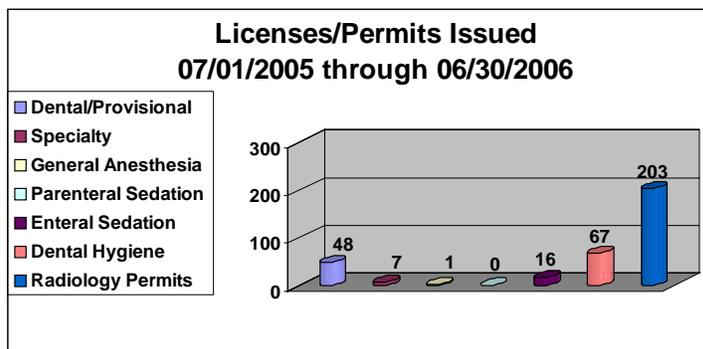
K If a dentist advertises under any name other than his/her own name and degree, i.e., a corporate/trade name, that corporate/trade name **MUST** be approved by the Board prior to any such advertisement.

K The Board is continuing to consider the feasibility of allowing licensed Mississippi dental hygienists, solely under the direct supervision of licensed Mississippi dentists, to administer local anesthesia. The licensed Mississippi dental hygienist would be required to obtain the appropriate education and training and subsequently apply to the Board for a permit to administer local anesthesia. Furthermore, even if a licensed Mississippi dental hygienist holds a permit to administer local anesthesia, the dental hygienist would not administer local anesthesia unless the licensed Mississippi dentist decides this is appropriate for his/her office. At the request of the Board, a survey is being conducted by the Mississippi State Department of Health (MSDH) concerning this issue, and the results of the survey are expected to be presented to the Board at either its 08/04/2006 or 09/08/2006 meetings. Information as to whether the Board has decided to allow local anesthesia to be administered by licensed Mississippi dental hygienists will be in upcoming editions of the Dental Digest.

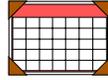
K At its 10/28/2005 meeting, the Board unanimously approved the creation of an ADA-accredited dental assisting program at Meridian Community College, which should begin January 2007.

K **Biennial renewal for dental hygienists and radiology permit holders is just around the corner!** Renewal notices will be mailed the last week of August for the 2006-2008 biennial period. Renewal occurs September 1 through October 31, followed by a two-month penalty phase. Furthermore, all licenses/permits not renewed on or before December 31 will be voided on January 1, 2007 for a failure to re-register. Also, dental hygienists and radiology permit holders will be able to renew their licenses on-line via the State of Mississippi's e-commerce portal. Additionally, the Board's web site will have a link to the e-commerce portal for on-line renewal. In essence, in lieu of having to make changes to renewal forms, sign the forms, write a check, and mail all materials to the Board's office, dental hygienists and radiology permit holders will be able to handle all renewal activities via the Internet and pay with VISA, MasterCard, debit cards, or electronic checks. A currently valid e-mail address is required for on-line renewal. Dentists will be able to handle their renewal activities on-line effective with their 2007-2009 biennial renewal. More information concerning on-line renewal will be mailed with the renewal notices for dental hygienists and radiology permit holders.

K The Frequently Asked Questions (FAQs) section of the Board's web site contains answers to many questions the Board handles on a daily basis. All licensees and permit holders are encouraged to visit the web site (<http://www.msbde.state.ms.us>) and review the FAQs section.



NOTEWORTHY DATES



August 4, 2006
 September 8, 2006
 November 3, 2006

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 two (2) weeks 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. You also may check the Board's web site (<http://www.msbde.state.ms.us>) to verify Board meeting and other dates by clicking the "Important Dates" button. The following are dates for Board meetings through December 2006:

Please visit the Board's web site to familiarize yourself with upcoming dates for Board-approved radiology permit seminars. Seminars are offered through Hinds Community College, Louisiana State University, Meridian Community College, Mississippi Gulf Coast Community College, Northeast Mississippi Community College, and Pearl River Community College. Remember that no one, other than a currently licensed Mississippi dentist or dental hygienist, may administer radiographs in the dental office without first obtaining a radiology permit from the Board.

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DISCIPLINARY ACTIONS

The following report on disciplinary actions covers the period July 1, 2005 through June 30, 2006. 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 radiology permit holder 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. Further, it should be noted that the names of persons herein provided may be similar to the names of persons who have not had disciplinary actions or corrective measures taken by the Board. 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.

- Abide, III, D.D.S., Albert Kalil;** Jackson, MS; MSBDE Docket No. 2006-006
 Date/Action: 04/14/2006
 Allegation: Failure to state "general practice" or "general dentistry" when noting services; making laudatory statements, i.e., "areas of expertise," which may lead patient to believe licensee is licensed specialist.
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$200 fine; \$125 costs.
- Bailey, Jr., D.M.D., Kenneth A.;** Jackson, MS; MSBDE Docket No. 2004-057
 Date/Action: 08/05/2006
 Allegation: Failure to include full name and degree; failure to state "general practice" or "general dentistry" when noting services; failure to clearly define service offered; advertisement misleading because makes only partial disclosure of relevant facts.
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$400 fine; \$2,475 costs.
- Cox, D.M.D., Tommy Lester;** Southaven, MS; MSBDE Docket No. 2006-004
 Date/Action: 02/24/2006
 Allegation: Failure to comply with CPR requirements during 2003-2005 CE compliance audit.
 Disposition: Consent Order. Ensure compliance with CE/CPR regulations; \$500 fine; \$105 costs.
- Fowler, Jr., D.M.D., Gibbs J.;** Brandon, MS; MSBDE Docket No. 2004-096
 Date/Action: 10/28/2005
 Allegation: Prescribing outside scope of dentistry; practicing incompetently or negligently; practicing deceit or fraud upon public; and failure to maintain patient records.
 Disposition: Consent Order. Submit for comprehensive chemical dependency evaluation; surrender DEA privileges; obtain 20 hours of CE concerning clinical, legal, and ethical issues of prescribing abusable drugs; obey all state, federal, and local laws; practice subject to periodic monitoring by Board; submit proof of compliance with CE/CPR regulations; \$1,000 fine; \$1,525 costs.
- Date/Action: 06/16/2006
 Allegation: Failure to submit for comprehensive chemical dependency evaluation.
 Disposition: Voluntary surrender of dental license.
- Harrison, D.M.D., Tina Nicole Flint;** Union, MS; MSBDE Docket No. 2006-002
 Date/Action: 02/24/2006
 Allegation: Failure to comply with 2003-2005 CE compliance audit.
 Disposition: Consent Order. Ensure compliance with CE/CPR regulations; \$500 fine; \$105 costs.
- Henderson, D.D.S., Irvin W.;** Magnolia, MS; MSBDE Docket No. 2005-016
 Date/Action: 06/16/2006
 Allegation: Administering, dispensing, or prescribing prescriptive medications or drugs outside course of legitimate dental practice; inadequate patient records; and practicing incompetently or negligently.
 Disposition: Consent Order. Surrender DEA privileges for 1 year; successfully complete "Clinical, Legal, and Ethical Issues in Prescribing Abusable Drugs" seminar; successfully complete 8 hours of CE regarding patient recordkeeping; obey all state, federal, and local laws; practice subject to periodic monitoring by Board; submit proof of compliance with CE/CPR regulations; \$1,000 fine; \$1,388 costs.
- Horecky, D.M.D., John Griffin;** Jackson, MS; MSBDE Docket No. 2004-058
 Date/Action: 08/05/2006
 Allegation: Failure to include full name and degree; failure to state "general practice" or "general dentistry" when noting services; failure to clearly define service offered; advertisement misleading because makes only partial disclosure of relevant facts.
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$400 fine; \$2,134 costs.
- Leslie, D.M.D., Altus Harvey;** Grenada, MS; MSBDE Docket No. 2005-031
 Date/Action: 10/28/2005
 Allegation: Failure to comply with 2003-2005 CE compliance audit.
 Disposition: Consent Order. Ensure compliance with CE/CPR regulations; \$500 fine; \$140 costs.
- Luckett, D.M.D., Karen Bryant;** McComb, MS; MSBDE Docket No. 2006-003
 Date/Action: 02/24/2006
 Allegation: Failure to comply with CPR requirements during 2003-2005 CE compliance audit.
 Disposition: Consent Order. Ensure compliance with CE/CPR regulations; \$500 fine; \$105 costs.
- Manning, D.M.D., Robert Glynn;** Flowood, MS; MSBDE Docket No. 2005-032
 Date/Action: 02/24/2006
 Allegation: Failure to comply with 2003-2005 CE compliance audit.
 Disposition: Consent Order. Ensure compliance with CE/CPR regulations; \$500 fine; \$120 costs.
- Mincy, D.D.S., Catherine J.;** Booneville, MS; MSBDE Docket No. 2005-023
 Date/Action: 12/02/2005
 Allegation: Misleading advertising, i.e., advertisement makes only partial disclosure of relevant facts and appeals, or is likely to appeal, to layperson's fears, e.g., "its no-pain dentistry for kids."
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$500 fine; \$175 costs.
- Parks, D.M.D., David King;** Clinton, MS; MSBDE Docket No. 2005-014
 Date/Action: 08/05/2006
 Allegation: Failure to include full name and degree; failure to state "general practice" or "general dentistry" when noting services; failure to clearly define service offered.
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$100 fine; \$175 costs.
- Rives, II, D.M.D., William Oscar;** Ridgeland, MS; MSBDE Docket No. 2006-005
 Date/Action: 04/14/2006
 Allegation: Failure to state "general practice" or "general dentistry" when noting services.
 Disposition: Consent Order. Ensure all future advertisements comply with regulations; submit proof of CE/CPR; \$100 fine; \$145 costs.
- Spencer, William;** Richton, MS; Civil Action No. 96-0121-TH
 Date/Action: 06/05/2006
 Allegation: Contempt of previous court order and continuing to practice dentistry without license.
 Disposition: Judgement of Contempt. Immediately cease and desist from all actions prohibited by 08/19/1987 Final Decree; 30 days in jail for contempt suspended provided adhere to current Judgment; immediately cease and desist from practicing dentistry; cannot construct, repair, mend, fabricate, realign, or supply dentures, artificial teeth, crowns, partials, or bridges without valid authorization from Mississippi licensed dentist; cannot make impressions of human mouth; cannot advertise or hold himself out to public as a dentist or as making dentures for public; must provide list of all work performed including names of all licensed dentists for whom he performs work; provide access to facility for inspection; prohibited from seeing patients directly; post \$5,000 performance bond; \$13,822 costs.
- Wolfe, Jr., D.M.D., Lloyd B.;** Jackson, MS; MSBDE Docket No. 98-008
 Date/Action: 10/28/2005
 Allegation: Licensee requested removal of all remaining restrictions.
 Disposition: Administrative Order. All remaining restrictions removed due to licensee's compliance with previous Board Order.



Attendees at the January 2006 MSBDE presentation to dental assisting students at Hinds Community College, Jackson campus.



Attendees at the January 2006 MSBDE presentation to dental hygiene students at the UMMC School of Health-Related Professions.

MSBDE NEWSLETTER

Suite 100
600 East Amite Street
Jackson, MS 39201-2801



**MISSISSIPPI STATE BOARD OF DENTAL EXAMINERS
SUITE 100, 600 EAST AMITE STREET
JACKSON, MS 39201-2801**

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U.S. POSTAGE PAID
JACKSON, MS
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MSBDE NEWSLETTER
Suite 100
600 East Amite Street
Jackson, MS 39201-2801

CHANGE OF ADDRESS NOTIFICATION

Pursuant to Miss. Code Ann. § 73-9-19, every licensed dentist and dental hygienist "shall notify the board within thirty (30) days of any change in address of his office or residence." Additionally, Board Regulation 25, 4.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.

Full Name: _____ MS License No.: _____

Old Address: _____

New Address: _____

Telephone: _____ Effective Date of Change: _____

Employer: _____

Type of Change: Home Address Office Address Mailing Address Satellite Address