OHIO STATE DENTAL BOARD
BOARD MEETING
September 12, 2018

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OHIO STATE DENTAL BOARD
BOARD MEETING
September 12, 2018

Attendance
The Ohio State Dental Board (Board) met in Room 1948, of The Vern Riffe Center for Government and the Arts, 77 South High Street, 19th Floor, Columbus, Ohio on September 12, 2018. Board members present were:

Ashok Das, D.D.S., President
Susan Johnston, R.D.H., Vice President
Patricia Guttman, D.D.S., Secretary
Kumar Subramanian, D.D.S., Vice Secretary
Theodore Bauer, D.D.S.

Canise Bean, D.M.D.
Tracy Intihar, Public member
Jamilee Krob, R.D.H.
Mary Kaye Scaramucci, R.D.H.
Andrew Zucker, D.D.S.

Bill Anderson, D.D.S. and Faisal Quereshy, D.D.S. were unable to attend the meeting as they were both out of the country.

The following guests were also in attendance: Katherine Bockbrader, Esq. of the Ohio Attorney General’s Office; Eric Richmond, Esq. and Henry Fields, D.D.S. of the Ohio Dental Association (ODA); Thomas Perrino, Esq. of Frank R. Recker & Associates; Nelson Heise, P.C.C.-S., Clinical Director of Ohio Physicians Health Program; Mark Wenzel, D.D.S. of the ODA Dentists Concerned for Dentists; Mary Ellen Wynn, D.D.S., M.B.A, Board-appointed Representative to the American Board of Dental Examiners, Inc.(ADEX); Mark T. Armstrong, D.D.S. of the Commission on Dental Competency Assessments (CDCA). Staff consisted of Harry Kamdar, M.B.A., Executive Director, Steve Kochheiser, Esq., Deputy Director, Zachary Russell, Legislative and Communications Coordinator, Kathy Carson and Barb Yehnert, Dental Board Enforcement Officers, and Malynda Franks, Administrative Professional, of the Ohio State Dental Board and other guests.

Call to Order
Ashok Das, D.D.S., introduced himself as the Board President and a general dentist from Mason. After extending greetings to everyone, President Das noted that there was a quorum present and called the meeting to order at approximately 1:35 p.m.

Observance of Silence in Memory of Dr. Michael Ginder
President Das then led the Board members and attendees in a moment of silence in memory of their fellow board member the late Dr. Michael Ginder. He then requested Executive Director Harry Kamdar to facilitate the meeting.

Board Business
Introductions
Board Members
Director Kamdar thanked everyone for attending the Board meeting and then introduced the rest of the Board members consisting of Ms. Susan Johnston, R.D.H., Vice President, Patricia Guttman, D.D.S., Secretary, Dr. Kumar

Director Kamdar then stated that Bill Anderson, D.D.S. and Faisal Quereshy, M.D., D.D.S. were unable to attend the meeting due to being out of the country.

Approval of Agenda
Director Kamdar asked if there was a motion to approve the agenda with the caveat to amend the agenda due to any extenuating circumstances.

Motion by Dr. Bean, second by Ms. Johnston, to approve the September 12, 2018 Board meeting agenda as presented.

Motion carried unanimously.

Review of Board Meeting Minutes
July 25, 2018 Meeting
Director Kamdar informed everyone that the draft Minutes from the July 25, 2018 meeting had been forwarded to the Board members for review prior to the meeting and stated that the final version was in their Board Notebooks for approval. He then asked if there was a motion regarding the Minutes.

Motion by Ms. Johnston, second by Dr. Zucker, to approve the July 25, 2018 Board meeting minutes as presented.

Motion carried unanimously.

Public Comment/Presentations/Correspondence
Presentations – Recognition of Service
Director Kamdar stated that it is customary for this Board to recognize immediate past Board members with certificates of appreciation for their service to the Board. He stated that today certificates of appreciation were being awarded to former Board members Burton Job, D.D.S., Ms. Ann Aquillo, and Ms. Constance Clark, R.D.H. . He expressed gratitude for their tireless service to the Board. Unfortunately, the award recipients were not able to attend due to schedule conflicts. So, their framed certificates will be sent to them via mail. .

Presentations – 2018 Annual Report of the American Board of Dental Examiners (ADEX) Testing Committee by Mary Ellen Wynn, D.D.S., Board-appointed Representative to ADEX
Director Kamdar then introduced former Board member Dr. Mary Ellen Wynn as the Board’s representative to the American Board of Dental Examiners, who was before them to provide an update on the 2018 Annual Report of the ADEX Testing Committee.

Dr. Wynn began by thanking President Das and the members for giving her the opportunity to represent the Board at the ADEX House during their annual meeting last month. She provided the members with a brief background on ADEX as a test development entity for dental and dental hygiene professional examinations that serves its member state dental boards, such as Ohio, and that individual Board members serve as examiners of the testing agencies such as the Commission on Dental Competency Assessments (CDCA) which administers the examination. Dr. Wynn explained that Ohio has two (2) representatives to ADEX and their individual roles and terms as voting members of the ADEX House of Representatives.
Dr. Wynn indicated that she had provided members of the Board with two (2) documents for their review prior to the meeting

1. ADEX 2018 Annual Report [Appendix A]; and
2. ADEX Examination Changes [Appendix B]

Dr. Wynn then reviewed highlights of the ADEX Examination Changes with the members.

Dr. Wynn stated that as a licensing entity, she feels it is important to keep updated on all pathways to licensure in one’s jurisdiction referring to her ADEX 2018 Annual Report and the specific changes in the examination to the 2018 Western Regional Examining Board’s (WREB) exam. The 2018 Operative Section now allows a candidate to pass the exam by only completing one Class II procedure. If the candidate is unsuccessful (fails) the first procedure, they may attempt, without remediation, the second procedure. If the average of the two (2) procedures is 3.0 or higher, then they pass the operative section. This could be another Class II. If the average grade for both restorations is 3.0 or greater, the candidate passes the restorative section of the WREB exam. This is called compensatory grading. The other parts of this exam also utilize compensatory grading. There is no compensatory grading in the ADEX exam, either a candidate satisfactorily passes the procedure with minimal competency or fails. Based on this, New Hampshire has decided not to accept the WREB examination for initial licensure, and other states have the exam under review as well.

Dr. Wynn concluded by stating that the ADEX examination is given in 50 of the 67 dental schools in the United States and Puerto Rico. According to the Council on Interstate Testing Agency (CITA) website, it administers the exam at ten (10) schools, and CDCA administers the exam at 40 schools. Since last September, the CDCA has added Minnesota, Marquette, the University of Colorado, Creighton, and Midwestern Illinois to its list of dental examination sites. There are an estimated 328 dental hygiene schools in the United States of which the CDCA serves about 213 programs. Not all schools are large enough to host an exam, so those candidates go to open exam sites across the country. CDCA has 115 dental hygiene host sites for 2019, and CITA has eight (8) for 2019.

Dr. Wynn concluded by stating that she only touched briefly on the issues brought forth in the white paper and it is her understanding that the members have received information regarding the ADA’S intent to create an OSCE type of exam. She stated that she believed this white paper addressed many of the ADA’s positions and questioned if this board would want to approve an exam sight unseen. She then thanked the members again for the opportunity to represent Ohio and for having her present this information to them.

Dr. Wynn thanked the Board members for the opportunity to serve as their representative in the ADEX House of Representatives and then entertained a brief question and answer period. Director Kamdar thanked Dr. Wynn for her report and her continued service to the Board in this capacity.

Correspondence – Joint Commission on National Dental Examinations

Director Kamdar informed the Board that we had received correspondence from Dr. Lisa Heinrich-Null, Chair of the Joint Commission on National Dental Examinations, regarding the implementation of the new Integrated National Board Dental Examination (Integrated Exam) and the phasing out of the old National Board Dental Examination (National Board Exam) [Appendix C]. He stated that the letter and attachment was to inform licensing boards that the first phase of implementation began on August 1, 2018 and that the dental class of 2020 will be the first class affected by the phasing out of the National Boards Parts I and II. The letter is a friendly reminder that dental regulatory boards keep this in mind when considering modifications to current law, rules and policies.
Correspondence – American Academy of Dental Sleep Medicine

The Role of Dentists in Treatment and Managing Obstructive Sleep Apnea – Nancy L. Addy, D.D.S., President

Director Kamdar stated that the Board had received a letter from Nancy L. Addy, D.D.S., President, American Academy of Dental Sleep Medicine (AADSM) regarding the role of dentists in treatment and managing Obstructive Sleep Apnea (OSA). The letter recommends that certain organizations petitioning dental boards across the country consider expanding the scope of practice of dentistry within individual dental practice acts to include the diagnosis of OSA to further market diagnosing equipment and oral appliances. The AADSM suggests that when discussing OSA, dental boards might consider two (2) documents; a paper titled “Dental Sleep Medicine Standards for Screening, Treating and Managing Adults with Sleep-Related Breathing Disorders” and a document on evidence-based clinical practice guideline AADSM and the American Academy of Sleep Medicine produced jointly. Ms. Addy explains that both documents refer to the educational requirements a dentist must obtain to gain the knowledge and qualifications to effectively treat patients [Appendix D].

Correspondence – Commission on Dental Accreditation

CODA June 19, 2018 Accreditation Actions - Notice

Director Kamdar stated that the Board had received correspondence from Sherin Tooks, Ed.D., M.S., Director and Marjorie Hooper, Coordinator of CODA Operations regarding recent accreditation actions [Appendix E]. Director Kamdar indicated that this correspondence was for informational purposes to make the Board aware of CODA accreditation actions, specifically:

- Six (6) programs are not in compliance with accreditation standards and have received notice of the “intent to withdraw accreditation”
- Nine (9) programs are voluntarily discontinuing their programs; and
- Three (3) new programs have been granted accreditation.

Director Kamdar stated that there was one (1) Ohio dental assisting program affected by these CODA actions: Herzing University – Akron Campus is voluntarily discontinuing their dental assisting program.

Action Items

Supervisory Investigative Panel Expense Report

Director Kamdar asked if Dr. Guttman, the Board’s Secretary and Dr. Subramanian, the Board’s Vice Secretary, attested to having spent at least twenty (20) hours per week attending to Board business. Both Secretaries affirmed that they had spent the hours attending to Board business.

Motion by Ms. Johnston, second by Dr. Zucker, to approve the Supervisory Investigative Panel Expense report.

Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

Enforcement

Personal Appearances

Rudyard C. Whipps, D.D.S.

Ms. Yehnert stated that this was Dr. Whipps sixth appearance before the Board on his third consent agreement with the Board and then summarized his case history, stating that in June the Board had granted him an increase in work privileges to 36 hours per week, not to exceed eight (8) hours per day. Ms. Yehnert stated that Dr. Whipps continues to comply with the terms of his Consent Agreement and he would like to request an increase in work privileges.
Upon questioning by the Board, Dr. Whipps thanked the Board members for allowing him to return to working 36 hours per week and that he recently began practicing at a new location in Upper Arlington. He stated that he would like to request full reinstatement of his dental license as he sometimes has emergency patients at the end of the day and he must reschedule them based on the limitations the Board has set for his practice hours.

When asked what he meant by “full reinstatement of his dental license,” Dr. Whipps stated that he would prefer a full reinstatement of his license, but his priority is his recovery. He explained that he does not normally plan on being scheduled more than 30 hours per week but sees many emergency patients. The limitation of only practicing eight (8) hours per day is inconvenient and inhibits his ability to practice when he must reschedule emergency patients. Regarding his recovery, he stated that there are Alcoholics Anonymous (AA) meetings in the Columbus area twenty-four hours a day, that he usually attends meetings in the evening, but attends a 7:00 a.m. meeting if his practice schedule does not begin until 10:00 a.m. He mentioned that having these relationships is instrumental to his recovery and so he would like to continue to attend the meetings.

When asked by Director Kamdar what his specific request was of the Board that day, Dr. Whipps stated that he was asking for full reinstatement but that he never plans to work more than 40 hours per week as he cannot balance that with his commitment to recovery.

Director Kamdar thanked Dr. Whipps for sharing with the Board and then asked him to remain as they would be discussing his request during Executive Session.

Executive Session

Motion by Dr. Krob, second by Dr. Subramanian, to move the Board into executive session to consider the investigation of charges or complaints against licensee pursuant to Section 121.22(G)(1) of the Ohio Revised Code.

Roll call vote:  
Dr. Bauer – Yes  
Dr. Bean – Yes  
Dr. Das - Yes  
Dr. Guttman – Yes  
Ms. Intihar – Yes  
Ms. Johnston – Yes  
Dr. Krob – Yes  
Ms. Scaramucci – Yes  
Dr. Subramanian – Yes  
Dr. Zucker – Yes

Motion carried unanimously.

Director Kamdar stated that he, along with Mr. Kochheiser and Ms. Bockbrader would remain in the room during the Executive Session. He requested all other guests and staff to leave and take their personal belongings with them as they left the room. He explained that they would be invited to return to the meeting at the conclusion of the Executive Session.

Open Session

The Board resumed open session and Director Kamdar noted for the record that Dr. Guttman, Dr. Subramanian, Dr. Bauer, and Dr. Zucker had not attended the executive session and, therefore, were not present during the deliberations in these matters.
Decision in the Matter of Rudyard C. Whipps, D.D.S.

Motion by Dr. Bauer, second by Ms. Intihar, to increase the number of practice hours for Dr. Rudyard Whipps to a total of not more than forty hours per week not to exceed ten (10) hours of active clinical practice per day and remain in full compliance with the terms of his consent agreement with the Board.

Motion carried with Dr. Guttman and Dr. Subramanian recusing.

Director Kamdar then turned the meeting over to Deputy Director Kochheiser to present the Enforcement matters before the Board.

Proposed Addendum to Consent Agreement(s)
The Board reviewed one (1) proposed addendum to a consent agreement. The name of the individual/licensee was not included in the documents reviewed by the Board. The name of the individual/licensee has been added to the minutes for public notice purposes. Mr. Kochheiser provided a summary of the proposed addendum to consent agreement.

Erin Gibbons, R.D.H.

Motion by Dr. Krob, second by Dr. Zucker, to approve the proposed addendum to consent agreement for Erin Gibbons, R.D.H., license number 31.015713, and case number 17-43-1422.

Motion carried with Dr. Subramanian and Dr. Guttmann abstaining.

Proposed Consent Agreement(s)
The Board reviewed six (6) proposed consent agreements. The names of the individuals/licensees were not included in the documents reviewed by the Board. The names of the individuals/licensees have been added to the minutes for public notice purposes. Mr. Kochheiser provided a summary of the proposed consent agreements.

Disciplinary

Timothy Kraig, D.D.S.

Motion by Ms. Johnston, second by Dr. Zucker, to approve the proposed consent agreement for Timothy Kraig, D.D.S., license number 30.016439, and case number 18-18-1261.

Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

Michael L. Thomas, D.D.S.

Motion by Dr. Bean, second by Dr. Zucker, to approve the proposed consent agreement for Michael L. Thomas, D.D.S., license number 30.019755, case number 17-76-1298.

Motion carried with Dr. Guttman and Dr. Subramanian abstaining.

Elyssa M. Davis, Radiographer.

Motion by Dr. Krob, second by Dr. Das, to approve the proposed consent agreement for Elyssa M. Davis, dental assistant radiographer, certificate number 51.023067, case number 18-57-1184.

Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

Denise Kriebel, Radiographer.

Motion by Dr. Bauer, second by Dr. Zucker, to approve the proposed consent agreement for Denise Kriebel, dental assistant radiographer, certificate number 51.015106, case number 17-50-1102.
Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

**Karry Loch, Radiographer.**

*Motion by Dr. Zucker, second by Dr. Bean, to approve the proposed consent agreement for Karry Loch, dental assistant radiographer, certificate number 51.006443, case number 18-48-1230.*

Motion carried with Dr. Gutman and Dr. Subramanian abstaining.

**Niki Lakes, Radiographer.**

*Motion by Ms. Johnston, second by Dr. Krob, to approve the proposed consent agreement for Niki Lakes, dental assistant radiographer, certificate number 51.002827, case number 18-09-1229.*

Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

**Non-Disciplinary**

**Mayssa Salti, D.D.S.**

*Motion by Ms. Johnston, second by Dr. Zucker, to approve the proposed consent agreement for Mayssa Salti, D.D.S., license number 30.025578 limiting her practice to orthodontics.*

Motion carried with Dr. Subramanian and Dr. Guttman abstaining.

**Proposed Notice(s) of Opportunity for Hearing**

The Board reviewed one (1) Notice of Opportunity for Hearing. The name of the individual/licensee was not included in the document reviewed by the Board. The name of the individual/licensee has been added to the minutes for public notice purposes. Mr. Kochheiser provided a summary of the charges.

**Victor H. Nguyen, D.D.S.**

*Motion by Ms. Johnston, second by Dr. Das, to approve the proposed notice of opportunity for hearing and forward it to Victor H. Nguyen, D.D.S., license number 30.023545, case number 18-76-1030.*

Motion carried with Dr. Gutman and Dr. Subramanian abstaining.

**Enforcement Update**

Deputy Director Kochheiser began the Enforcement Update by informing the Board that there were originally four (4) cases pending hearing but now five (5) since the members had approved issuance of the Notice of Opportunity for Hearing to Dr. Nguyen. He stated that there were no cases pending a Hearing Examiners Report and Recommendation, that there were forty-nine (49) licensees and certificate holders under suspension, and one-hundred and forty-two (142) active cases. Mr. Kochheiser said that there was one (1) new referral to QUIP and no licensees actively participating in QUIP. He informed the members that there were thirty-three (33) cases which have been investigated and reviewed by the Board Secretaries and are recommended to be closed with three (3) warning letters having been issued. Mr. Kochheiser noted that there are twenty-eight (28) licensees currently on probation. He indicated that there are fifty-four (54) cases that have been open for longer than 90 days as noted in the charts in the Board Notebooks.

Due to the requirement in Chapter 4715.03(B) of the Ohio Revised Code, that “A concurrence of a majority of the members of the board shall be required to... (6) Dismiss any complaint filed with the board[,]” Deputy Director Kochheiser reviewed the cases to be closed with the Board.
The following cases are to be closed:

17-47-1254  18-18-1215  18-25-1245
17-73-1409 - WL  18-18-1234  18-29-1214
17-77-1381  18-18-1258  18-43-1211
18-00-1183  18-18-1260  18-47-1231 - WL
18-00-1198  18-25-1097 - WL  18-48-1217
18-00-1209  18-25-1195  18-51-1135
18-07-1182  18-25-1201  18-57-1235
18-12-1213  18-25-1202  18-57-1244
18-13-1110  18-25-1216  18-60-1228
18-18-1155  18-25-1224  18-76-1219
18-18-1176  18-25-1226  18-83-1280

Prior to the vote to close the above listed cases, Deputy Director Kochheiser inquired as to whether any of the Board members had any personal knowledge that the cases that were being voted on today involved either themselves or a personal friend.

Roll call: Dr. Bauer – No
Dr. Bean – No
Dr. Das – No
Dr. Guttman – No
Ms. Intihar – No
Ms. Johnston – No
Dr. Krob – No
Ms. Scaramucci – No
Dr. Subramanian – No
Dr. Zucker – No

Deputy Director Kochheiser then called for a motion to close the cases.

*Motion by Dr. Subramanian, second by Dr. Krob, to close the above thirty-three (33) cases.*

Motion carried unanimously.

Deputy Director Kochheiser then turned the meeting back over to Director Kamdar for the rest of the meeting.

**Licensure**

Director Kamdar stated that the Board’s Licensing Coordinator Samantha Slater had prepared a report of the licenses, certifications, and registrations that have been issued by the Board Executive Office since reported at our last meeting in July. He reminded the Board that during the previous meeting in July, members of the Board who are educators questioned whether it was appropriate to vote to approve the issuance of licenses, registrations, or certificates for candidates that had been their students. He explained that what was before them was the listing of license, registration, and certification numbers of issuance by the Board executive office for ratification by the Board. All names were removed from the documents provided prior to the meeting via the Board Member Portal, as well as in the documentation provided during the meeting. The names of the licensees, registrants and certificate holders have been added to the Board minutes for public notice purposes.
## Dentist(s) – (38)

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## Dental Hygienist(s) – (24)

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## Dental Assistant Radiographer(s) – (155)

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MEETING MINUTES
OHIO STATE DENTAL BOARD
SEPTEMBER 12, 2018

51.033575 Alexis Hassall 51.033625 Jahkia Bledsoe
51.033578 Jah Stubblefield 51.033624 Mallory Boring
51.033581 Melissa Conley 51.033627 Ashton Krutulis
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**Limited Resident’s – (7)**

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**Limited Continuing Education – (6)**

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**Expanded Function Dental Auxiliary – (46)**

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Motion by Ms. Johnston, second by Dr. Bean, to approve all licenses, registrations, and certifications as listed that have been issued since the July Board meeting.

Motion carried unanimously.

Graduate(s) of Unaccredited Dental Colleges Located Outside the United States
Director Kamdar stated that the Board’s Licensing Manager Samantha Slater had reviewed four (4) dental license applications from graduates of unaccredited dental colleges located outside the United States and had provided the detailed information for their review. He stated that all the candidates have completed a 2-year residency program in general dentistry and have met all other requirements as listed in Ohio Administrative Code Rule 4715-18-01 for licensure. He then named the following applicants:
Motion by Ms. Johnston, second by Dr. Zucker, to grant licenses to practice dentistry in the state of Ohio for the four (4) candidates as listed.

Motion carried unanimously.

**General Anesthesia/Conscious Sedation Permit(s)**

Director Kamdar stated that the Board’s Anesthesia Consultant Greg Ness, D.D.S., had vetted the following individuals who have applied for Conscious Sedation Permits. Evaluations have been conducted and the applicants are recommended to receive Permits for the specified modality.

**Conscious Sedation**

Dr. Aaron Lerg, Danville, Ohio – Intravenous
Dr. Andre Nguyen, Cambridge, Ohio – Intravenous
Dr. Caleb Hanson, Hilliard, Ohio – Intravenous
Dr. Stephanie Barlow, Cincinnati, Ohio – Intravenous

Motion by Ms. Scaramucci, second by Ms. Johnston, to approve the intravenous conscious sedation permit applications for the dentists as listed.

Discussion followed wherein members had questions regarding the resubmission for approval of the application for Dr. Aaron Lerg and whether the matter from the meeting in July had been addressed. Deputy Director Kochheiser explained that the matter had been reviewed by Dr. Ness and the SIP and it was determined that Dr. Lerg meets the requirements to obtain an intravenous conscious sedation permit. Dr. Subramanian asked if the Board would consider voting on each of the permit applications individually.

Ms. Scaramucci withdrew her original motion.

Motion by Ms. Scaramucci, second by Ms. Johnston, to approve the intravenous conscious sedation permit application for Dr. Aaron Lerg, D.D.S.

Motion carried. Dr. Guttman and Dr. Subramanian opposed.

Motion by Dr. Subramanian, second by Ms. Johnston, to approve the intravenous conscious sedation permit application for Dr. Andre Nguyen, D.D.S.

Motion carried unanimously.

Motion by Dr. Krob, second by Ms. Intihar, to approve the intravenous conscious sedation permit application for Dr. Caleb Hanson, D.D.S.

Motion carried unanimously.

Motion by Dr. Subramanian, second by Dr. Zucker, to approve the intravenous conscious sedation permit application for Dr. Stephanie Barlow, D.D.S.
Motion carried unanimously.

Reinstatement Application(s)
Director Kamdar stated that the Board’s Licensing Manager had reviewed three (3) dental reinstatement applications and recommended that the following individuals be reinstated to practice.

Dentist(s)
Gregory Heintschel, D.D.S.
Michael Palma, D.D.S.
Dhruvkumar Patel, D.D.S.


Motion carried unanimously.

Dental Hygienist(s)
Continuing with the Reinstatements, Director Kamdar informed the members that the Board’s Licensing Manager had reviewed two (2) dental hygiene reinstatement applications and recommended that the following individuals be reinstated to practice.

Dawn Hadbavny, R.D.H.
Ann Murry, R.D.H.

Motion by Dr. Subramanian, second by Dr. Das, to reinstate the licenses of Dawn Hadbavny, R.D.H. and Ann Murry, R.D.H. to practice dental hygiene in the state of Ohio.

Motion carried unanimously.

Executive Session

Motion by Dr. Bean, second by Dr. Zucker, to move the Board into executive session pursuant to Ohio Revised Code Section 121.22 (G)(3) to confer with Board counsel regarding a pending or imminent court action.

Roll call vote:
Dr. Bauer – Yes
Dr. Bean – Yes
Dr. Das – Yes
Dr. Gutman – Yes
Ms. Intihar – Yes
Ms. Johnston – Yes
Dr. Krob – Yes
Ms. Scaramucci – Yes
Dr. Subramanian – Yes
Dr. Zucker – Yes

Motion carried unanimously.

Director Kamdar indicated that he would attend the executive session along with Mr. Kochheiser and Ms. Bockbrader. He then requested all other guests and staff to leave the meeting and to take all personal items,
including briefcases, purses, cell phones, tablets, etc. with them when exiting the room. He stated that they would be invited back in upon conclusion of the Executive Session.

Open Session
At 3:53 p.m. the Board resumed open session.

Committee Reports

Ad Hoc
Disciplinary Guidelines - Category VII Continuing Education Violations
Dr. Guttman began by thanking Dr. Das for leading the Ad Hoc Committee meeting in July in her absence and then stated that the Committee had met earlier that day with all members present. She stated that the Committee had decided to review Category VII, Continuing Education Violations of the Disciplinary Guidelines since the Board executive office has begun the CE Audit of the 2016-2017 biennium. Dr. Guttman indicated that the Committee had concerns with the guidelines. She stated that the Committee discussed revisions to include that if a licensee submitted continuing education (CE) was not in compliance but at least 50% or more in compliance, then the licensee would be required to obtain enough CE to cover the deficient hours within 30 days and receive a warning letter. If the licensee's CE was less than 50% compliant, then they would be required to obtain enough CE to cover the deficiency within 30 days in addition to review by SIP for possible further action. Dr. Guttman stated that they hope to have the new guidelines for this Category in place by the November meeting.

Impaired Licensees – Discussion with Nelson Heise, Clinical Director for Ohio Physicians Health Program
Dr. Guttman stated that Clinical Director Nelson Heise of Ohio Physicians Health Program attended the Committee meeting for an open discussion on impaired licensees, which treatment facilities OPHP recommends, and which facilities documented the fewest relapses among dental licensee (which was better than the 80% national average). Upon conclusion of the discussion, the Committee asked Mr. Heise if he would assist them in the development of parameter and guidelines regarding treatment of impaired licensees in order to ensure adequate protection of the public.

Motion by Dr. Subramanian, second by Dr. Zucker, to approve the Ad Hoc Committee Report.

Motion carried unanimously.

Education
Dr. Krob stated that the Education Committee meeting was called to order at 8:30 a.m. in room 1924 of the Vern Riffe Building. Dr. Krob indicated that Committee members Ms. Susan Johnson and Dr. Ted Bauer were present, along with Staff Members, Mindy Franks, Zach Russell, and other guests. She opened the meeting by asking for a moment of silence in memory of fellow Committee member, Dr. Mike Ginder, who recently passed away.

Minutes
Dr. Krob informed the members that the July 25, 2018 Committee Minutes were reviewed and accepted without modification via consensus by the committee members.

Review of Biennial Sponsor Application(s)
Dr. Krob then indicated that the Committee members had been asked to review five (5) Biennial Sponsor and Biennial Sponsor Renewal Applications for discussion and consideration for approval prior to the meeting. She
indicated that the Committee had reviewed and was recommending approval for Biennial Sponsorship of continuing education be granted to three (3) of the applicants unconditionally for the following:

Raymond Bonomo Periodontics, Inc.
Dr. Terry V. Gruelle, D.M.D., M.S.
Sher Smiles Orthodontics & Periodontics

Application for Biennial Sponsorship was also granted to an applicant, but due to the late filing there was a need for retroactive status. The applicants will be notified that going forward no retroactive status will be granted in the future for:


The Committee found the application for one of the sponsors to be under developed and is requesting more information from the applicant concerning course description, outline, and learning objectives. Communication will be provided to the applicant.

Practice Enhancement Study Club

Dental Assistant Radiographer Initial Training
The committee also reviewed an application for Dental Assistant Radiographer Initial Training submitted by Scioto County Career Technical Center. Discussion concerning accreditation and compliance requirements were held and the committee approved the application to become a training site for dental radiographers and certification as submitted.

Mandatory Opioid Prescribing Practices CE Proposal
Dr. Krob indicated in support of the Committees key priorities and action items for 2018-19, the Committee proposed a directive for mandatory two (2) hours of CE per biennium on the topic of opioid prescribing. She stated that suggested content for the proposal was distributed to the members prior to the meeting. Dr. Krob thanked Dr. Subramanian for his input for the content language and for Mindy Franks for organizing the information into a suggested revision to 4715-8-01 on Continuing Education Requirements. The committee was successful in developing language for the CE proposal in the meeting and is respectfully requesting the language to be considered by the Law and Rules Review Committee for inclusion in the revisions for Board rule 4715-8-01 currently under consideration. The suggested new language is as follows:

(A?) “Opioid prescribing education” means continuing education experiences pertaining to the prescribing of opioids for acute, subacute and chronic pain. Course content may include, but is not limited to the following:

1. The prescribing guidelines as set forth in board rules 4715-6-02 and 4715-6-03 (once this has been final filed)
2. Patient history and clinical assessments
3. Consideration of dental treatment or pain management options to include:
   i. Non-pharmacologic therapy
   ii. Non-opioid pharmacologic therapy; and/or
   iii. Opioid therapy
4. Treatment goals
5. Risks and benefits of opioid therapy

A minimum of two (2) hours of continuing education must be obtained in this category.
Dr. Krob stated that the Committee also recognizes that there are additional changes that will be necessary for rule 4715-8-01 and plans to submit suggestions for revision along with the opioid prescribing education to the Laws & Rules Committee at the November meeting. Review of 4715-8-01 is slated for review in the second section of the Laws & Rules Workbook with a deadline of April 2019.

Continuing Education Audit
Dr. Krob indicated that Ms. Franks had provided a status update on the CE Audit that was recently started. It should be noted that the original plan was to use CE Broker or eLicense to assist with the audit. However, neither entity had the program capabilities to collect and provide information in a format that is currently compliant with the current processes. Therefore, the audit was conducted internally and Dr. Krob recognized Ms. Franks and Mr. Russell, as well as other staff, for their hard work on this process.

2017-2018 Strategic Priorities and Key Action Items Assigned to Education Committee
Dr. Krob then updated the Board members on the progress of the Committee toward meeting their strategic priorities and key action items:

Met:

#6 – Establish online C.E. Tool
#10 – Review and update jurisprudence examinations for dentists and dental hygienists

In-progress:

#7 – Collaborate with partners on developing opioid prescribing training
#5 – Consider requiring completion of ethics course for license renewals
#8 – Consider C.E. requirement for EFDA
#9 – Review and update Basic Life Support training requirement for all dental auxiliaries

Ongoing:

#16 – Executive Priority – Review and update statute, rules and policies
#17 – Executive Priority – Elevate awareness of Ohio’s opioid epidemic and reduce overprescribing of opioids and benzodiazepines

Topics for Next Meeting:
Dr. Krob concluded her report by stating that the Committee would be discussing additional revisions to Section 8 of the Ohio Administrative Code regarding continuing education along with revisions to the approval process for Biennial Sponsors.

Motion by Ms. Johnston, second by Dr. Das, to approve the Education Committee report and the recommendation for approval of the Biennial Sponsor and Initial Training Course applications.

Motion carried unanimously

Law and Rules Review
Dr. Subramanian stated that the Law and Rules Review Committee had met that morning with all members present and began the meeting with a moment of silence for fellow Board member, Dr. Ginder. They then introduced new member Eric Richmond, Esq. of the Ohio Dental Association.

Minutes
Dr. Subramanian informed the members that the Committee had reviewed and approved the minutes from the July 2018 meeting.
New Rule 4715-6-03 - Update

Dr. Subramanian took a moment to thank Deputy Director Kochheiser and Mr. Russell on all of their hard work in completing the language for new rule 4715-6-03 regarding prescribing for subacute and chronic pain. He then asked for a vote to final file the rule with JCARR.

*Motion by Ms. Johnston, second by Dr. Krob, that new rule 4715-6-03 be final filed with the Joint Committee on Agency Rule Review (JCARR), the Legislative Service Commission (LSC), and the Secretary of State.*

Motion carried unanimously.

2018 Rules to Review

Dr. Subramanian stated that the next item on the agenda was the review of the rules that need to be completed and filed with JCARR prior to November 1st. He acknowledged all of the effort by the members of the Committee in submitted changes as outlined in the draft document and explained that at this time they were bringing the changes before the Board for a vote for initial filing.

*Motion by Ms. Intihar, second by Dr. Zucker, to initial file the following rules with the Joint Committee on Agency Rule Review (JCARR), the Legislative Service Commission (LSC), and the Secretary of State:*

- 4715-5-01 Criteria for admission to dental licensing examination.
- 4715-5-04 Specialty designation.
- 4715-7-06 Reports of adverse occurrences.
- 4715-7-01 Limited resident’s license.
- 4715-7-02 Limited teaching license
- 4715-13-01 Public announcements, publicity, advertising and solicitation.
- 4715-13-02 Name under which practice may be conducted.
- 4715-13-03 False, fraudulent, or misleading statements.
- 4715-13-04 Statements tending to deceive or mislead the public.
- 4715-13-05 Advertising specialty services.
- 4715-18-01 Application for licensure of graduates of unaccredited dental colleges located outside the United States.
- 4715-30-01 Exemption for physicians and surgeons.
- 4715-40-02 Process and criteria to use when identifying an individual’s practice deficiency.
- 4715-40-03 Eligibility requirements for participation in the quality intervention program (QUIP).
- 4715-40-04 Provisions of the participatory agreement for the quality intervention program (QUIP).
- 4715-40-05 Grounds for termination from the quality intervention program (QUIP).
- 4715-40-06 Requirements for educational provider(s) offering remediation for the quality intervention program (QUIP).
- 4715-40-07 Terms and conditions a participant must meet to successfully complete the quality intervention program (QUIP).
- 4715-40-08 Confidentiality of records for the quality intervention program (QUIP).

Discussion followed wherein Ms. Scaramucci asked if paragraph (B) of rule 4715-5-06 the term “untoward event” should be changed to reflect “adverse occurrence” as was made in paragraph (A) of the same rule. The Committee concurred that revision would be made in the version to be initial filed.
Motion carried unanimously.

Mandatory Opioid Prescribing Practices CE Proposal
Dr. Subramanian thanked Dr. Krob and the Education Committee for providing language to revise rule 4715-8-01 regarding the inclusion of mandatory CE on opioid prescribing. He stated that the Law and Rules Committee will move forward and consider the language at their next meeting in November.

Opioid Epidemic
Concluding, Dr. Subramanian commented that the onus is on each and every person, not just the Board members, to seek out and assist in this national epidemic.

Motion by Dr. Zucker, second by Ms. Johnston, to approve the Law and Rules Review Committee report as presented.

Motion carried unanimously.

Policy/Scope of Practice Committee
Minutes
Ms. Johnston stated that the Policy/Scope of Practice Committee had met that morning the Committee members had reviewed the draft minutes from the July meeting and approved them as presented.

Presentation on Obstructive Sleep Apnea – Shelley D. Shults, FNP, MN, DDS, D.ABSDM
Ms. Johnston informed the members that the Committee had invited Board expert Dr. Shelley Shultz to present to them regarding Obstructive Sleep Apnea (OSA). She stated that key points to the presentation were as follows:

- The Sleep Physician must be the diagnostic basis for diagnosing, treating and treatment outcomes for Obstructive Sleep Apnea (OSA)
- Dentists should be the only professionals designing, ordering and fitting oral sleep appliances.
- Follow-up and treatment outcomes/evaluation must be done by the sleep physician.
- Many states are writing policy to reflect the role of the dentist as a Durable medical Device Provider, and that diagnosis, treatment planning and follow-up is the role of the sleep physician.
- Dentists should encourage patients who ask for snore appliances to be evaluated by a sleep physician first.
- Oral sleep appliances, night guards etc. can increase apneac incidents in patients who suffer from (whether knowingly or not) sleep apnea.

Ms. Johnston informed the Board that Dr. Bauer will be working with Dr. Shultz in the development of a draft Best Practices Guidelines for OSA to be provided at the next meeting in November.

Administration of Silver Diamine Fluoride
Ms. Johnston concluded her report by stating stated that she will be drafting a Best Practice Guideline on the administration of Silver Diamine Fluoride for presentation and review by the Committee at their meeting in November as well.

Motion by Dr. Krob, second by Dr. Subramanian, to approve the Policy/Scope of Practice Committee report as presented.
Motion carried unanimously.

Executive Updates

President’s Update

CE Audits

President Das stated that he was pleased to inform everyone that CE Audits have been initiated. He stated that the Board staff is auditing a 10% random sample of the licensees who have renewed for the 2018-2019 biennium. Early indications are that approximately 50% of the dentists and dental hygienists had submitted all the correct documentation at the time they renewed their licenses. He commented that one outstanding dentist provided documentation for 120 hours of completed CE although only 40 hours are required. He stated that this reflects well on dentistry.

Dr. Michael Ginder

Dr. Das informed the members that he intends to invite Dr. Mike Ginder’s wife to the meeting in November or December in order to present her with a certificate memorializing Dr. Ginder’s contribution to the Board. Dr. Das proposed that the Board consider making a motion to adopt the honorary name “Mike Ginder Memorial Conference Room” for the meeting room in the Dental Board executive office on the 17th Floor.

Motion by Dr. Das, second by Dr. Subramanian, to adopt the honorary name “Mike Ginder Memorial Conference Room” for the meeting room in the Board executive office.

Motion carried unanimously.

Dr. Subramanian commented that Dr. Ginder was very committed to dentistry and in everything that he did for the profession. He stated that Dr. Ginder will be missed.

Omnibus Bill Working Group

Dr. Das informed the Board that he was appointing Ms. Intihar and Dr. Subramanian as Co-chairs of the Omnibus Bill Working Group. He stated that most of the members are aware that they will be charged with gathering amendments from all interested parties with a goal of reducing the Dental Practice Act by 10%, with consideration of eliminating obsolete statute and rules. They have been directed to review and make recommendations to the full Board on adopting select amendments to be included in an omnibus bill in early 2019. Ms. Intihar has considerable experience working with the state legislature and her contributions will be invaluable.

Executive Director’s Update

Dental Board Enforcement Officer Kathy Carson - Recognition

Director Kamdar stated that he wanted to recognize Board Investigator Kathy Carson as this will be her last meeting with them prior to retiring at the end of October after 23 years of service to the Board.

Ms. Carson commented that she has enjoyed working for the Board, beginning as an entry level Investigator Assistant to becoming an Investigator. She stated that SIP members past and present would probably say that she has been passionate about her job and she thanked them for the experience.

Board members wished her well in her retirement.
Recognition – Eric Richmond, Esq and Mark Armstrong, D.D.S.
Director Kamdar took a moment to recognize Eric Richmond, Esq. as the new attorney at the Ohio Dental Association. He stated that Mr. Richmond replaced Nathan DeLong, Esq. and has been invited to participate on the Law and Rules Review Committee.

Director Kamdar also took a moment to recognize former Board member and President Mark Armstrong, D.D.S. who has been attending the Board meetings.

CE Audits
Director Kamdar stated that the members were now aware that the executive office has begun auditing of CE for the 2016-2017 biennium. He stated that he just wanted to mention the long hours that Ms. Franks, Mr. Russell, and Ms. Massaro have put in to get this project moving. He stated that they have done an admirable job in what they have accomplished and what seemed insurmountable at the time is now showing promise of what can be completed. He wanted to recognize them for their hard work on this project and they hope to have most of the audits competed by the November meeting.

MBE/Edge
Director Kamdar noted that State agencies are required to reach certain purchasing thresholds with minority businesses, the Appalachian community businesses, and female-owned businesses. He commented that thanks for our Fiscal Officer Pamela Lively’s due diligence, the Board has met those purchasing thresholds.

2020-2021 Budget
Director Kamdar stated that the Board is on the cusp of submitting the Biennial budget for the next two (2) years and will begin providing testimony to the Legislature and the new Governor. He stated that the budget for 2020-2021 will be extremely tight as back-office expenses charged to the Board by state support service agencies is projected to increase significantly. As a part of continued cost austerity efforts and promoting efficiencies, Director Kamdar suggested that the Board try a new schedule for Board meeting days that would allow out-of-town members to travel back and forth the same day. He stated that savings could be derived from out-of-town members who would have the option to forego staying at a hotel the night before the Board meeting. The Board consensus was to try the new schedule for the November meeting.

Anything for the Good of the Board

2019 Board Meeting Schedule
Director Kamdar indicated that the final schedule of Board meeting dates for 2019 had been included in the Board notebooks. The finalized schedule was as follows:

<table>
<thead>
<tr>
<th>Date</th>
<th>Month</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 6</td>
<td>February</td>
<td>2019</td>
</tr>
<tr>
<td>March 6</td>
<td>March</td>
<td>2019</td>
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<tr>
<td>May 8</td>
<td>May</td>
<td>2019</td>
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<td>June 12</td>
<td>June</td>
<td>2019</td>
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<td>July 24</td>
<td>July</td>
<td>2019</td>
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<td>August 28</td>
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<td>2019</td>
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<tr>
<td>October 2</td>
<td>October</td>
<td>2019</td>
</tr>
<tr>
<td>December 11</td>
<td>December</td>
<td>2019</td>
</tr>
</tbody>
</table>

Director Kamdar inquired as to whether any of the Board members had any other items to address under “Anything for the Good of the Board”. He noted that there were no additional items to address.

Adjourn
President Das adjourned the meeting at 4:45 p.m.
ASHOK DAS, D.D.S.
President

SUSAN JOHNSTON, R.D.H.
Vice President
Appendix A

ADEX

2018 Annual Report
By: Mary Ellen Wynn, DDS, MBA

Dear Ohio State Dental Board Members and Mr. Kamdar:

I want to thank Dr. Das and the Board for giving me the opportunity to represent the OSDB in the ADEX House of Representatives at the annual meeting last month.

For those that do not know me or are unaware of my recent involvement in the exam process, I want to give you an update. My CDCA (Commission on Dental Competency Assessments) profile includes all the exams that are offered in Ohio. I have multiple roles at the Perio/Restorative exam functioning as an Assistant Chief, a grading Captain and Examiner, a CFE and CFE Captain. At the Endo/Pros exams, I function as a CFE, CFE Captain, and an Examiner. At the dental hygiene exams, I serve in all the roles, and I participated in the first EFDA exam given at Case. To date this year, I have participated in 15 exams. In the past, I have examined for CITA (Council of Interstates Testing Agencies).

The American Board of Dental Examiners, Inc. (ADEX) is a test development agency serving its member state dental boards, such as Ohio, in developing valid and reliable initial licensure examinations for dentistry and dental hygiene professionals. It is a minimal competency test. The OSDB is the member of ADEX. The individual Board members are members and examiners of the testing agencies, such as the CDCA. CDCA and CITA administer the ADEX examination. The OSDB is not endorsing a private business entity i.e. a testing agency a la CDCA, CRDTS, WREB, SRTA or CITA.

The exam is developed by the member state boards’ representatives. I am the board’s representative in this process. This enables the board to have direct input into the exam content, scoring, and criteria. The ADEX dental exam consists of 3 parts, the written DSE-OSCE (Digital Skill Examination-Objective Structured Clinical Examination) given at a Prometric site, an endo/pros manikin exam, and a patient based restorative and optional perio exam. The ADEX dental hygiene exam consists of a DSE exam and a clinical exam.

Let’s discuss the structure of ADEX. It is composed of an Executive Committee, Board of Directors, and House of Representatives. The new Executive Committee Members are as follows: President Dr. William Pappas, NV, Vice-President Dr. Jeffery Hartsog, MS, Secretary Dr. Conrad McVea, LA, and Treasurer Dr. Renee McCoy-Collins, DC and Immediate Past President Dr. Stan Kanna, HI. There are 13 districts in the House of Representative. Ohio is a member of District 5 which includes Indiana, Illinois, Michigan, and Ohio. I am the OSDB’s member in the House of Representatives, and the term is for 3 years. The OSDB has the right to change its representative at any time during the 3 years. I am completing my second year. Each district elects one person to the Board of Directors for a 3-year term. Dr. Eleanor Awadalla, from Ohio, is completing the second year of her term. As a member of the House of Representatives, I am a member of Dental Exam Committee, and sit on the Endodontic Subcommittee. Each district also has a dental hygienist serving on the Dental Hygiene Exam Committee and a consumer member. Since there is only one person that serves on the Dental Hygiene Committee and one as the consumer representative, the role rotates through the member states of its district. Currently, Ohio does not have a person serving in the dental hygiene and consumer representative roles.
Attached are the changes voted on last month for 2019 and 2020 exams.

I want to bring to your attention changes to the 2018 WREB exam. The 2018 Operative Section now allows a candidate to pass the exam by only completing one Class II procedure. If the candidate is unsuccessful (fails) the first procedure, they may attempt, without remediation, the second procedure. If the average of the 2 procedures is 3.00 or higher, then they pass the operative section. This could be another Class II. If the average grade for both restorations is 3.0 or greater, the candidate passes the restorative section of the WREB exam. This is called compensatory grading. The other parts of this exam also utilize compensatory grading. There is no compensatory grading in the ADEX exam, either a candidate satisfactorily passes the procedure with minimal competency or fails. New Hampshire has decided not to accept this exam for initial licensure, and other states have it under review.

Thank you for opportunity to serve as the OSDB representative in the ADEX House of Representatives.

Regards,

Mary Ellen Wynn, DDS, MBA
Appendix B

ADEX Examination Changes

2019 Examination

Ad Hoc Patient Ethics Committee
- No bitewing radiographs required for dental hygiene and periodontal examinations. They still do require a FMX or PANX.
- For the dental perio exam, a change in verbiage was recommended stating that all detectable deposits on selected teeth must be removed, but this does not result in a grading change.

2020 Examination

Subcommittees:
- Scoring:
  - No changes
- Endo:
  - For calibration purposes the minimal size of #14’s access opening was created. A diagram will be created to illustrate the measurements. If the access opening is too small, it will be graded as a deficiency.
  - The criteria for #8 obturation was changed. If #8’s gutta percha is greater than 2 mm from the apex, it will be graded as a deficiency.
- Pros:
  - The gold crown occlusal reduction must be greater than or equal to 1 mm or it will be graded as a deficiency.
- Perio:
  - Directed the DSE Committee to create a pilot DSE OSCE perio exam to be beta tested in 2020.
- Restorative:
  - The criteria that the anterior gingival contact must be broken will be eliminated.
  - Two separate criteria, caries not accessed and caries remaining, will be merged into one criteria
  - The maxillary lateral incisor will have the same axial wall measurement as the mandibular anteriors.
  - All explorer penetrable enamel at the cavosurface margin will be graded as a deficiency.
  - The Class III restoration’s outline form criteria stating that it is too small to restore will be removed.
  - An unscored “sub” category will be created for adjacent tooth damage. This will enable the grading area to create an Instruction to Candidate form requesting additional treatment.
Appendix C

JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS

July 20, 2018

Mr. Steven Kochheiser, Esq.
Ohio State Dental Board
77 S. High Street 17th Floor
Columbus, Ohio 43215

Dear Mr. Kochheiser:

In 2009, the Joint Commission on National Dental Examinations ("Joint Commission") initiated formal efforts to begin development of an examination program that integrates content from the biomedical, behavioral, and clinical sciences, to replace National Board Dental Examination (NBDE) Parts I and II. The purpose of the Integrated National Board Dental Examination (INBDE) mirrors that of the NBDE Program: to assist dental boards in determining the qualifications of individuals who seek licensure to practice dentistry. Throughout its development the INBDE has been focused on the clinical relevance of examination content, and the corresponding clinical relevance of the biomedical sciences. The INBDE is the product of a comprehensive strategic planning process, and years of rigorous psychometric research that have resulted in a substantial amount of evidence that supports usage of this examination in the licensure decision making process of dental boards.

This communication provides the Joint Commission’s official notification to your organization that the INBDE will be available for administration beginning on August 1, 2020. Concomitantly, the NBDE Part I will be discontinued as of the day prior (July 31, 2020). The NBDE Part II will be discontinued two years later, on August 1, 2022. No further administrations of the NBDE will be provided after the aforementioned dates. The Joint Commission first announced anticipated details of the INBDE Implementation Plan on March 13, 2016, and the current schedule of activity is in accordance with those announced details. The Joint Commission’s website (www.ada.org/JCNDE/INBDE) contains the INBDE Implementation Plan, as well as a tremendous amount of information concerning validity evidence for the INBDE, activity timelines, etc.

The INBDE Implementation Plan provides information concerning the dates of implementation, how implementation will occur, and general guidance on how best to prepare. In reviewing this plan, the Joint Commission recommends your organization take into consideration any modifications and/or adjustments that may be necessary to accommodate the discontinuation of NBDE Parts I and II. This Implementation Plan will be updated regularly so it remains current, as the Joint Commission responds to inquiries and releases any additional information to help stakeholders and communities of interest with the transition.

The INBDE Retest Policy and Candidate Eligibility document provides an example of a document that was created to help facilitate the transition to the INBDE. This document provides additional guidance through the clarification of retest policies and unique issues that will be present during the transition period. Candidates are advised to consider their available options well in advance of testing. Dental school faculty will also find this information useful in advising students and considering administrative or academic policy changes that may be needed.
## Integrated National Board Dental Examination (INBDE) Quick Facts

| Name of Examination | As presented on the JCNDE website, for purposes of administering the examination:  
|                     | Prior to Aug. 1, 2022:  
|                     | **The Integrated National Board Dental Examination**  
|                     | Aug. 1, 2022 and beyond:  
|                     | **The National Board Dental Examination (NBDE)**  
|                     | As presented on the Department of Testing Services’ Results Reporting Hub (“DTS Hub”), for purposes of reporting candidate results to dental boards and schools:**  
|                     | **The National Board Dental Examination (NBDE)**  
|                     | *The DTS Hub will make no distinction between the NBDE and the INBDE.*  
| First Date of Availability | August 1, 2020*  
|                          | *NBDE Parts I and II will be discontinued July 31, 2020 and July 31, 2022, respectively.*  
| Content Domain and Test Specifications | The INBDE is designed to evaluate dental candidate cognitive skills based on the JCNDE’s Domain of Dentistry:  
|                                               | The INBDE Test Specifications can be downloaded here:  
| Sample Questions | Sample INBDE questions can be obtained here:  
| Eligibility | INBDE eligibility rules for students of U.S. dental schools accredited by the Commission on Dental Accreditation (CODA) are determined by each dental school. Each school at its discretion may also institute its own specific requirements pertaining to the examination.  
| Administration | The INBDE will contain 500 questions and require 1 ½ days to administer. Administrations will occur at professional testing centers located throughout the US and Canada. The INBDE Candidate Guide will be made available December 2019. The INBDE Candidate Guide will also provide information concerning the test administration vendor.  
| Cost of Administration | The cost of administration will be communicated in December 2019.
### Dental Boards
Candidates should contact the dental boards of each state to understand state requirements and the acceptability of the INBDE. With respect to administration timing, the JCNDE has received informal feedback suggesting a general preference for candidates to complete the examination in close proximity to when they are applying for licensure.

### History of Development
INBDE development was initiated in 2009 with the formation of a Committee for an Integrated Examination (CIE). The INBDE has made steady and consistent progress since that time. Background information on INBDE development is available here: [http://www.ada.org/en/jcnde/inbde](http://www.ada.org/en/jcnde/inbde)


### Validity and Technical Information
The INBDE Technical Report will be available in the coming months.

### Additional Information
Please see the INBDE website: [http://www.ada.org/jcnde/inbde](http://www.ada.org/jcnde/inbde)

The JCNDE can also be reached via the following email address: nbexams@ada.org
INBDE Implementation Plan (Final)

- **2016**: INBDE Implementation Plan Announcement, March 13, 2016
- **2018**: Notice of INBDE Implementation and National Board Dental Examination (NBDE) Discontinuation, July 18, 2018
- **2020**: First Official INBDE Administration, August 1, 2020
  - **NBDE Part I** Discontinued, July 31, 2020
  - **NBDE Part II** Discontinued, July 31, 2022

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Appendix D

August 17, 2018

Ashok Das, DDS
President
Ohio State Dental Board
77 S. High Street, 17th Floor
Columbus, OH 43215-6135

Dear Dr. Das:

Oral appliance therapy (OAT) for the treatment of obstructive sleep apnea (OSA) is one of, if not the, fastest growing areas in dentistry. Nearly 30 million adults suffer from obstructive sleep apnea (OSA). It is estimated that nearly 80% of adults with OSA are undiagnosed, and up to 50% of patients diagnosed with OSA and treated with CPAP therapy are not compliant.

Established in 1991 as the only non-profit national professional society dedicated exclusively to the practice of dental sleep medicine, the AADSM is the recognized leader for dentists who, in collaboration with physicians, provide oral appliance therapy to manage sleep-disordered breathing. There are a host of organizations across the country that have recently been approaching or petitioning state licensing boards to expand the scope of the state dental licensing act to permit the medical diagnosis of OSA and snoring. Many of these groups are supported by the manufacturers producing and marketing diagnosing equipment and oral appliances.

Simultaneously, there are medical societies advocating that OSA is a medical disorder that dentists are not qualified to diagnose and home sleep apnea tests (HSATs) should not be used for screening patients or calibrating oral appliances.

If this is occurring in your state, the AADSM believes you must be aware of our position on the role of the dentist in treating patients diagnosed with OSA. If your board is petitioned to update its licensing act, there are two documents we ask that you factor into your discussions. The first is a recent paper titled, “Dental Sleep Medicine Standards for Screening, Treating and Managing Adults with Sleep-Related Breathing Disorders.” The second is a joint, evidence-based clinical practice guideline by the AADSM and the American Academy of Sleep Medicine. Both can be found at aadsm.org/guidelines.php. Each paper clearly defines the role of dentists in treating and managing OSA. In addition, both refer to the educational requirements a dentist must obtain to gain the requisite knowledge and qualifications to effectively treat patients.

Training and education are offered through the AADSM; however, our interest here is not to promote our educational opportunities. Our first and foremost concern is for the safety of the patient. Poorly prescribed, designed, and delivered oral appliances without appropriate adjustment and
regular follow-up expose patients to potentially life-threatening outcomes. It is also vitally important that dentists understand the risks involved with diagnosing OSA. Dentists who are treating OSA without proper education or a referral from a physician are exposed to serious medicolegal responsibility should either accident or disease lead to one of many potential morbid outcomes. We believe these papers can assist you in making the most informed decisions.

If the AADSM can be of any assistance to your board in this matter, please feel free to call on us by emailing me at naddy@aadsm.org. If we can provide any further information or interpretation on these matters, we are glad to do so.

Sincerely,
Nancy L. Addy, DDS
President
Appendix E

Franks, Malynda
From: Kamdar, Harry
Sent: Wednesday, August 29, 2018 2:35 PM
To: Franks, Malynda; Russell, Zachary
Subject: FW. CODA Summer 2018 Accreditation Actions - Notice

Mindy – please include report below as a part of next Board meeting materials.

Thanks,
Director

From: Hooper, Marjorie G. <hooperm@ada.org>
Sent: Wednesday, August 29, 2018 11:35 AM
To: Took, Sherin <tookss@ada.org>
Subject: CODA Summer 2018 Accreditation Actions - Notice

National, Regional, and Specialized Accreditors and State Boards of Dentistry:

In accordance with established policy of the Commission on Dental Accreditation and regulations of the United States Department of Education, please consider this notification that as a result of action taken by the Commission at its August 2-3, 2018 meeting, the following education programs have been notified of the Commission’s “intent to withdraw accreditation” at its next regularly scheduled meeting on February 7-8, 2019 if these programs do not achieve compliance with accreditation standards or policy by that date:

Dental Assisting
Chaffey College, Rancho Cucamonga, CA
Lindsey Hopkins Technical Education Center, Miami, FL
Concorde Career College Center Memphis, Memphis, TN

Pediatric Dentistry
Howard University, Washington, DC

Oral and Maxillofacial Surgery
Harlem Hospital Center, New York, NY
Meharry Medical College, Nashville, TN

In addition, the Commission recognized that the following programs have voluntarily discontinued their participation in the Commission’s accreditation program:

Dental Assisting
Vatterott College – Des Moines campus, Des Moines, IA
University of North Carolina at Chapel Hill, Chapel Hill, NC
Herzing University-Akron Campus, Akron, OH
Luzerne County Community College, Nanticoke, PA

Dental Hygiene
Central Georgia College North Campus, Macon, GA
Rutgers University, Scotch Plains, NJ

Endodontics
Tibor Rubin VA Medical Center, Long Beach, CA

Dental Anesthesiology
University of California at Los Angeles, Los Angeles, CA

General Practice Residency (24-month program)
Staten Island University Hospital, Staten Island, NY

The following new programs have been granted accreditation:

Dental Assisting
Tulsa Technology Center, Tulsa, OK
Centura College Norfolk, Norfolk, VA

Dental Hygiene
Lancaster County Career and Technology Center, Willow Street, PA

The accreditation statuses of programs reviewed by the Commission on Dental Accreditation at its Summer 2018 meeting can be found at http://www.ada.org/en/coda/accreditation/accreditation-news/accreditation-notices

The accreditation statuses of all programs accredited by the Commission on Dental Accreditation can be found at http://www.ada.org/en/coda/find-a-program/search-dental-programs

If you have further questions regarding this information, please contact the Commission on Dental Accreditation. Thank you.

Sherin Tooks, Ed.D., M.S. tookss@ada.org
Director, Commission on Dental Accreditation
312.440.2940 (office)
312.587.5107 (fax)

Commission on Dental Accreditation 211 E. Chicago Ave. Chicago, IL 6061  www.ada.org/coda

Marjorie Hooper hooperm@ada.org
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