Currently, William T. O’Brien, III, DDS (District VI) is President, Robert L. Smith, Jr., (District II) is Vice-President, and Carl H. Boykin, DDS (State-at-Large Dentist) is Secretary. They will serve in these positions until 06/30/2010. New appointments for Districts IV and V and the State-at-Large Dental Hygiene position were made effective 07/01/2009 for six-year terms concluding 06/30/2015. These appointments were Jeffery D. Hartsog, DMD (District IV), Robert T. Watts, Jr., DMD (District V), and Janet Brice McMurphy, RDH (State-at-Large Dental Hygienist). New appointments for Districts I and VI will be made in 2010 effective 07/01/2010, and new appointments for Districts II and III will be made in 2011 effective 07/01/2011. Following the 07/01/2011 appointments, the Board structure will remain unchanged until 07/01/2014, at which time the Board will begin its cycle of new appointees with the State-at-Large Dentist position. Board members serve six-year, non-consecutive terms.

All Board meetings are open to the public except when the Board makes a determination that it is necessary to go into Executive Session, and this usually is reserved for personnel and disciplinary actions. All disciplinary hearings are held in Open Session; however, the Board’s deliberations following the hearing are held in Executive Session. Furthermore, no items will be added to Board meeting agendas as of two (2) weeks prior to the scheduled Board meeting date. Board meeting and licensure examination dates through 12/31/2010 are as follows:

- 05/14/2010
- 05/27-28/2010 (CITA examinations)
- 08/06/2010
- 11/05/2010

The Board’s web site address changed in 2009 to the following: http://www.dentalboard.ms.gov, and the Board's primary e-mail address changed to dental@dentalboard.ms.gov. Furthermore, the site’s look and feel were completely revamped during this same time period; however, the site continues to have a great deal of information, as well as most, if not all, of the forms utilized by the Board. The laws and regulations are an integral part of the web site, and licensees are encouraged to visit the web site often to keep abreast of any changes effected by the Board. Also, the web site has selected information from the Board’s databases to be used for licensure verification and/or recruiting purposes. All of the Board’s forms and applications are formatted in Adobe Acrobat PDF forms, which means that applications and forms may be completed on a personal computer using Adobe Reader software—simply fill-in-the-blanks, print the application or form, and submit the document to the Board! Also, the Board plans to enhance its statistical information on the web site, which will be extremely useful for licensees, other Mississippi state agencies, and the public-at-large when needing a variety of statistical information.

Don’t forget to thoroughly review each edition of The Dental Digest, which is mailed to all li-
censees and permit holders. The newsletter always has a variety of important and useful information. All of the Board’s amendments to its laws and regulations are reported in its newsletter, and Board determinations as to permissible procedures for licensed Mississippi dentists and dental auxiliaries working under the direct supervision of licensed Mississippi dentists are noted in the “Things to Note” section of each newsletter. If you have any questions about any item appearing in the newsletter, please feel free to contact the Board’s office for clarification.

The Board enhanced its database by activating a blast e-mail feature wherein e-mails may be sent from the Board to licensees and permit holders who have provided e-mail addresses to the Board. The Board envisions utilizing this feature to more expeditiously provide information to its licensee population as to Board determinations, adoption/amendment of regulations, and important reminders. If you have an e-mail address and have not notified the Board of such, or if you have changed your e-mail address, please notify the Board of this information so that you may be included in these most important e-mails.

At its 02/06/2009 meeting, the Board considered a request from a dentist for approval of a Cardiopulmonary Resuscitation (CPR) course to fulfill the guidelines of Board Regulation 45. The Board rejected this request for CPR course approval, inasmuch as the CPR course did not contain a hands-on mannequin component. After discussing this request, the Board considered amending Board Regulation 45 to require that all CPR courses contain a hands-on mannequin component as part of that CPR course for it to be acceptable toward fulfilling the requirements of Board Regulation 45. The Board assigned this issue to its Rules and Regulations subcommittee, and the Board amended Regulation 45 at its 05/08/2009 meeting. Please see the “Regulation Information” section of this report for details concerning this amendment.

At its 02/06/2009 meeting, the Board considered whether Board Regulation 14 (Candidate Participation in Licensure Examination) should be amended to more accurately comport with the remediation and failure guidelines of the Council of Interstate Testing Agencies (CITA) and other Board-approved licensure examination testing entities. Since CITA administers its licensure examination in parts versus as an entire unit, and since the former wording and intent of this Regulation viewed licensure examinations as an entire unit, the Board determined that amendments may be necessary. The Board assigned this issue to its Rules and Regulations subcommittee, and the Board amended this Regulation at its 05/08/2009 meeting. Please see the “Regulation Information” section of this report for details concerning this amendment.

At its 02/06/2009 meeting, the Board considered a request from a dentist inquiring whether Dentox/Botox could be utilized by licensed Mississippi dentists in the treatment of TMD. At its 10/19/2007 meeting, the Board determined that all “extraoral cosmetic procedures” must be performed only by licensed Mississippi oral and maxillofacial surgeons. Since TMD is considered a “dental” condition and not in the same category as an “extraoral cosmetic procedure,” the Board took this request under advisement until further research could be performed and presented for the Board’s review at its 05/08/2009 meeting. At its 05/08/2009 meeting, the Board determined that it does not have sufficient information to deem Dentox/Botox as an appropriate treatment modality for TMD.

At its 02/06/2009 and 11/13/2009 meetings, the Board again discussed potential amendments to Board Regulation 14 (Candidate Participation in Licensure Examination) and Board Regulation 61 (Mobile and Portable Dental Facilities) to add an exemption for those operations providing services SOLELY on military bases and SOLELY on active duty military personnel. Please see the “Regulation Information” section of this report for details concerning this amendment.

At its 08/07/2009 and 11/13/2009 meetings, the Board again discussed potential amendments to Board Regulation 14 (Candidate Participation in Licensure Examination) and Board Regulation 61 (Mobile and Portable Dental Facilities) to add an exemption for those operations providing services SOLELY on military bases and SOLELY on active duty military personnel. Please see the “Regulation Information” section of this report for details concerning this amendment.

(Continued on page 3)
Licensure Examination) regarding what the Board would consider in making determinations as to licensure examinations being approved by the Board for candidates who apply for licensure by examination. For example, the Board currently recognizes the licensure examination administered by the Council of Interstate Testing Agencies (CITA), and the Board anticipates that it may receive requests in the future from other regional/state testing agencies to consider accepting those licensure examinations for licensure by examination in Mississippi. The Board assigned this issue to its Rules and Regulations subcommittee for a report/recommendations at its 03/12/2010 Board meeting, whereupon, based on the recommendations presented by the Rules and Regulations subcommittee at the 03/12/2010 meeting, the Board took no further action on this issue.

At its 11/13/2009 meeting, the Board discussed whether to allow the administration of local anesthesia by currently licensed Mississippi dental hygienists under the direct supervision of currently licensed Mississippi dentists. During its discussions, the Board reiterated that (a) educational standards and continuing education would be required for any dental hygienist who wishes to obtain a local anesthesia permit; (b) administration of local anesthesia by currently licensed Mississippi dental hygienists would be performed ONLY under the direct supervision of currently licensed Mississippi dentists; and (c) these procedures would be performed ONLY if currently licensed Mississippi dentists choose to delegate them in their dental offices, i.e., even if a dental hygienist holds a local anesthesia permit, that dental hygienist will not be allowed to administer local anesthesia if the dentist chooses not to delegate this procedure in his/her dental office. The Board referred this matter to an ad hoc subcommittee to gather additional information and provide recommendations at its 03/12/2010 meeting, at which time the Board voted to affiliate with the PHN effective 07/01/2010.

On 03/06-07/2009, CITA administered the dental licensure examination at the UMC School of Dentistry. The following are the pass/fail rates for this examination:

- **Endodontics**
  - 39 candidates — 38 passed; 1 failed
- **Prosthodontics**
  - 38 candidates — 35 passed; 3 failed
- **Periodontics**
  - 30 candidates — 28 passed; 2 failed
- **Restorative**
  - 30 candidates — 24 passed; 6 failed

(Continued on page 4)
On 06/05-06/2009, CITA administered dental and dental hygiene licensure examinations at the UMC School of Dentistry. The following are the pass/fail rates for these examinations:

- **Endodontics**
  - 4 candidates — 3 passed; 1 failed
- **Prosthodontics**
  - 7 candidates — 6 passed; 1 failed
- **Periodontics**
  - 2 candidates — 1 passed; 1 failed
- **Restorative**
  - 5 candidates — 4 passed; 1 failed
- **Dental Hygiene**
  - 78 candidates — 57 passed; 21 failed

On 08/28-29/2009, CITA administered dental and dental hygiene licensure examinations at the UMC School of Dentistry. The following are the pass/fail rates for these examinations:

- **Endodontics**
  - 7 candidates — 5 passed; 2 failed
- **Prosthodontics**
  - 7 candidates — 4 passed; 3 failed
- **Periodontics**
  - 6 candidates — 6 passed; 0 failed
- **Restorative**
  - 7 candidates — 6 passed; 1 failed
- **Dental Hygiene**
  - 28 candidates — 28 passed; 0 failed

The Board STRONGLY encourages Mississippi dentists and dental hygienists to visit CITA’s web site (http://www.citaexam.com/grader_info.htm) to review information as to how to register as a deputy examiner during the conduct of licensure examinations either in Mississippi or the various CITA member jurisdictions. Also, interested dentists and dental hygienists should review the “Policy for Acceptance of Deputy Examiners” on CITA’s web site, which accompanies the form to register as a deputy examiner. The Board feels it is EXTREMELY IMPORTANT to have as many deputy examiners from Mississippi as possible during the conduct of any licensure examinations in the State of Mississippi.

Remember that dentists may not refuse to give a patient his/her records upon request if the patient still owes a balance for services rendered. The ADA Code of Ethics and Board Regulation 53 prohibit this. Many telephone calls from potential complainants involve this very issue, and the Board tries to mediate whenever possible.

Remember that radiographs ALWAYS should be maintained in a patient’s file. Dentists should ensure that the originals or copies of all radiographs are maintained in the patient record, even if the dentist refers the patient to another dentist and transmits radiographs to the other dentist. Also, if the dentist transmits radiographs to a dental insurance company, etc., the dentist should ensure he/she has maintained either originals or copies of the radiographs in the patient record before transmission of the only radiographs in the patient record to any other entity. Otherwise, if the appropriate radiographs are not in the patient record, the dentist may be in violation of Board Regulation 53. All radiographs should be of good diagnostic quality, as well.

Remember to mail, fax, or e-mail address changes, employer changes, employee changes, name changes, etc., immediately after such changes take effect. Also, when available, notify the Board of these changes just prior to the effective date, as this will allow sufficient time for the changes to be made. The Board has an information change form available on its web site by selecting “Applications and Forms” and then “Change of Information” and following the instructions. E-mail confirmation is sent by the Board once all changes submitted via e-mail have been made.

Remember to very carefully read Board Regulation 43 regarding advertising prior to placing any advertisement in print or video format. Board Regulation 43 mandates that advertisements must not appeal to a layperson’s fears; a general dentist must note that he/she is a general dentist in each advertisement when referencing any type of service rendered, and the word “family” may be substituted for the word “general”; and no advertising disclaimer is required when listing services rendered.

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Remember that an anesthesia permit site visit is required when anesthesia permit holders move to or open a new office and when an anesthesia permit is first issued to a dentist, although he/she may be practicing in an office where anesthesia permit holders already practice and have had site visits. Anesthesia permits are issued to licensed Mississippi dentists and not the “facilities” wherein they practice, and follow-up site visits are scheduled on a five-year basis from the date the permit was issued.

Remember that, pursuant to Board Regulation 61, all mobile or portable dental operations have to be approved by the Board and must undergo a site visit. Applications for mobile or portable dental operations may be obtained from the Board’s office or from its web site.

Remember that a dental hygienist is NOT allowed to perform any intraoral procedures on NEW PATIENTS OF RECORD until the dentist has performed an initial oral examination prior to referring these patients for dental hygiene treatment. However, the dental hygienist may take the patient’s health history and blood pressure prior to the dentist’s initial oral evaluation.

Remember that all dental auxiliaries work ONLY under the DIRECT supervision of a currently licensed Mississippi dentist. Board Regulation 13 defines this level of supervision as follows:

Miss. Code Ann. §§ 73-9-3(i) and 73-9-5(2) state that the work of dental auxiliaries shall at all times be under the direct supervision of a licensed Mississippi dentist. This level of supervision requires that a dentist be physically present in the dental office or treatment facility, personally diagnose the condition to be treated, authorize the procedures to be performed, remain in the dental office or treatment facility while the procedures are being performed by the auxiliary, and evaluate the performance of the dental auxiliary.

As reported every year, a continuing problem is the fact that dental hygienists and dental assistants whose licenses/permits have been voided continue to gain employment by presenting original licenses/permits without a current certification card. Please remember that NO DENTAL HYGIENISTS MAY PRACTICE DENTAL HYGIENE WITHOUT A CURRENT DENTAL HYGIENE LICENSE, AND NO DENTAL ASSISTANTS MAY ADMINISTER RADIO-GRAPHS WITHOUT A CURRENT RADIOLOGY PERMIT ISSUED BY THE BOARD, both of which must be accompanied by a current certification card. This includes those dental assistants who have been hired and are awaiting the next available radiology seminar. Furthermore, remember that dental hygienists who have graduated from dental hygiene school and taken the clinical licensure examination, but who have not yet been issued licenses by the Board, ARE NOT ALLOWED TO PRACTICE DENTAL HYGIENE. Dentists are encouraged to request that dental auxiliaries present a current certification card after each renewal period or when considering hiring new auxiliaries. Additionally, licensees can check the Board’s web site to determine the current status of licenses or permits.

Annual random continuing education compliance audits for the 09/01/2007 through 08/31/2009 audit period were mailed on 11/19/2009 to 5% of the dentists and dental hygienists in each of the six (6) dental districts in the State. To-date, responses indicate several dentists and dental hygienists are not in compliance with the requirements of Board Regulations 41 (Continuing Education) and 45 (Cardiopulmonary Resuscitation). To ensure compliance with continuing education and CPR requirements, please remember the following:

(a) Only four (4) hours over the two-year reporting period of correspondence, home study, and computer-based courses may be counted toward continuing education.

(b) The continuing education period runs from September 1 through August 31 of the following year. Dentists must complete a minimum of 40 hours over a two-year period (20 hours of which must be clinical continuing education), and dental hygienists must complete 20 hours over the same two-year period (10 hours of which must be clinical continuing education). However, the Board recommends that all licensees complete 20 hours per year for dentists and 10 hours per year for dental hygienists to avoid falling behind in fulfilling continuing education requirements. There is no “carryover” of continuing education credits. Clinical continuing education is defined (Continued on page 6)
as “personal attendance at clinical courses pertaining to the actual delivery of dental services to patients.” Also, don’t forget that CPR certification counts for four (4) hours per year toward the clinical continuing education requirements.

(c) Copies of CPR cards and continuing education certificates of attendance or correspondence from course sponsors verifying attendance must be maintained a minimum of three (3) years from the date of CPR certification and/or continuing education course attendance.

(d) All continuing education, including computer-based, home study, and correspondence courses, must be approved by either the American Dental Association (ADA), Academy of General Dentistry (AGD), Mississippi Dental Association (MDA), Mississippi Dental Society (MDS), National Dental Association (NDA), Mississippi Dental Hygienists’ Association (MDHA), or American Dental Hygienists’ Association (ADHA). You must ensure that continuing education courses you wish to take have the prior approval/sponsorship of any of these organizations; otherwise, the continuing education course may not meet the requirements of Board Regulation 41. Also, another alternative would be to request Board approval of the course PRIOR to attending the course to ensure that it meets the guidelines set forth in Board Regulation 41.

(e) All dentists, dental hygienists and dental assistants with direct patient care responsibilities must AT ALL TIMES be current in CPR.

The 2009-2011 dental biennial renewal cycle began 09/01/2009 and concluded 10/31/2009. Licensees who did not renew by 10/31/2009 were allowed to renew during the following two-month penalty phase, which concluded 12/31/2009. Licenses and permits not renewed by 12/31/2009 are considered voided as of 01/01/2010, and void letters were transmitted to these licensees. Dental licensees, again, were able to renew their licenses/permits on-line via the State’s E-Commerce portal. As with prior renewal cycles, the Board has experienced a PHENOMENAL response to on-line renewal. The State of Mississippi accepts VISA, MasterCard, American Express, debit cards, and electronic checks for licensure/permit renewal. There is a small convenience fee for on-line renewal which is based on the total amount due, and the Board DOES NOT receive any of these monies. The convenience fee is split among the State (again, not the Board), the payment processor, and the credit card company.

The 2010-2012 dental hygiene and radiology permit holder biennial renewal cycle will begin 09/01/2010 and conclude 10/31/2010, followed by a two-month penalty phase. All licenses and permits not renewed by 12/31/2010 will be voided on 01/01/2011 for failure to renew. On-line renewal will be available for these licensees and permit holders, and reminders will be provided via the Board’s web site, e-mail blasts sent from the Board, and the Board’s newsletter, The Dental Digest.

Under the State’s Administrative Procedures Act, all rules or regulations adopted or amended by the Board must be filed with the Mississippi Secretary of State’s office and go through an overall 60-day waiting period (30 days from the initial filing and 30 days from the final filing) before an adopted or amended regulation becomes effective.

From 01/01/2009 until 12/31/2009, the Board amended Board Regulations 14 (Candidate Participation in Licensure Examination), 45 (Cardiopulmonary Resuscitation), and 61 (Mobile and Portable Dental Facilities), and PDF copies of these Board regulations are available on the Board’s web site by pressing “Laws and Codes” and then “Regulations Adopted by the Board.” A brief synopsis or reprint of regulations amended or adopted by the Board is placed in each edition of The Dental Digest, and you are STRONGLY ENCOURAGED to thoroughly review this section of the newsletter to keep abreast of changes to the Board’s laws and regulations.

At its 05/08/2009 meeting, the Board amended Section 5.a. of Board Regulation 14 (Candidate Participation in Licensure Examination) concerning remediation and failures of licensure examinations in parts versus as an entire unit to ensure greater consistency with the examination failure policy of the Council of Interstate Testing

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Agencies (CITA) and other Board-approved licensure examinations. Section 5.a. was amended to read as follows:

5.a. Candidates for licensure to practice dentistry or dental hygiene in the State of Mississippi who fail any part(s) of a Board-approved licensure examination will be required to adhere to all examination guidelines of the testing entity responsible for administering the Board-approved licensure examination. Further, in those instances where the testing entity requires remediation following failure(s) of Board-approved licensure examinations, a candidate for licensure to practice dentistry must take and successfully complete one (1) academic year of clinical training in an approved dental school before being allowed to take the same Board-approved licensure examination again. 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 same Board-approved licensure examination again.

At its 05/08/2009 meeting, the Board amended Sections 2 and 5 of Board Regulation 45 (Cardiopulmonary Resuscitation), as well as approved minor capitalization changes to the words “Cardiopulmonary Resuscitation” to ensure consistency throughout the Regulation. The amendments to Sections 2 and 5 involved (a) deleting the last part of the last sentence of Section 2 regarding a 180-day timetable due to a former amendment, as it no longer is applicable; and (b) requiring a hands-on mannequin component for Cardiopulmonary Resuscitation courses to be approved by the Board in Section 5. Sections 2 and 5 were amended to read as follows:

2. All dentists and dental hygienists licensed by the State of Mississippi and holding active licenses shall be currently certified in Cardiopulmonary Resuscitation. Further, all auxiliary personnel involved in direct patient care must be certified in Cardiopulmonary Resuscitation. All auxiliaries must be certified in CPR within one hundred eighty (180) days of employment.

5. Participation in approved Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), American Heart Association (AHA), or American Red Cross (ARC) courses may be used to fulfill the requirements of this Regulation. All other equivalent courses shall be approved by the Board on a case-by-case basis; however, in no instance shall any course be approved by the Board that does not contain a hands-on mannequin component.

At its 08/07/2009 meeting, the Board amended Board Regulation 61 (Mobile and Portable Dental Facilities). The Board amended Section 2 (Exemptions) to add an exemption for those mobile/portable dental operations providing services SOLELY on military bases and SOLELY to active duty military personnel. Section 2 of Board Regulation 61 now reads as follows:

2. Exemptions

a. Mobile dental offices and portable dental operations operated by agencies of the State of Mississippi which do not charge or collect any fees whatsoever for services provided are exempt from the requirements of this regulation.

b. Mobile dental facilities and portable dental operations contracted, operated, or deployed by the Federal or State military armed forces to provide dental services/treatment solely to Federal or State active duty military personnel, including military reservists, exclusively within the confines of the military base, armory, or installation within the State of Mississippi, are exempt from the requirements of this regulation. As used herein, the terms “military personnel” and “military reservists” do not include spouses and dependents.

(Continued on page 8)
The Board DID NOT pursue changes to the *Mississippi Dental Practice Act* during the 2010 Legislative Session. However, the Board, along with the Mississippi Dental Association (MDA), Mississippi Dental Society (MDS), and Mississippi Dental Hygienists’ Association (MDHA), endeavors to monitor all bills introduced during each legislative session.

As of the date of this report, 04/20/2010, several hundred bills had been introduced by various legislators.

Since these are particularly tough economic times, numerous bills were introduced affecting not only the licensee’s ability to practice, but also the Board’s ability to regulate the dental profession in this State. Fortunately, these bills died in committee.

For those of you who have Internet access, you may keep abreast of legislative activities during all legislative sessions by accessing the Legislature’s main web site (http://billstatus.ls.state.ms.us), and then selecting the “Bill Status” link.

Amendments to the Board’s laws effected during any legislative session are reported in the Board’s newsletter, *The Dental Digest*, posted on the Board’s web site, and sent via e-mail to licensees who list e-mail addresses with the Board.

The following table depicts the Board’s current licensee population as of 04/20/2010; licenses and permits issued from 01/01/2009 through 12/31/2009; and licenses and permits voided as a result of the 2009-2011 dental biennial renewal cycle.

<table>
<thead>
<tr>
<th>LICENSEE CATEGORY</th>
<th>CURRENT POPULATION</th>
<th>ISSUED 01/01/2009 -- 12/31/2009</th>
<th>2009-2011 RENEWAL VOIDS</th>
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</thead>
<tbody>
<tr>
<td>General Dental and Provisional</td>
<td>1,256</td>
<td>42</td>
<td>70</td>
</tr>
<tr>
<td>Specialty</td>
<td>247</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>General Anesthesia</td>
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<td>1</td>
</tr>
<tr>
<td>Parenteral Conscious Sedation</td>
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<tr>
<td>Enteral Conscious Sedation</td>
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<td>1</td>
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<tr>
<td>Dental Hygiene and Provisional</td>
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</tr>
<tr>
<td>Radiology Permits</td>
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<td><strong>TOTAL ALL CATEGORIES</strong></td>
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<td><strong>475</strong></td>
<td><strong>80</strong></td>
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</tbody>
</table>