

Call to Order / Roll Call

BOARD ROSTER

DAVID NIELSON, DDS – BOARD PRESIDENT

GAIL WALDEN, RDH, BSDH, BOARD SECRETARY

STEVEN SCHELLER, DDS

DOMINIC WENZELL, DMD

KELLY LUCAS, DDS

JESSE HRONKIN, DMD

JONATHAN WOLLER, DMD

BRITTANY DSCHAAK, RDH

ROBIN WAHTO, PUBLIC MEMBER

Ethics Report

MEMORANDUM

State of Alaska Department of Law

TO: _____ DATE: _____
FILE NO.: _____
TEL. NO.: _____
FROM: Angie White
Litigation Assistant
Department of Law
Opinions, Appeals, & Ethics Section
FAX: _____
SUBJECT: Executive Branch Ethics Act, AS
39.52 Quarterly Report


******SAMPLE LANGUAGE – PLEASE COPY ONLY THE PARTS THAT APPLY
ONTO YOUR BOARD OR COMMISSION’S LETTERHEAD ******

As designated ethics supervisor and chair [executive director] for the _____, I wish to advise you that I have received no notifications of potential violations or requests for ethics determinations under the Ethics Act (AS 39.52) and have made no written determinations for this quarter.

OR

As designated ethics supervisor and chair [executive director] for the _____, I have received ___ notification(s) of a potential violation and ___ requests for ethics determinations under the Ethics Act (AS 39.52) I have attached a copy of the notices and requests along with my written determination(s) for review by the attorney general. I did [did not] receive an advisory opinion from the Attorney General.

AND

Except as addressed above, no other [board member] [commissioner] disclosed a potential conflict of interest at a recorded public meeting during this quarter.

OR

In addition to the above, at the [date] meeting, [Board member] [Commissioner] _____ disclosed a potential conflict with respect to _____ [*insert brief description*]____. *Insert disposition:* [S/He refrained from participation.] *or* [I determined s/he could [could not] participate.] *or* [The Board [Commission] members voted to permit [not to permit] participation.]

State of Alaska Department of Law

Who Is My Designated Ethics Supervisor?

Every state public officer, employee or board or commission member, has a designated ethics supervisor.

Executive Agencies

The ethics supervisor for each agency is the Commissioner or a senior manager to whom the Commissioner has delegated the function. The current ethics supervisor for each agency is listed below. The ethics supervisor for a Commissioner is Guy Bell, Director of Administrative Services in the Office of Governor, by delegation from the Governor.

Boards and Commissions

The Chair of each board and commission serves as the ethics supervisor for the other members and any executive director. The ethics supervisor for the Chair is Guy Bell, Director of Administrative Services in the Office of Governor, by delegation from the Governor. If a board or commission employs staff, the executive director serves as the ethics supervisor for these employees.

Public Corporations

The Chair of the board serves as the ethics supervisor for the other members of the board and any executive director. The executive director is the ethics supervisor for employees of the corporation.

Office of the Governor

The ethics supervisor for the Governor and Lieutenant Governor is the Attorney General. By delegation from the Governor, the ethics supervisor for the staff of the offices of the Governor and Lieutenant Governor is Guy Bell, Director of Administrative Services.

University of Alaska

By delegation of the University President, the ethics supervisor for university employees is Associate General Counsel Andy Harrington.

EXECUTIVE BRANCH AGENCIES

Administration: Leslie Ridle, Deputy Commissioner

Commerce, Community & Economic Development: Jon Bittner, Deputy Commissioner

Corrections: April Wilkerson, Director of Administrative Services

Education & Early Development: Les Morse, Deputy Commissioner

Environmental Conservation: Tom Cherian, Director of Administrative Services

Fish & Game: Kevin Brooks, Deputy Commissioner

Health & Social Services: Dallas Hargrave, Human Resource Manager

Labor & Workforce Development: Michael Monagle, Director, Division of Workers Compensation

Law: Jonathan Woodman, Assistant Attorney General

Military & Veterans Affairs: Marty Meyer, Special Assistant to Commissioner

Natural Resources: John Crowther, Inter-Governmental Coordinator

Public Safety: Terry Vrabec, Deputy Commissioner

Revenue: Dan DeBartolo, Administrative Services Director

Transportation & Public Facilities:

- Highways & Public Facilities: Steve Hatter, Deputy Commissioner
- Aviation: John Binder, Deputy Commissioner
- Central Region: Rob Campbell, Regional Director
- Northern Region: Rob Campbell, Acting Regional Director
- Southcoast Region: Acting Regional Director
- Alaska Marine Highway System: Michael Neussl, Deputy Commissioner
- Headquarters: Mary Siroky, Administrative Services Director

Updated April 2015

Department of Law attorney.general@alaska.gov P.O. Box 110300, Juneau, AK 99811-0300
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State of Alaska

Department of Law

Ethics Information for Members of Boards & Commissions (AS 39.52)

Introduction

This is an introduction to AS 39.52, the Alaska Executive Branch Ethics Act. This guide is not a substitute for reading the law and its regulations. State board and commission members who have further questions should contact their board chair or staff.

The Ethics Act applies to all current and former executive branch public employees and members of statutorily created boards and commissions.

Scope of Ethics Act (AS 39.52.110)

Service on a state board or commission is a public trust. The Ethics Act prohibits substantial and material conflicts of interest. Further, board or commission members, and their immediate family, may not improperly benefit, financially or personally, from their actions as board or commission members. The Act does not, however, discourage independent pursuits, and it recognizes that minor and inconsequential conflicts of interest are unavoidable.

Misuse of Official Position (AS 39.52.120)

Members of boards or commissions may not use their positions for personal gain or to give an unwarranted benefit or treatment to any person. For example, board members may not:

- use their official positions to secure employment or contracts;
- accept compensation from anyone other than the State for performing official duties;
- use State time, equipment, property or facilities for their own personal or financial benefit or for partisan political purposes;
- take or withhold official action on a matter in which they have a personal or financial interest; or
- coerce subordinates for their personal or financial benefit.
- attempt to influence outcome of an administrative hearing by privately contacting the hearing officer.



Terry knew that a proposal that was before the board would harm Terry's business competitor. Instead of publicly disclosing the matter and requesting recusal, Terry voted on the proposal.



Board member Mick has board staff employee Bob type an article for him that Mick hopes to sell to an Alaskan magazine. Bob types the article on State time.

Improper Gifts (AS 39.52.130)

A board member may not solicit or accept gifts if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. "Gifts" include money, items of value, services, loans, travel, entertainment, hospitality, and employment. All gifts from registered lobbyists are presumed to be improper, unless the giver is immediate family of the person receiving the gift.

A gift worth more than \$150 to a board member or the board member's immediate family must be reported within 30 days if:

- the board member can take official action that can affect the giver, or
- the gift is given to the board member because he or she is on a state board.

The receipt of a gift worth less than \$150 may be prohibited if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. Receipt of such a gift should be disclosed.

Any gift received from another government, regardless of value, must be reported; the board member will be advised as to the disposition of this gift.

A form for reporting gifts is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.

This restriction on gifts does not apply to lawful campaign contributions.



The commission is reviewing Roy's proposal for an expansion of his business. Roy invites all the board members out to dinner at an expensive restaurant. He says it will be okay, since he isn't excluding any of the members.



Jody receives a holiday gift every year from Sam. Jody was recently appointed to a state board, but Sam has no business that is before the board. Jody may accept the gift.

Improper Use or Disclosure of Information (AS 39.52.140)

No former or current member of a board may use or disclose any information acquired from participation on the board if that use or disclosure could result in a financial or personal benefit to the board member (or immediate family), unless that information has already been disseminated to the public. Board members are also prohibited from disclosing confidential information, unless authorized to do so.



Sheila has been on the board for several years. She feels she has learned a great deal of general information about how to have a successful business venture. So she sets up her own business and does well.



Delores has always advised and assisted the other doctors in her clinic on their continuing education requirements. After Delores is appointed to the medical board, she discloses this role to the board and continues to advise the doctors in her clinic.



Jim reviews a confidential investigation report in a licensing matter. He discusses the practitioner's violation with a colleague who is not a board member.

Improper Influence in State Grants, Contracts, Leases or Loans (AS 39.52.150)

A board member, or immediate family, may not apply for, or have an interest in a State grant, contract, lease, or loan, if the board awards or takes action to administer the State grant, contract, lease, or loan.

A board member (or immediate family) may apply for or be a party to a competitively solicited State grant, contract or lease, if the board as a body does not award or administer the grant, contract, or lease and so long as the board member does not take official action regarding the grant, contract, or lease.

A board member (or immediate family) may apply for and receive a State loan that is generally available to the public and has fixed eligibility standards, so long as the board member does not take (or withhold) official action affecting the loan's award or administration.

Board members must report to the board chair any personal or financial interest (or that of immediate family) in a State grant, contract, lease or loan that is awarded or administered by the agency the board member serves. A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.



John sits on a board that awards state grants. John hasn't seen his daughter for nearly ten years so he figures that it doesn't matter when her grant application comes up before the board.



The board wants to contract out for an analysis of the board's decisions over the last ten years. Board member Kim would like the contract since she has been on the board for ten years and feels she could do a good job.

Improper Representation (AS 39.52.160)

A board or commission member may not represent, advise, or assist a person in matters pending before the board or commission for compensation. A nonsalaried board or commission member may represent, advise, or assist in matters in which the member has an interest that is regulated by the member's own board or commission, if the member acts in accordance with AS 39.52.220 by disclosing the involvement in writing and on the public record, and refraining from all participation and voting on the matter. This section does not allow a board member to engage in any conduct that would violate a different section of the Ethics Act.



Susan sits on the licensing board for her own profession. She will represent herself and her business partner in a licensing matter. She discloses this situation to the board and refrains from participation in the board's discussions and determinations regarding the matter.

Restriction on Employment After Leaving State Service (AS 39.52.180)

For two years after leaving a board, a former board member may not provide advice or work for compensation on any matter in which the former member personally and substantially participated while serving on the board. This prohibition applies to cases, proceedings, applications, contracts, legislative bills, regulations, and similar matters. This section does not prohibit a State agency from contracting directly with a former board member.

With the approval of the Attorney General, the board chair may waive the above prohibition if a determination is made that the public interest is not jeopardized.

Former members of the governing boards of public corporations and former members of boards and commissions that have regulation-adoption authority, except those covered by the centralized licensing provisions of AS 08.01, may not lobby for pay for one year.



The board has arranged for an extensive study of the effects of the Department's programs. Andy, a board member, did most of the liaison work with the contractor selected by the board, including some negotiations about the scope of the study. Andy quits the board and goes to work for the contractor, working on the study of the effects of the Department's programs.



Andy takes the job, but specifies that he will have to work on another project.

Aiding a Violation Prohibited (AS 39.52.190)

Aiding another public officer to violate the Ethics Act is prohibited.

Agency Policies (AS 39.52.920)

Subject to the Attorney General's review, a board may adopt additional written policies further limiting personal or financial interests of board members.

Disclosure Procedures

DECLARATION OF POTENTIAL VIOLATIONS BY MEMBERS OF BOARDS OR COMMISSIONS (AS 39.52.220)

A board member whose interests or activities could result in a violation of the Ethics Act if the member participates in board action must disclose the matter on the public record and in writing to the board chair who determines whether a violation exists. A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff. If another board member objects to the chair's ruling or if the chair discloses a potential conflict, the board members at the meeting (excluding the involved member) vote on the matter. If the chair or the board determines a violation will occur, the member must refrain from deliberating, voting, or participating in the matter. For more information, see Ethics Act Procedures for Boards and Commissions available at the above noted web site.

When determining whether a board member's involvement in a matter may violate the Ethics Act, either the chair or the board or commission itself may request guidance from the Attorney General.

ATTORNEY GENERAL'S ADVICE (AS 39.52.240-250)

A board chair or a board itself may request a written advisory opinion from the Attorney General interpreting the Ethics Act. A former board member may also request a written advice from the Attorney General. These opinions are confidential. Versions of opinions without identifying information may be made available to the public.

REPORTS BY THIRD PARTIES (AS 39.52.230)

A third party may report a suspected violation of the Ethics Act by a board member in writing and under oath to the chair of a board or commission. The chair will give a copy to the board member and to the Attorney General and review the report to determine whether a violation may or does exist. If the chair determines a violation exists, the board member will be asked to refrain from deliberating, voting, or participating in the matter.

Complaints, Hearings, and Enforcement

COMPLAINTS (AS 39.52.310-330)

Any person may file a complaint with the Attorney General about the conduct of a current or former board member. Complaints must be written and signed under oath. The Attorney General may also initiate complaints based on information provided by a board. A copy of the complaint will be sent to the board member who is the subject of the complaint and to the Personnel Board.

All complaints are reviewed by the Attorney General. If the Attorney General determines that the complaint does not warrant investigation, the complainant and the board member will be notified of the dismissal. The Attorney General may refer a complaint to the board member's chair for resolution.

After investigation, the Attorney General may dismiss a complaint for lack of probable cause to believe a violation occurred or recommend corrective action. The complainant and board member will be promptly notified of this decision.

Alternatively, if probable cause exists, the Attorney General may initiate a formal proceeding by serving the board or commission member with an accusation alleging a violation of the Ethics Act. Complaints or accusations may also be resolved by settlement with the subject.

CONFIDENTIALITY (AS 39.52.340)

Complaints and investigations prior to formal proceedings are confidential. If the Attorney General finds evidence of probable criminal activity, the appropriate law enforcement agency shall be notified.

HEARINGS (AS 39.52.350-360)

An accusation by the Attorney General of an alleged violation may result in a hearing. An administrative law judge from the state's Office of Administrative Hearings serves as hearing officer and determines the time, place and other matters. The parties to the proceeding are the Attorney General, acting as prosecutor, and the accused public officer, who may be represented by an attorney. Within 30 days after the hearing, the hearing officer files a report with the Personnel Board and provides a copy to the parties.

PERSONNEL BOARD ACTION (AS 39.52.370)

The Personnel Board reviews the hearing officer's report and is responsible for determining whether a violation occurred and for imposing penalties. An appeal may be filed by the board member in the Superior Court.

PENALTIES (AS 39.52.410-460)

When the Personnel Board determines a board member has violated the Ethics Act, it will order the member to refrain from voting, deliberating, or participating in the matter. The Personnel Board may also order restitution and may recommend that the board member be removed from the board or commission. If a recommendation of removal is made, the appointing authority will immediately remove the member.

If the Personnel Board finds that a former board member violated the Ethics Act, it will issue a public statement about the case and will ask the Attorney General to pursue appropriate additional legal remedies.

State grants, contracts, and leases awarded in violation of the Ethics Act are voidable. Loans given in violation of the Ethics Act may be made immediately payable.

Fees, gifts, or compensation received in violation of the Ethics Act may be recovered by the Attorney General.

The Personnel Board may impose a fine of up to \$5,000 for each violation of the Ethics Act. In addition, a board member may be required to pay up to twice the financial benefit received in violation of the Ethics Act.

Criminal penalties are in addition to the civil penalties listed above.

DEFINITIONS (AS 39.52.960)

Please keep the following definitions in mind:

Benefit - anything that is to a person's advantage regardless financial interest or from which a person hopes to gain in any way.

Board or Commission - a board, commission, authority, or board of directors of a public or quasi-public corporation, established by statute in the executive branch, including the Alaska Railroad Corporation.

Designated Ethics Supervisor - the chair or acting chair of the board or commission for all board or commission members and for executive directors; for staff members, the executive director is the designated ethics supervisor.

Financial Interest - any property, ownership, management, professional, or private interest from which a board or commission member or the board or commission member's immediate family receives or expects to receive a financial benefit. Holding a position in a business, such as officer, director, partner, or employee, also creates a financial interest in a business.

Immediate Family - spouse; another person cohabiting with the person in a conjugal relationship that is not a legal marriage; a child, including a stepchild and an adoptive child; a parent, sibling, grandparent, aunt, or uncle of the person; and a parent or sibling of the person's spouse.

Official Action - advice, participation, or assistance, including, for example, a recommendation, decision, approval, disapproval, vote, or other similar action, including inaction, by a public officer.

Personal Interest - the interest or involvement of a board or commission member (or immediate family) in any organization or political party from which a person or organization receives a benefit.

For further information and disclosure forms, visit our Executive Branch Ethics web site or please contact:

State Ethics Attorney
Alaska Department of Law
1031 West 4th Avenue, Suite 200
Anchorage, Alaska 99501-5903
(907) 269-5100
attorney.general@alaska.gov

Revised 9/2013

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State of Alaska
Department of Law
Executive Branch Ethics Act

Responsibilities of Designated Ethics Supervisors for Boards and Commissions

Boards and commissions subject to the Ethics Act have designated ethics supervisors. The chair serves as the designated ethics supervisor for board or commission members and the executive director. The executive director is the designated ethics supervisor for staff. The designated ethics supervisor for a chair is the governor, who has delegated this responsibility to Guy Bell, Administrative Director of the Office of the Governor.

Designated ethics supervisors should refer to the Manual for Designated Ethics Supervisors (April 2008), available from the state ethics attorney, regarding their responsibilities under the Ethics Act. Briefly, as designated ethics supervisor, you must --

1. Ensure that members and employees are provided copies of the guides, Ethics Information for Members of Boards and Commissions and Ethics Act Procedures for Boards and Commissions -- and keep a supply of disclosure forms.
 1. These guides, other educational materials, disclosure forms, statutes and regulations are available for review and copying on the Department of Law ethics web site. If access to this page is not available, please contact the Attorney General's office at 269-7195.
2. Review all disclosures, investigate potential ethics violations, make determinations regarding conduct, and take action.
3. Keep member or employee disclosure statements (of potential violations, receipt of gifts, and interests in grants/contracts/leases/loans) on file in your office. Disclosure of a gift received from another government must be forwarded to the Office of the Governor.
4. Submit an ethics report to the Department of Law in April, July, October and January for the preceding quarter. You will receive a reminder. There is a sample report on the ethics web page.
 1. Mail, email or fax to Kim Halstead, Litigation Assistant, Department of Law, Opinions, Appeals & Ethics Section, 1031 W. 4th Avenue, Suite 200, Anchorage, AK, 99501, ethicsreporting@alaska.gov, fax no. 907-279-2834.

You may request ethics advice from your agency's Assistant Attorney General or from the State Ethics Attorney, Jon Woodman, at 269-5100 or jonathan.woodman@alaska.gov. Please direct questions about reporting procedures to Kim Halstead at 269-7195 or kimberly.halstead@alaska.gov.

6/14

Department of Law attorney.general@alaska.gov P.O. Box 110300, Juneau, AK 99811-0300
Phone: 907-465-3600 Fax: 907-465-2075 TTY: 907-258-9161
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Review / Approve Agenda

STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND
PROFESSIONAL LICENSING

BOARD OF DENTAL EXAMINERS AGENDA

December 06, 2019

550 W 7th Ave, Atwood Building Ste. 1550, Anchorage, AK 99501
333 Willoughby Ave, 9th Floor, Conference Room B, Juneau, AK 99801

Zoom Webinar Number and ID:

Zoom Webinar: 1(408) 638-0968

Webinar ID: 513 287 876

<https://zoom.us/j/513287876>

	<u>TIME</u>	<u>TOPIC</u>	<u>AGENDA</u>	<u>LEAD PERSON</u>
1.	9:00 a.m.	Call to Order/Roll Call		CHAIR
2.	9:05 a.m.	Ethics report		CHAIR
3.	9:10 a.m.	Review of Agenda		CHAIR
4.	9:15 a.m.	Review/Approve Past Meeting Minutes		CHAIR
		<ul style="list-style-type: none">• August 23, 2019 Meeting		
5.	9:30 a.m.	Introduce New License Examiner		CHAIR
6.	9:40 a.m.	Regulation Training		ZINN
7.	10:00 a.m.	Break		CHAIR
8.	10:15 a.m.	Investigative Report		BAUTISTA
9.	11:00 a.m.	CE Consent Agreements		ZIMMERMAN
10.	11:15 a.m.	Regulations Update		ZINN
		<ul style="list-style-type: none">• Public Comments Received/Adoption of Regulations• Possible Revision of Deep Sedation Regulations		
11.	12:00 p.m.	Lunch		CHAIR

**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND
PROFESSIONAL LICENSING
BOARD OF DENTAL EXAMINERS AGENDA**

December 06, 2019

550 W 7th Ave, Atwood Building Ste. 1550, Anchorage, AK 99501
333 Willoughby Ave, 9th Floor, Conference Room B, Juneau, AK 99801

Zoom Webinar Number and ID:

Zoom Webinar: 1(408) 638-0968

Webinar ID: 512 287 876

<https://zoom.us/j/513287876>

- | | | | |
|-----|-----------|--|----------|
| 12. | 1:00 p.m. | Public Comment | CHAIR |
| 13. | 1:15 p.m. | Moderate Sedation Program Verification Revision | CHAIR |
| 14. | 1:30 p.m. | Updated Professional Fitness Questions | CHAIR |
| 15. | 1:45 p.m. | Penalty Matrix/PDMP Penalty Matrix | CHAIR |
| 16. | 2:15 p.m. | Radiologic Equipment Inspection Update | CHAIR |
| 17. | 2:30 p.m. | Review / Approve Tabled Applications | CHAIR |
| 18. | 2:45 p.m. | PDMP Report / Compliance | CARRILLO |
| 19. | 3:00 p.m. | Break | CHAIR |
| 20. | 3:15 p.m. | Review/Compare Dental Exams | CHAIR |
| 21. | 3:30 p.m. | Board Business | CHAIR |
| | | <ul style="list-style-type: none">• Specialty License Update• Review Board Interview Process for Credential Applicants• Task List Update | |
| 20. | 4:00 p.m. | New Business | CHAIR |
| | | <ul style="list-style-type: none">• Create New Task List• Schedule Upcoming Board Meetings | |
| 21. | 4:30 p.m. | ADJORN | CHAIR |

Review / Approve Meeting Minutes

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**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS,
BUSINESS & PROFESSIONAL LICENSING
BOARD OF DENTAL EXAMINERS**

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**MINUTES OF MEETING
August 23, 2019**

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These DRAFT minutes were prepared by the staff of the Division of Corporations, Business and Professional Licensing. They have not been reviewed or approved by the Board.

By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the provisions of Article 6 of AS 44.62, a meeting of the Board of Dental Examiners was held August 23, 2019, at 550 W. 7th Ave. Anchorage, AK Suite 1550 and Juneau staff attending via Zoom Videoconferencing.

The meeting was called to order by Dr. David Nielson, President, at 9:14 a.m.

Agenda Item 1 - Roll Call

Those present, constituting a quorum of the board, were:

Dr. David Nielson, President – Anchorage
Ms. Gail Walden – Wasilla
Dr. Steven Scheller - Fairbanks
Ms. Brittany Dschaak - Dillingham
Dr. Jonathan Woller – Fairbanks
Dr. Kelly Lucas - Wasilla
Dr. Dominic Wenzell – Girdwood
Ms. Robin Wahto – Anchorage
Dr. Jesse Hronkin – Excused Absence

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Tracy Wiard, Occupational Licensing Examiner – Juneau
Mr. Joseph Bonnell, Records and Licensing Supervisor - Juneau
Ms. Elaine Brewer, PDMP Program Coordinator I - Juneau
Ms. Jasmin Bautista, Investigator III – Anchorage
Ms. Sonia Lipker, Investigator III – Anchorage
Mr. Billy Homestead, Investigator III – Anchorage
Ms. Melissa Dumas, Administrative Officer II - Juneau
Ms. Sher Zinn, Regulation Specialist – Juneau
Ms. Ashley Brown – AAG – Anchorage

49 **Agenda Item 2 – Ethics Report**

50

51 Dr. Nielson advised the board there have not been any disclosures of potential violations or requests
52 for determinations under the Ethics Act AS 39.52 and there have been no written determinations
53 for this quarter. The board was asked if there were any outstanding ethics issues to report and none
54 were reported.

55

56 **Agenda Item 3 – Review / Approve Agenda**

57

58 There were several changes made to the DRAFT 08.23.2019 agenda. Dr. Nielson noted the AAG
59 time was moved to 1:15 p.m. in the afternoon due to her travel schedule. The agenda item for
60 board discussion of the professional fitness questions on the initial and renewal applications were
61 moved before lunch. Dr. Nielson suggested adding two (2) items to the agenda under new business.
62 One was listing the correct regulations on the Program Verification Form for pediatric sedation and
63 the application for the Permit to Administer Moderate Sedation. Dr. Nielson also stated since OLE
64 Wiard was made aware of the corrections to be made to the forms, it may not need to be added to
65 the agenda. Dr. Nielson also suggested a change to the license by exam checklist to add equivalent
66 scores to the checklist aside from just WREB. OLE Wiard added the board was requested to vote
67 on the adoption of the state seal instead of the dental board seal for certificates and license
68 verifications.

69

70 **On a motion duly made by Wenzell, seconded by Walden, and approved unanimously, it**
71 **was RESOLVED to approve the 08.23.2019 dental board agenda as amended.**

72

73 **Agenda Item 4 – Review / Approve Past Meeting Minutes**

74

75 The board reviewed the meeting minutes from the April 15, 2019 meeting. Dr. Wenzell noted he is
76 from Girdwood and not Fairbanks. He stated the incorrect city on lines 29, 135, 211, 324 and 368.
77 Dr. Nielson stated line 243-244 needed to be re-written. He suggested the sentence read as follows
78 after the word site on line 243, “the test must be a constructive response test. Meaning it is not a
79 multiple-choice exam. Currently WREB is the only testing agency that offers a constructive
80 response treatment exam.” There was also a recommendation to review line 602 and 603 to look for
81 the or that should have been and of. Ms. Wahto also noted Mr. Boothe should be referred to as Dr.
82 Boothe and it was recommended that be corrected.

83

84 **On a motion duly made by Wahto, seconded by Wenzell, and approved unanimously, it was**
85 **RESOLVED to approve the 04.15.2019 dental board minutes as amended.**

86

87 Dr. Nielson stated there was a few minutes before the investigative report was to occur. He wanted
88 to know if there was anything the board could do with the few minutes there was. Dr. Wenzell
89 wanted to ask what the investigative review panel was. It was suggested that was a good question
90 for Jasmin.

91 **Agenda Item 5 – Investigative / Probationary Report**

92

93 Ms. Bautista provided the board with the investigative report covering April 4, 2019 through August
94 16, 2019. Investigations has thirty-three (33) opened investigative cases and closed seven (7)
95 matters since the last report. There is a total of fifty-five (55) open investigative matters for the
96 dental board now.

97
98 Dr. Wenzell wanted to know if seventeen cases opened on the same day were for the same dentist.
99 It was stated they were all related. Dr. Wenzell also wanted to know if there continued to be a
100 discipline review panel comprised of two dentists that kept the dental board informed of
101 investigative actions without providing too much detail. Historically, this panel informed the board
102 what investigations were doing but would have recused themselves from voting on cases. Jasmin
103 asked for further clarification and wanted to know if it was the review the board members are asked
104 to complete when a case comes through investigations? Dr. Wenzell thought it was something
105 different and planned to review past meeting minutes again for clarification.
106

107 **On a motion duly made by Walden, seconded by Woller, and approved unanimously, it was**
108 **RESOLVED to go in to executive session in accordance with Alaska Statute 44.62.310(c)(3)**
109 **for the purpose of discussing investigative matters that tend to prejudice the reputation and**
110 **character of any person, provided the person may request a public discussion. Board staff**
111 **to remain.**
112

113 Off Record: 9:33 AM

114 On record: 9:56 AM
115

116
117 **Agenda Item 7 – Division Update**
118

119 There was no division update for the board. OLE Wiard covered the current travel restrictions in
120 place. Dr. Nielson asked if this meant the AADB meeting would not be approved. OLE Wiard
121 stated the request was submitted and it does not mean the travel will not be approved but it does
122 not mean it will be approved either. The board stated that travel is paid for by dental licensee's fees
123 and does not come from the State of Alaska General Fund so it has no effect on the State budget.
124 OLE Wiard informed the board this information has been relayed to the current administration and
125 they are aware the funding for board travel is not coming from the general fund. Ms. Walden
126 believed if the travel request was presented in a tactful and responsible way it would make sense for
127 it to be approved.
128

129 Dr. Nielson stated he was planning on getting his own tickets to the AADB Conference if travel was
130 not approved. It was stated that was fine but Dr. Nielson would not be able to represent the State
131 of Alaska Board of Dental Examiners or discuss State of Alaska Board of Dental Examiners
132 business if he traveled on his own dime. It was also noted some boards added travel requirements
133 to their regulations in the hopes representatives could travel to important meetings without being
134 banned. Dr. Nielson did not understand how travel to the AADB meeting could be denied since
135 membership was required in the Board of Dental Examiners statutes and regulations. The board
136 requested that we ask Sara Chambers for more help in obtaining travel approvals.
137

138 **Agenda Item 8 – PDMP Warning Letter Update**
139

140 OLE Wiard informed the board that there were more than 300 dentists listed in the Awarxe
141 database that have not registered for the PDMP. OLE Wiard explained she needs to add the
142 current list to a spreadsheet and pull the list of licensed dentists from the CBPL database. At this
143 point she would need to delete all licensees who have registered from the list and mail merge the

144 unregistered licensees CBPL database into a Word document to mail the letter. This is an ongoing
145 task and should be completed after the board meeting.

146

147 **Agenda Item 16 (c) – PDMP Penalty Matrix**

148

149 More discussion ensued regarding the PDMP and the penalty matrix. It was clarified via e-mail by
150 Ms. Zinn that the PDMP penalty matrix does not need to be in regulations but can be adopted as
151 board standards. There was also an overview informing the board that PDMP applications and
152 renewals were delegated to the OLE’s for each program. OLE Wiard informed the board this
153 added about 500 new applications and renewals to her tasks.

154

155 Melissa Dumas called the board meeting to inform them that there was no division report. The
156 older agenda had a division update listed at 10:15 am. The agenda was changed to remove the
157 division update prior to approval. She informed the board the 4th quarter update would be available
158 in October.

159

160 The board reviewed the penalty matrix at length and discussed having the PDMP penalty matrix as
161 part of an overall penalty matrix for the dental board. The board wants to establish a penalty matrix
162 for dentists, hygienists, and PDMP violations. The Board decided to return the PDMP penalty
163 matrix back to Dr. Hronkin. The board hoped to make the matrix more dental specific. Dr.
164 Nielson hoped to have the matrix cover three issues, failure to register for the PDMP, failure to
165 review the PDMP prior to prescribing and unauthorized access to the database which would fall
166 under a standard of care issue.

167

168 **Agenda Item 9 – PDMP Report**

169

170 Elaine Brewer called in to deliver the board with the PDMP report. Ms. Carrillo was providing a
171 report to the Chiropractic Board and was unable to attend the Dental Board meeting. Ms. Brewer
172 discussed the Narx Care component of the Awarxe platform. This will be rolling out in September.
173 She also noted the delegation of PDMP applications and renewals to the OLE. There is an
174 awareness and feedback questionnaire that will be coming out soon and Ms. Brewer wanted the
175 board to be on the lookout for that. She also stated most dentists holding a DEA are registered with
176 the PDMP Awarxe.

177

178 Dr. Nielson inquired what type of prescribing information the board could get and Ms. Brewer
179 informed the board about the upcoming compliance module that will be rolled out in September.
180 This module will allow the PDMP staff to review what dentists reviewed the database before
181 prescribing and will allow a review of compliance to the regulations.

182

183 Dr. Nielson reported that there have been automated letters from the Awarxe database stating
184 dentists were prescribing outside normal amounts. Ms. Brewer advised the letter is quarterly and is
185 only sent to prescribers who have prescribed at least one opioid in the quarter. It’s sent to peers
186 who have the same specialty in Awarxe. The letter is meant to be exclusively educational and not
187 punitive. Ms. Brewer advised the letter is the same nationwide. Ms. Brewer offered to send a copy
188 of the letter to the board to review with all the confidential material redacted.

189

190 **Agenda Item 10 – Right Touch Regulation Report**

191

192 The board was waiting to be joined by Director Chambers and took a quick break.

193

194 Off Record: 11:04 am

195 On record: 11:17 am

196

197

198 **Agenda Item 16 (h) – Professional Fitness Questions**

199

200 While the board was waiting to be joined by the Director, Dr. Nielson moved on the discuss the
201 professional fitness questions on the initial and renewal dental and dental hygiene applications. Dr.
202 Woller presented the professional fitness questions to the board and showed how he attempted to
203 break the questions into a simpler version. Ms. Walden inquired if the board needs to simplify the
204 questions but add more questions to reduce excessive wording. She noted that the State of Idaho
205 has 31 professional fitness questions on their applications for dental hygiene. OLE Wiard stated
206 that the Central Statutes and Regulations address child support in arrears and it may not be
207 necessary to add questions pertaining to child support to the applications. **It was decided that Dr.**
208 **Woller would continue to review professional fitness questions on all the applications and**
209 **then they would vote on the new questions and get an opinion from LAW. – TASK**

210

211 **Agenda Item 10 – Right Touch Regulation Report**

212

213 The board was informed that Director Chambers would be unable to call in for the Right Touch
214 Regulations presentation or an update on the radiologic equipment inspectors due to illness. This
215 was to be completed in the afternoon by Licensing Supervisor Joe Bonnell but there was no time to
216 complete this presentation.

217

218 **Agenda Item 16 (e) – CEU’s Allowable on Line Per Day**

219

220 Dr. Wenzell presented the board with a list of states and the number of online CEU’s allowed per
221 day. Dr. Wenzell believes the online CEU’s are being abused as some applicants take 17-18 hours of
222 online CEU’s per day. Dr. Nielson states CERP does not make licensees review the entire course
223 content and many licensees skip ahead to the tests at the end. Dr. Wenzell noted it is not acceptable
224 for someone to take 17 hours of CEU in a day when one (1) CEU covers all 50 minutes of course
225 content. Dr. Wenzell suggested the board limit the number of online CEU allowed in a day.

226

227 **On a motion duly made by Walden, seconded by Wenzell, and approved unanimously, it**
228 **was RESOLVED to add 28.410(i) no more than eight (8) hours of online CEU may be**
229 **completed in a twenty-four (24) hour period to the current regulations project. Ms. Zinn can**
230 **let the board know if there are other places in the regulations this should be added.**

231

232 **Agenda Item 16 (g) – NBDE Language Change**

233

234 Dr. Nielson stated the name of the NBDE needs to be corrected in the regulations as the National
235 Board part I will be going away in 2020 and it will be a new integrated board exam. The board
236 discussed changing 28.940 (b)(9) and 28.951(c)(3) to be amended to include **verifying successful**
237 **passage of the National Board of Dental Examination Part I and Part II, or the Integrated**
238 **National Board Dental Examination.**

239
240 On a motion duly made by Nielson, seconded by Wenzell, and approved unanimously, it
241 was RESOLVED to add, verifying successful passage of the National Board of Dental
242 Examination Part I and Part II, or the Integrated National Board Dental Examination, to
243 28.940(b)(9) and 28.951(c)(3) and any other place in the regulations deemed necessary by
244 Ms. Zinn.

245
246 The board decided to break for lunch.

247
248 Off Record: 12:05 PM

249 On record: 1:03 PM

250
251 Those present, constituting a quorum of the board, were:

252
253 Dr. David Nielson, President – Anchorage
254 Ms. Gail Walden – Wasilla
255 Dr. Steven Scheller - Fairbanks
256 Ms. Brittany Dschaak - Dillingham
257 Dr. Jonathan Woller – Fairbanks
258 Dr. Kelly Lucas - Wasilla
259 Dr. Dominic Wenzell – Girdwood
260 Ms. Robin Wahto – Anchorage
261 Dr. Jesse Hronkin – Excused Absence

262
263 **Agenda Item 12 – Public Comment**

264
265 The board reconvened for public comment at 1:03 pm. No one joined the meeting via Zoom or
266 phone for public comment. There was one (1) public member available for public comments. Dr.
267 Kenley Michaud attended public comment to ask the board if a collaborative agreement that is in
268 place between a licensed dentist and a person other than a deep or moderate sedation permit holder
269 (MD or CRNA), is the collaborative agreement with the one dentist who sends the non-permit
270 holder into the field to work or is the collaborative agreement with every office the non-permit
271 holder is sent to? The board consulted the regulations and it was determined that the collaborative
272 agreement is between the dentist employing the non-permit holder and the liability resides with the
273 dentist who hired the non-permit holder. The collaborative agreement and procedures performed
274 by the non-permit holder would be the responsibility of the dentist holding the collaborative
275 agreement and not every office the non-permit holder is sent to by the hiring dentist.

276
277 **Agenda Item 13 – Review Tabled Renewals and AAG Update**

278
279 **Agenda Item 14 – Continuing Education Consent Agreements**

280
281
282 On a motion duly made by Nielson, seconded by Wenzell, and approved unanimously, it
283 was RESOLVED to go in to executive session in accordance with Alaska Statute
284 44.62.310(c)(3) for the purpose of discussing investigative matters that tend to prejudice the

285 reputation and character of any person, provided the person may request a public
286 discussion. Board staff to remain.

287
288 Off Record: 1:11 pm
289 On Record: 2:17 pm

290
291 **On a motion duly made by Nielson, seconded by Woller, and approved unanimously, it was**
292 **RESOLVED to approve Aidan Park’s Dental License by Exam Level II.**

293
294 **On a motion duly made by Woller, seconded by Walden, and approved unanimously, it was**
295 **RESOLVED to approve the renewal of Dr. Lookhart’s Dental License and Moderate**
296 **Sedation Permit in suspended status based upon danger to the public with the**
297 **understanding that Dr. Lookhart has voluntarily surrendered his license pending his**
298 **criminal case.**

299
300 **On a motion duly made by Nielson, seconded by Wahto, and approved unanimously, it was**
301 **RESOLVED to approve consent agreement 2018-000357 for Dr. Halliday.**

302
303 **On a motion duly made by Nielson, seconded by Wenzell, and approved unanimously, it**
304 **was RESOLVED to refer Dr. Uldrikson’s application by credentials to investigations as**
305 **required by CBPL policies and procedures.**

306
307 **On a motion duly made by Nielson, seconded by Woller, and approved unanimously, it was**
308 **RESOLVED to table Dr. Soon Park’s renewal application based on being incomplete.**

309
310 Ms. Walden wanted to state on the record if anyone has questions about a cease and desist order for
311 the Smile Direct Club they should review the Board of Dental Examiners meeting minutes from
312 December 8, 2017 when the order was withdrawn by the board.

313
314 **Agenda Item 15 – Discuss Request for Proposal for Sedation Inspections**

315
316 The board moved on to discuss sedation inspections and the process obtaining sedation inspectors
317 to inspect dental facilities with deep or moderate sedation permits. Rob Roys, Joseph Bonnell, and
318 Sher Zinn were all present via Zoom and AAG Ashley Brown was present to address the board in
319 person.

320
321 Dr. Nielson informed the group that the board could not obtain a specific inspector without going
322 through the appropriate RFP/procurement process. Dr. Nielson is hoping to put out an RFP to
323 find a company who is willing to provide inspections of dental facilities providing deep and/or
324 moderate sedation in Alaska. Dr. Nielson also wanted to know what regulations would need to be
325 revised for the Dental Board to appropriately conduct inspections.

326
327 Ms. Brown informed the board that the current regulations state the board may conduct inspections
328 but it is never a bad idea to specifically spell out what would trigger an inspection, how inspections
329 would be conducted and what is required to pass an inspection. A regulation project may clarify the
330 requirements. Dr. Nielson asked what would need to be stated in regulation to conduct inspections
331 for all sedation permit holders. He noted it would take time to get caught up on the inspections but
332 would like all permit holders to be inspected. Dr. Nielson stated oral surgeons could use AAOMS

333 for their inspections. It was stated the not having the oral surgeons included in the inspections due
334 to AAOMS is a bit disconcerting. Inspections would be more stringent than the buddy system used
335 by AAOMS. Ms. Brown stated the board could draft regulations to include the boards requirements
336 and she would be happy to help the board with that draft. Ms. Walden thought the board covered
337 their bases by using the wording of, “may.”
338

339 The board members would like hyperlinks for references adopted in the statutes and regulations to
340 be added to the dental board website. Such references would include: *Office Anesthesia Evaluation*
341 *Manual*, Eighth Edition, 2012. The American Dental Association’s *Principles of Ethics and Code of*
342 *Professional Conduct*, with official advisory opinions revised to April 2012. *Suggested State Regulations for*
343 *the Control of Radiation*,” Part F, published by the Conference of Radiation Control Program
344 Directors, Inc., May 2009. *Radiological Equipment Registration Form*, dated February 2014. *Radiological*
345 *Equipment Registration Form*, dated February 2014. *Guidelines for Teaching Pain Control and Sedation to*
346 *Dentists and Dental Students*, as adopted by the American Dental Association (ADA) House of
347 Delegates, October 2016. *Guidelines for the Use of Sedation and General Anesthesia by Dentists*, as adopted
348 by the American Dental Association (ADA) House of Delegates, October 2016. *Guideline for*
349 *Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic*
350 *Procedures*. The board was informed that the copies of the references were not added to the website
351 due to copyright laws. CBPL has purchased copies of the referenced items and those with specific
352 copyright laws are not on the website.
353

354 Dr. Nielson informed the board he had relied on SAMERI to determine what is required of a
355 sedation inspector. Mr. Roys informed the board that the procurement process is determined by the
356 dollar amount. It was stated SAMERI could perform the inspections remotely and this is an
357 attractive option for Alaska due to the geography of the state. Mr. Roys informed the board that the
358 procurement process cannot limit competition. Since SAMERI determined the qualifications for
359 the inspectors they could not bid on the RFP. The qualifications need to be determined by the
360 board and be as basic as possible to not limit the competition in the bid process.
361

362 There was discussion about who would be paying for the inspections. Would the state pay or would
363 the dentists pay? It was determined if the state was not going to be invoiced it may be best to list
364 requirements for qualifications in regulations and have the dentists select the appropriate inspector
365 as opposed to going through the procurement process. Originally the sedation license fees were
366 supposed to include the costs of inspections but it has been covering the legal fees for all the
367 regulation changes. More discussion ensued regarding the procurement process and a regulations
368 project.
369

370 The board decided to complete a regulations project instead of completing the RFP through
371 procurement. The board opted to not make a motion and just complete a regulations project to add
372 new sedation inspection qualifications and requirements to pass an inspection.
373

374 **Agenda Item 16(a) – Review Draft Regulations for Public Comment**

375 Ms. Zinn was available for questions from the board via Zoom. Dr. Nielson suggested removing
376 the word, “and,” from 12 AAC 28.010(g)(1) and Ms. Zinn stated she would take care of that when
377 the regulations were sent for public comment. Dr. Nielson also had questions regarding 12 AAC
378 28.010(g)(3) wondering if it should be 60 days but less than one year as opposed to 60 days but less
379 than 2 years for a lapsed sedation permit reinstatement? Dr. Nielson asked for clarification on the
380 definition of the concluding licensing period. Ms. Zinn clarified it was the 2-year period that would

381 conclude before a license renewal. It was stated the continuing education required for reinstatement
382 would be easy to obtain but completing the required sedation cases would not be possible if their
383 license was lapsed. Dr. Nielson suggested the following comment, “sedation cases required under
384 this subparagraph must be completed while holding a current deep sedation permit or while
385 observing or under the supervision of a current deep sedation and general anesthesia permit holder
386 or anesthesiologist or certified nurse anesthetist licensed in this state or another jurisdiction.” He
387 brought to light the fact that a sedation permit holder could not complete the sedation inspections if
388 their license was lapsed. On 12 AAC 28.015 the same wording was used. Ms. Zinn stated if the
389 license was lapsed more than 2 years it is redundant to state that. It is the same as the dental license.
390 Dr. Wenzell suggested removing the word observing, suggesting someone complete the 20 sedation
391 cases with someone to observe them. The board agreed to remove the wording, observing or, from
392 12 AAC 28.010(g)(3)(C) and 12 AAC 28.015(l)(3)(C).

393
394 Dr. Nielson addressed Ms. Zinn’s other comment clarifying if the 2 hours of CE covering
395 restorative function would be in addition to the 20 hours of CE already required for a dental hygiene
396 license renewal. It was decided by the board that the 2 hours would be in addition to the 20 hours
397 of CE and the word, additional, should be added to 12 AAC 28.400 (c) and for 12 AAC 78.780 (d)
398 (3). It was clarified the wording does not need to be added to 12 AAC 78.780 (d)(3) if it’s under
399 400. Additionally, Ms. Walden wanted to update the dates listed for the Code of Ethics for the
400 ADHA to June of 2018 and Code of Ethics for the ADA to November of 2018 under 12 AAC
401 28.905 (a) and (b).

402
403 Dr. Nielson also wanted to add something to 12 AAC 28.940(b)(9) and 12 AAC 28.951(3) regarding
404 the NBDE. The language for the change was e-mailed to Ms. Zinn. In addition, the board changed
405 the requirement of continuing education to only allow for 8 hours of online CEU in a 24-hour
406 period to 28.410(i).

407
408 **On a motion duly made by Walden, seconded by Nielson, and approved unanimously, it**
409 **was RESOLVED to approve the draft regulations for public comment as amended.**

410
411 **Agenda Item 16(f) – Resident Military Exemptions to Courtesy Licenses**

412
413 The board discussed allowing Alaska residents who are military members the option to obtain a
414 courtesy dental license. It was concluded that this could not be an allowable exception unless the
415 centralized statutes and regulations were changed. It was suggested that an e-mail could be sent to
416 Director Chambers making this request. Dr. Nielson offered to write a letter to Director Chambers
417 regarding the resident military exemption. 08.01.062 would like to have the wording non-resident
418 removed or allow for existing military members to be eligible for a courtesy license.

419
420 **On a motion duly made by Nielson, seconded by Wahto, and approved unanimously, it was**
421 **RESOLVED to have the dental board support the idea of removing the requirements under**
422 **central statutes for a courtesy license to apply to non-residents only.**

423
424 **Agenda Item 16(d) – Dental Hygiene Penalty Matrix**

425
426 Ms. Walden suggested the board review what she had drafted now. She is willing to consider any
427 suggestions the board makes regarding the matrix. She will continue to work on the penalty matrix
428 and add more information for the next meeting.

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Agenda Item 18 (a) – Old Business Specialty License Update

Dr. Wenzell informed the board that he had drafted a letter for Dr. Logan of the Alaska Dental Society but needs to reword the letter. Dr. Logan wants to do a poll with the specialists to determine if they want specialty licenses reinstated. If the specialists do not want the licenses reinstated it would not make sense to complete a statute or regulations change. Dr. Wenzell will draft a letter to the AK Dental Society asking for input regarding the definition of a specialist and the specialty license issue.

Agenda Item 18 (b) – Review Board Interview Process

OLE Wiard discussed the process of completing a board interview for the dental license by credentials applications. She informed the board that she asks the applicant for times available for the interview then asks the board for a volunteer if the time fits their schedule. Once a date and time are identified for the applicant and a board member, the conference room is reserved and the meeting is set up in Zoom. The meeting links and call in numbers are sent to the applicant and the board member. OLE covered the 10 questions the board asks of each applicant.

It was stated by OLE Wiard that the Right Touch Regulations Project was not being presented at today’s meeting but the interview for credentials process is something that the board may consider removing from statute to speed up the license process. It was also noted by the board that nothing has ever come from an interview that has changed the deciding factor of issuing or denying a license. The board asked OLE Supervisor Bonnell if this could be removed from statute and it was stated that the current administration would consider the changes. Basically, the board would need to let the Division know what changes the board would like to see and Director Chambers would present the administration with the suggested changes for potential legislative approval.

Agenda Item 18 (c) – Task List Update

The board reviewed the previous task list and noted that this task list would not be as long.

Agenda Item 19 (a) – Task List

OLE Wiard offered to type up the new task list upon return to the office and e-mail it to the board members. It was determined that Ms. Walden would continue to work on the Dental Hygiene Penalty Matrix. Dr. Nielson will work on drafting the requirements for the sedation inspectors for a regulations project. Dr. Nielson will also draft a letter to Director Chambers regarding travel, changing the centralized statutes and regulations to remove non-residents for courtesy dental licenses, and suggested statute and regulation changes for the right touch project. OLE Wiard will get the PDMP warning letter mailed to non-registered dentists. Dr. Wenzell will draft a letter to Dr. Logan regarding specialty licenses and the definition of a dental specialty. Dr. Hronkin will continue to revise the PDMP penalty matrix to make it more specific to the dental board. The board is requesting a memorandum from Director Chambers informing the board of the radiologic equipment inspections updates. Dr. Woller will continue to draft the professional fitness questions for the board to vote on in On Board. Once approved by the board they will be forwarded to LAW for review. OLE Wiard will send a Doodle Poll in approximately 2-3 weeks to schedule the upcoming board meetings.

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Agenda Item 19 (b) – Meeting Schedule

OLE Wiard is to send a Doodle Poll to the board in 2-3 weeks to schedule upcoming board meetings. The meeting is to be scheduled sometime around March 27, 2019.

Agenda Item 19 (c) – Review Varying Exam Content

The board discussed the different exams that may be accepted after 02/01/2019. The ADEX, CRTA, CRDTS, SRTA, all need to verify that they meet the 6 requirements in regulation. Ms. Walden stated that the exam scores from agencies other than WREB do not always include the Endo scores which are specific in regulation. She suggested OLE Wiard make a form to send to the exam agencies asking if applicants passed the required components per regulation. OLE Wiard stated she has contacted the testing agencies and the only additional tests determined to be needed for ADEX, CRDTS, and SRTA applicants would only need to take the CTP portion which is already the procedure in place.

Agenda Item 19 (d) – Review Varying Exam Content

On a motion duly made by Nielson, seconded by Dschaak, and approved unanimously, it was RESOLVED to use the Division Seal for the Dental Board Seal.

Dr. Nielsen made a motion to adjourn the meeting which was seconded by Ms. Wahto. Meeting adjourned at: 4:19 PM.

Respectfully Submitted:

Tracy Wiard
Occupational Licensing Examiner

Approved:

David Nielsen, DDS, President

Date: _____

Introduce New Licensing Examiner

Regulation Training

Steps in the Regulation Process for a Board and Commission (board)¹

Beginning the Process

1. At an open meeting, the board initiates and votes on proposed regulation changes.
2. **Reason:** Identify the reason for the proposed action, such as compliance with new or changed state law. If applicable, identify the law, order, decision, or other action of the federal government, or federal or state court, if that is the basis for the proposed action. The description need only be a sentence or two.
3. **Cost information:** In the meeting minutes there must be estimated costs in the aggregate to comply with the proposed action to:
 - A private person
 - Another state agency
 - A municipality

Cost information is described simply as an estimate of annual costs within the board's ability to determine due to its familiarity with the regulated community.

Example: The Board of Chiropractic Examiners is proposing to add three CE credits to their continuing competency requirements for a biennial license renewal. The proposal may cost

- A private person: \$50 per applicant/licensee
 - Another state agency: None known
 - A municipality: None known
4. Within 10 days of the meeting, board staff must transmit board minutes² or an excerpt of the minutes, draft language or proposals, and a completed Regulations FAQ Worksheet for the proposed regulation changes requested by the board to the Regulations Specialist.

What comes next: Regulations Specialist

5. The Regulations Specialist determines if there is authority in statute to adopt the proposed regulation changes.
6. The Regulations Specialist prepares a draft of regulation changes, using the Department of Law's *Drafting Manual for Administrative Regulations* for conformity and style, and works with board staff before submitting the final draft to the board for review/approval. In some instances the draft regulation changes will be reviewed by an AAG before the final draft is submitted to the board for review/approval.
7. Once completed, the draft proposed regulation changes are presented to the board at its next public meeting to review and approve the final draft, amends if needed, and requests that the approved draft be finalized and public noticed.

Public Notice

8. NOTE: The board must **always** provide an opportunity for submission of written comments in the regulation-adoption process. Also, the board should determine if it wants to hold a public hearing on the proposed regulation changes at its next meeting. If it does, the location, date and time of the hearing needs to be included in the public notice. Public hearings are usually held in conjunction with a regularly-scheduled meeting of the board and are always recorded. Oral public hearing is optional; however, answering the following questions will help the board determine if an oral public hearing is needed:
- Are the regulations controversial and is there likely to be substantial public interest in them?
 - Would those most affected by the regulations be better able to participate if an oral hearing were held?
 - Would the board benefit from a face-to-face or teleconferenced opportunity to receive comments on the proposed regulations from interested persons?
9. Regulations Specialist sends notice to Alaska Dispatch News (or other newspapers if warranted) for publication, all interested parties, and licensees, if warranted. The Regulations Specialist posts the notice on the Alaska Online Public Notice System, electronically transmits a copy of the notice and proposed regulation changes to all incumbent legislators and the Legislative Affairs Agency, House & Senate Labor & Commerce Committees, the Administrative Regulation Review Committee, Legislative Council, Lt. Governor, Governor, and Department of Law (Law). It is also emailed to board members and affected staff, including the commissioner's office. Public notice will be posted on the board's webpage.

Comment Period

10. The Regulations Specialist or board staff shall make a good faith effort to answer relevant questions received at least 10 days before the end of the public comment period. Questions must be in writing or asked at the legally noticed public meeting. The Regulations Specialist or board staff shall answer questions in writing and make the questions and answers available on the Alaska Online Public Notice System and the board's webpage. FAQs will be posted on the board's webpage and updated when relevant questions are answered. The Regulations Specialist or board staff may, but are not required to, answer written questions received after the 10-day cutoff date.
11. After the comment deadline (at least 30 days in duration), comments received on proposed regulation changes are compiled and copied by the Regulations Specialist and given to board staff to include in the board packets for the next open board meeting to be considered prior to adopting. Comments received after the deadline should not be forwarded to the board and comments should not be taken at the board meeting from the public prior to adoption unless a hearing was noticed and the comments are heard by the board during the comment period.

Adoption

12. The board's options regarding the proposed regulation changes at its next meeting are:

- a. It can adopt the proposed regulation changes as written/publicly noticed, amend, and adopt them; or
 - b. Choose to take no action on them.
 - c. Substantive changes may require additional drafting and public notice (see Step 7 above).
13. When making a motion to adopt the regulations, the board is required to state on the record that it has reviewed any comments received, and considered the cost to private persons of the regulatory action being taken.
14. When regulation changes are adopted:
- a. The chair signs the adoption/certification order; and
 - b. The board staff signs an affidavit of board action and/or affidavit of oral hearing (if applicable) and attaches it to the relevant minutes or an excerpt of the minutes and forwards to the Regulations Specialist.

Finalizing the regulation change process

15. Regulations Specialist prepares the final regulation package for transmittal to Department of Law for final review/approval, which includes the adopted regulations, certain affidavits, and other appropriate documents.
16. Assigned agency attorney reviews the regulations.
17. Regulations attorney reviews and either approves or disapproves regulation changes. Law reviews and will occasionally make edits. (On rare occasions, this may require the edited version to be re-adopted by the board at a subsequent meeting.) At the same time, the adopted regulations are submitted to the governor for review, and to the chair and all members of Administrative Regulation Review Committee (ARRC), together with any fiscal note if required. The ARRC chair has 10 days to submit to the governor comments on the regulations.
18. Unless returned by the governor, when the governor, the ARRC, and Law's review are complete, the adopted regulations are forwarded to the Lt. Governor for filing. Regulation changes are effective 30 days after filing unless a later effective date is specified in the adoption order.

Once regulations are effective

19. Agency posts summary of approved regulation changes on Alaska Online Public Notice System.
20. Agency updates statutes and regulations board webpage.
21. Lt. Governor's office sends regulations to ARRC.
22. Regulation published in Alaska Administrative Code.

¹ The process may take six months to a year or longer to complete. It may be expedited if a board meets often or holds a teleconference following the written comment period to adopt the final regulations. Department of Law workload also plays a big part in the timeframe.

² Board minutes reflecting concisely what the project entails plays an important part in getting a project rolling. This is true for the initial stages and the final motion adopting the regulations following the public comment period due to the relevant minutes or an excerpt of the minutes being forwarded to the Department of Law with the final project.

Steps in the Board Regulation Adoption Process

<i>Day 1</i>	<p>1 At an open meeting, the board votes on language to change regulations. This motion is forwarded to the Division Regulations Specialist for drafting.</p>	<i>Day 65</i>	<p>7 Division Regulations Specialist compiles answers to questions and posts FAQ on the program web page.</p>	<p><i>Once Regulations Are Effective</i></p>	
<i>Day 30</i>	<p>2 Once drafting is complete, the board holds another public meeting to edit or approve draft for public notice.</p>	<i>Day 75</i>	<p>8 Regulations Specialist compiles public comments for distribution to board.</p>		<p>14a Agency posts summary on Alaska Online Public Notice System</p>
	<p>3 Approved language is reviewed by Division attorney.</p>	<i>Day 90</i>	<p>9 Board holds an open meeting to review public comments, make minor changes, and adopt regulations. Substantive changes may require additional drafting and public notice (Step 2).</p>		<p>14b Regulation published in Alaska Administrative Code</p>
	<p>4 Department of Law opens file.</p>		<p>10 Division submits final regulation package to Department of Law for review and approval. Regulations Specialist submits to the Governor's office.</p>	<p>14c Forms & FAQ updated on program web page</p>	
<i>Day 45</i>	<p>5 Division publishes and distributes public notice, additional regulation notice information, and proposed regulation to all licensees and interested parties. Public notice posted in newspaper and on Alaska Online Public Notice System</p>		<p>11 Agency attorney reviews regulation</p>		
	<p>6 Public comment period and/or hearing (if applicable).</p>	<i>Day 110</i>	<p>12 Regulations attorney reviews and either approves or disapproves regulation</p>		
		<i>Day 150</i>	<p>13 Unless returned by the Governor, Lt. Governor's office files approved regulation; regulations become effective in 30 days</p>		

All timeframes are estimated, dependent upon staff and attorney workflow and board scheduling.

Break



Investigative Report

EXECUTIVE SESSION MOTION

I, _____, move that the Alaska State Board of Dental Examiners enter into executive session in accordance with AS 44.62.310(c), and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing _____

Board staff to remain during the session.

Off record: _____

On record: _____

Authority: AS 44.62.310(c), Government meetings public

The following subjects may be considered in executive session:

- **matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;**
- **subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;**
- **matters which by law, municipal charter, or ordinance are required to be confidential;**
- **matters involving consideration of government records that by law are not subject to public disclosure.**

EXECUTIVE SESSION MOTION

Sec. 44.62.310. Government meetings public.

(c) The following subject may be considered in an executive session:

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;
- (3) matters which by law, municipal charter, or ordinance are required to be confidential;
- (4) matters involving consideration of government records that by law are not subject to public disclosure.

MOTION WORDING:

“In accordance with the provisions of Alaska Statute 44.62.310 (c), I move to go into executive session for the purpose of discussing (select the appropriate statutory citation for the situation):

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity; *OR***
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion; *OR***
- (3) matters which by law, municipal charter, or ordinance are required to be confidential; *OR***
- (4) matters involving consideration of government records that by law are not subject to public disclosure.**

Board staff is requested to remain during the session *OR*

Board only to remain during session.”

Staff will then state **“The board is off the record at _____(time).”**

Continuing Education Consent Agreements

EXECUTIVE SESSION MOTION

I, _____, move that the Alaska State Board of Dental Examiners enter into executive session in accordance with AS 44.62.310(c), and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing _____

Board staff to remain during the session.

Off record: _____

On record: _____

Authority: AS 44.62.310(c), Government meetings public

The following subjects may be considered in executive session:

- **matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;**
- **subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;**
- **matters which by law, municipal charter, or ordinance are required to be confidential;**
- **matters involving consideration of government records that by law are not subject to public disclosure.**

EXECUTIVE SESSION MOTION

Sec. 44.62.310. Government meetings public.

(c) The following subject may be considered in an executive session:

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;
- (3) matters which by law, municipal charter, or ordinance are required to be confidential;
- (4) matters involving consideration of government records that by law are not subject to public disclosure.

MOTION WORDING:

“In accordance with the provisions of Alaska Statute 44.62.310 (c), I move to go into executive session for the purpose of discussing (select the appropriate statutory citation for the situation):

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity; *OR***
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion; *OR***
- (3) matters which by law, municipal charter, or ordinance are required to be confidential; *OR***
- (4) matters involving consideration of government records that by law are not subject to public disclosure.**

Board staff is requested to remain during the session *OR*

Board only to remain during session.”

Staff will then state **“The board is off the record at _____(time).”**

Regulation Review

Zinn, Sher K (CED)

From: Nicole S <nicolelynsmoot@gmail.com>
Sent: Monday, September 30, 2019 4:19 AM
To: Regulations and Public Comment (CED sponsored)
Subject: Comments on proposed changes to dental licenses

To be honest here, I am sick and tired of the changes that have happened in the last 3 years. I can tolerate a change from time to time but it seems that every couple months you guys are changing something. I am VERY against the change to limit the online CE's taken by dental hygienists. It's the same monotonous classes that come up year after year to Alaska and the options lack variety. I don't want my online learning options reduced because the state of Alaska wants to constantly change its dental licensure rules because it can't get its act together. And I DO NOT appreciate when changes happen mid-licensure like the change requiring more CE hours. Make changes at renewal times, not halfway through.

Nicole Smoot

Sent from my iPhone



Dr. Evan L. Wheeler
3691 Cameron St. Ste. 101
Fairbanks, AK 99709
P: (907)479-8123
F: (907)479-0685

Date: 09-19-2019

RECEIVED
Juneau

SEP 26 2019

CBPL

Sher Zinn
Division of Corp, Business, Professional Licensing
P.O.Box110806
Juneau, AK 99811-0806
To whom it may concern,

Concerning 12 AAC28.410: Limiting internet based continuing education. I feel that online CE credits should continue to be allowed. Live continuing education courses here in Alaska are virtually non-existent especially anywhere outside Anchorage. It is extremely difficult to complete all required CE credits when it requires extensive travel and expense outside the state. It is time consuming and the rest of the dental team suffers when the office is closed and they are not receiving paychecks. There are quality online webinars and classes that should continue to meet at least a significant portion of our continuing education requirements. Please take into consideration the things I have stated in this letter. The proposed changes would have a detrimental outcome and adversely affect most Alaskan dentists.

Respectfully,

Evan L. Wheeler D.D.S., PC

A handwritten signature in blue ink, appearing to read 'E. Wheeler', with a long horizontal flourish extending to the right.

Zinn, Sher K (CED)

From: Ellen Donohue <ellen.donohue1@gmail.com>
Sent: Saturday, September 21, 2019 11:09 AM
To: Regulations and Public Comment (CED sponsored)
Subject: Proposed changes to 12 AAC 28.410

To whom it may concern,

I am writing in response to the proposed changes to 12 AAC 28.410 to limit internet based continuing education.

As a practicing dentist in Anchorage, I am not in favor of this proposed limitation for the following reasons:

- 1) The ADA online CE Library offers a plethora of quality, low cost CE courses, many of which are simply a video of a live lecture speaker/course.
- 2) There are few choices for live CE courses for dentists and other dental professionals in Alaska. The content and options available are quite limited. The costs associated with traveling out of state for CE courses is massive (airfare, hotel, missed work, meals, etc) compared to the courses available online. The costs of the in-person CE that does make it to Alaska is much, much greater than that available online.
- 3) Having attended both online and in-person CE courses, it is my impression that some courses are great and others are not. This is independent of delivery methods, in-person verses online.
- 4) The flexibility of online courses is far superior. I can complete these courses between patients, during unplanned patients cancellations, etc.

For these reasons, I ask that the proposed change to further limit online CE not be implemented.

Thank you for your time and consideration of my comments.

Very Respectfully,

Ellen Donohue, DDS

Zinn, Sher K (CED)

From: Alaska Online Public Notices <noreply@state.ak.us>
Sent: Thursday, September 19, 2019 10:57 AM
To: Regulations and Public Comment (CED sponsored)
Subject: New Comment on Notice of Proposed Changes Relating to Licensees in the Regulations of the Board of Dental Examiners

A new comment has been submitted on the public notice [Notice of Proposed Changes Relating to Licensees in the Regulations of the Board of Dental Examiners](#).

Submitted:

9/19/2019 10:56:59 AM

Jill Black, RDH
2thclnr@msn.com

Anchorage, AK, US
Anonymous User

Comment:

Comment regarding 12 AAC 28.400/12 AAC 28.780 CE requirements for dental hygienist with restorative function endorsement.

I hold a restorative function endorsement and my concern with adding the two hours that must contain two hours of CE relating to materials or techniques. As a hygienist we are limited to access to the type of courses in the state of Alaska. I feel if this is proposed it should be allowed to be internet based due to limitations of access to these type of courses in the state of Alaska. Flying out of state to a hygiene based convention would likely not offer a dental materials type course for restorative function hygienist as not all states allow this and would be very costly to attend an out of state course with restorative materials focus.

If this goes into proposal then it should be allowed to be internet based CE for materials and techniques.

Thank you,

Jill Black, RDH DH 2001

You can review all comments on this notice by [clicking here](#).

[Alaska Online Public Notices](#)

Zinn, Sher K (CED)

From: Christopher Rosenvall <chrisrosenvall@hotmail.com>
Sent: Thursday, September 19, 2019 9:53 AM
To: Regulations and Public Comment (CED sponsored)
Subject: Re: Questions about Proposed Dental Changes
Attachments: Screen Shot 2019-09-19 at 9.40.05 AM.png; Screen Shot 2019-09-19 at 9.40.15 AM.png; 2019 CE course - AAPD pediatric medicine.pdf

Thank you very much for your replies and clarification.

Regarding question #1 - for example, the American Academy of Pediatric Dentistry (AAPD) offers online courses that are recordings of their live CE courses. They are excellent and contain the same content as the live courses. Many of them are longer than 8 hours. I have attached screenshots of some of the course offerings, as well as a certificate for an AAPD online course I recently completed.

I think it would be worth considering that sometimes for dental specialists it can be challenging to find relevant CE courses held in Alaska, at least enough that would meet the required number of CE hours every year. I am grateful that organizations like the AAPD have their CE courses recorded and able to be taken online. I hope the board might consider online courses like ones presented by the ADA, AAPD, etc. that are longer than 8 hours.

Thank you,
Chris Rosenvall

From: Regulations and Public Comment (CED sponsored) <regulationsandpubliccomment@alaska.gov>
Sent: Thursday, September 19, 2019 10:46 AM
To: Christopher Rosenvall <chrisrosenvall@hotmail.com>
Subject: RE: Questions about Proposed Dental Changes

Please see my responses to your questions below.

1. That's a good question, I don't know any online courses that are that long, we usually see courses online for 1 hour but no more than 2.5 hours. That being said, you may want to make a formal comment to the board regarding this particular question if you have knowledge of online courses that are in excess of 8 hours. If you can give a specific example to document they are available, that would be good for the board to see. The issue they have been seeing are folks doing 1 and 2 hours courses at a time and doing 10-20 all on the same day. This is what the board is trying to avoid by adding this new subsection.
2. This section is only being amended to allow for the restorative function CE's for dental hygienists. The change does not change any of the current regulations in that subsection. If a person obtains more than the minimum 16 hours of CE during the initial period the person was licensed and they have not been licensed for the full 2 years but more than one full year, any CEs above the 16 CEs do not rollover to the next renewal period. The CE's must be completed during the renewal period prior to the renewal the licensee is applying for.

Example- for renewal of a license for the 3/1/2019 to 2/28/2021 renewal period, all of the CEs must be completed during the 3/1/2017 to 2/28/2019 renewal period. If a person was licensed more than 1 year but less than 2 full years during the 3/1/2017-2/28/2019 renewal period, they must complete a minimum of 16 hours, one half of the full 32 hours for someone licensed for the full renewal period. If that person has more than 16 CEs, the excess CEs could not be used for the next renewal period (3/1/2021-2/28/2023) because the CEs would not have been completed during the correct renewal period.

I hope I have answered your questions, if you have more questions, please feel free to ask.

Respectfully,

Sher Zinn
Regulations Specialist
Division of Corporations, Business
And Professional Licensing
907-465-1049
Sher.zinn@alaska.gov

From: Christopher Rosenvall [mailto:chrisrosenvall@hotmail.com]

Sent: Tuesday, September 17, 2019 10:14 AM

To: Regulations and Public Comment (CED sponsored) <regulationsandpubliccomment@alaska.gov>

Subject: Questions about Proposed Dental Changes

Good morning,

Could you clarify the following about the Proposed Changes Relating to Licensees in the Regulations of the Board of Dental Examiners:

1) 12 AAC 28.410 is amended by adding a new subsection to read: (i) Not more than eight hours of continuing education taken through the internet in a 24- hour period may apply to meet the continuing education hours required by 12 AAC 28.400 or 12 AAC 28.405.

- What if I were to take an 15 hour online course produced by the AAPD? I completed the course online over a period of several days. Would the full 15 hours be valid? The CE certificate would only have the date the course was completed, so how would I show that the hours were earned over a period longer than 24 hours?

2) 12 AAC 28.405(b)(1) is amended to read: (1) completion of at least one-half of the number of contact hours of continuing education required by 12 AAC 28.400(b)(1) and (c) for each complete calendar year that the applicant was licensed during the calendar year that the applicant was licensed during the concluding licensing period;

- If I attend an event where I would receive over the one-half of the number of contact hours of CE in the first year (example: AAPD Annual session), how would those hours be credited? For example, I attend the AAPD annual session and earn 22 total CE hours. Would I be credited only 16 hours and then need to complete 16 hours the following year? Or would I need to only complete 10 hours the following year to have 32 total CE hours during the licensing period?



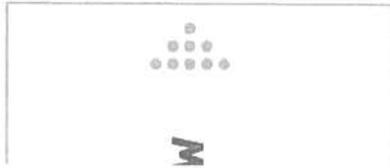
Safe and Effective Sedation for the Pediatric Dental Patient

CE Credit: 15

Non-member Price: \$620

PURCHASE

This course features the recognized leaders in the field, both in dental anesthesia as well as in pediatric dentistry. You'll find didactic lectures, case studies, and panel discussions. This course is designed for pediatric dentists who have had training in sedation techniques.



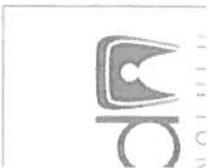
Comprehensive Review Audio

CE Credit: 18

Non-member Price: \$950

PURCHASE

This highly acclaimed course provides a comprehensive review of pediatric dentistry. It is helpful to AAPD members in their preparation for the ABPD examinations.



AAPD 2018 Online CE

CE Credit: 31.75

Expiration Date: 5/31/2021



AMERICA'S PEDIATRIC DENTISTS
THE BIG AUTHORITY on little teeth

211 E. Chicago Avenue, Suite 1600, Chicago, IL 60611

Continuing Education Certification of Attendance

*This document verifies your participation in the following continuing education
lecture course offered by the
American Academy of Pediatric Dentistry:*

Pediatric Medicine Update

*presented online via the
Education Passport
13 CE contact hours*

AAPD Course No.: 10578

AGD Fellowship/Mastership ID No. 214685

Florida Registration No. PP072

California Registration No. 13-2272-10578

Participants: The continuing education credits issued for participation in this activity may not apply toward license renewal in all states. It is the responsibility of each participant to verify requirements of his or her state licensing board(s).

Signed: 

John S. Rutkauskas, DDS, MBA, CAE
Chief Executive Officer

Date: Monday, July 8, 2019

Name of participant: _____

The American Academy of Pediatric Dentistry is an ADA CERP Recognized Provider

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to ADA CERP at www.ada.org/goto/cerp.

ADA CERP® | Continuing Education
Recognition Program

**Pediatric
Medicine**



aapd
Continuing Education

2017 Pediatric Medicine Update

CE Credit: 13

Expiration Date: 4/6/2020

LAUNCH

This course will provide the pediatric dentist, dental resident, hygienist and assistant an update on a wide variety of areas of pediatric medicine, to include common disorders and diseases that the pediatric dentist may encounter in clinical practice. All speakers are on staff at Boston Children's Hospital and are members of the Harvard Medical School faculty, and many are nationally and world-renowned in their respective fields. Each lecture will provide a medical review of the more common disorders and diseases the pediatric dentist might encounter in clinical practice setting, followed by a discussion of the latest advances in management with a specific emphasis on its relationship to clinical dentistry. The lecture format followed by panel discussion affords participants an opportunity for dialogue between lecturer and audience.

Learning Objectives [Click to expand](#) ~

12 ACC 28.065. INSPECTIONS. (repealed)

New Section

12 ACC 28.068. ON-SITE INSPECTIONS. (a) A licensed dentist who holds a permit for deep sedation or general anesthesia under 12 ACC 28.010 or for moderate sedation under 12 AAC 28.015 must:

(1) obtain an on-site inspection every four years by an organization approved by the board where sedation or anesthesia is provided.

(2) choose one office to have inspected if the permit holder provides sedation or anesthesia in more than one office. The permit holder must provide an attestation that all the same standards are met in each office where they provide sedation or anesthesia.

(b) On-site inspections by organizations approved by the board include:

(1) Accreditation Association for Dental Offices (AAFDO); or

(2) The American Association of Oral and Maxillofacial Surgeons (AAOMS); or

(3) American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF); or

(4) Accreditation Association for Ambulatory Health Care AAAHC); or

(5) Substantially equivalent organizations approved by the board.

(c) On-site inspections under this section must be completed by the end of the first full permit renewal period after the effective date of this section or within three years after initial permit issuance, whichever is later.

(d) A licensed dentist who seeks to renew a permit to administer deep sedation or general anesthesia or moderate sedation after March 1, 2023 under this chapter must provide proof of an on-site inspection by an organization approved by the board within the previous four years prior to the concluding licensing period.

(e) If the equipment, facilities, or personnel training are found to be inadequate to assure safe use of sedation or anesthesia after a poor inspection report, the permit holder may conduct a follow-up inspection. If the follow-up inspection report is inadequate, the board will deny issuance of a permit under 12 AAC 28.010 or 12 ACC 28.015, immediately suspend a permit issued under 12 AAC 28.010 or 12 ACC 28.015, or order the dentist to immediately cease sedation or anesthesia services provided in their facility under 12 AAC 28.030.

Lunch



gg64306403 www.gograph.com

Public Comment

Moderate Sedation Program Verification Form Revision



THE STATE
of

ALASKA

Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

Board of Dental Examiners

State Office Building, 333 Willoughby Avenue, 9th Floor

PO Box 110806, Juneau, AK 99811-0806

Phone: (907) 465-2550 • Fax: (907) 465-2974

Email: BoardOfDentalExaminers@Alaska.Gov

Website: ProfessionalLicense.Alaska.Gov/BoardOfDentalExaminers

Program Verification

I am applying for a permit to allow me to administer moderate sedation or minimal/moderate sedation for patients 13 years of age and younger in the State of Alaska. The Board of Dental Examiners requires that this form be completed by the institution where I received my training in administering moderate/minimal sedation. Please complete this form and return it directly to the address above.

I hereby release all academic records necessary to complete the following questionnaire to the Board of Dental Examiners.

Name on Certificate:			
Signature:		Date:	

THE BELOW IS FOR INSTITUTION USE ONLY

Institution Name:		Program Name:	
Address:		Date Completed:	

- Is the program accredited by the Commission on Dental Accreditation (CODA). Yes No
- Is the program a post-doctoral university or teaching hospital? Yes No
- Is the program a CODA-approved residency in pediatric dentistry? Yes No
- If "Yes" to question #3, did the student perform at least 20 sedations on patients younger than 13? Yes No
- Is the training consistent with the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students as adopted by the October 2016 American Dental Association House of Delegates? Yes No

I have attached a course description or course outline.

I hereby certify that the above information regarding the training in moderate/minimal sedation that the above-named applicant completed is true and correct to the best of my knowledge, and that he/she has acquired the necessary knowledge and proficiency to perform moderate sedation, or minimal sedation to patients younger than 13 years of age.



Printed Name of Instructor of Dean:

Signature of Instructor or Dean:



Board of Dental Examiners

State Office Building, 333 Willoughby Avenue, 9th Floor
PO Box 110806, Juneau, AK 99811-0806
Phone: (907) 465-2550 • Fax: (907) 465-2974
Email: BoardOfDentalExaminers@Alaska.Gov
Website: ProfessionalLicense.Alaska.Gov/BoardOfDentalExaminers

Permit to Administer Moderate Sedation

A dentist may not administer moderate sedation to patients over 13 years of age or moderate or minimal sedation to a patient younger than 13 years of age without a permit issued by the Alaska Board of Dental Examiners.

A moderate sedation permit is renewed biennially in conjunction with the renewal of the permittee's license to practice dentistry in the State of Alaska.

Average processing time to complete the application file is 6-8 weeks. Apply far enough in advance to allow this process to occur.

The following must be on file before your application will be reviewed by the Board:

1. Complete, signed and notarized application form 08-4172;
2. Course verification form.
 - a. If providing moderate sedation to a patient at least 13 years of age, documentation of either:
 - Training in moderate sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students* while enrolled in a dental program accredited by CODA or, a post-doctoral university or teaching hospital program (form 08-4172a); or
 - A board approved continuing education course in sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*. The course must consist of a minimum of 60 hours of instruction plus administration of sedation for a least 20 individually managed patients per participant (form 08-4172b).
 - b. If providing moderate or minimal sedation to patients younger than 13 years of age in addition to patients 13 years of age and older, documentation of either:
 - Completion of a CODA accredited residency in pediatric dentistry; (form 08-4172a); or
 - An additional 30 hours of board-approved coursework in pediatric moderate sedation (form 08-4172d).

— and —

Provide proof of administration of sedation for at least 20 individually managed patients younger than 13 years of age.

- c. If providing moderate or minimal sedation only to patients younger than 13 years of age, documentation of either:
 - Completion of a CODA accredited residency in pediatric dentistry; or
 - Completion of at least 60 hours of continuing education coursework in pediatric moderate sedation approved by the board (form 08-4172c);
- and —
- Provide proof of administration of sedation for at least 20 individually managed patients younger than 13 years of age.

If providing moderate sedation to patients 13 years of age and older, and moderate or minimal sedation to patients younger than 13, the applicant must show proof of training under a. and b. in this section.

3. Certification of Equipment, Facilities and Staff (Article 1)
4. Copy of current American Heart Association Advanced Cardiovascular Life Support (ACLS) card, or other certification that meets the requirements of 12 AAC 28.015(d)(5). Copy of current Pediatric Advanced Life Support (PALS) for Health Professionals if providing sedation to patients younger than 13. Both are required if providing sedation to patients of all ages.
5. \$100 nonrefundable application fee;
6. \$1,000 permit fee for all or part of the initial biennial permit period.
7. In addition to meeting the requirements of #2 above, the documentation must:
 - a. have been completed within three years immediately before application;

— or —
 - b. if training was obtained three years but less than five years before submitting the application, document four hours of continuing education that focuses on one or more of the following:
 - a. Venipuncture
 - b. Intravenous sedation
 - c. Enteral sedation
 - d. Physiology
 - e. Pharmacology
 - f. Nitrous oxide analgesia
 - g. Patient evaluation, patient monitoring, or medical emergencies

— or —

 - if training was obtained three years but less than five years before application, document completion of a comprehensive review course in moderate sedation approved by the board;

— or —
 - c. If more than five years have elapsed since completion of the training required and the applicant holds a permit for moderate sedation from another jurisdiction where the applicant is also licensed to practice dentistry, you may submit documentation of at least 25 cases at the moderate sedation level not earlier than the 24 months immediately preceding application;

— or —
 - d. Demonstrate current competency to the satisfaction of the board that the applicant has skill in moderate sedation to safely deliver moderate sedation services to the public.

How Can You Help?

1. Average processing time to process the application from 6-8 weeks. Apply far enough in advance to allow this process to occur. Applications are reviewed in order of receipt in our office.
2. If you wish to expedite processing as much as you can, send any necessary verification forms out via overnight mail to the appropriate organization and include a return overnight mail envelope addressed to the licensing examiner for the organization's use. This will help them to respond quickly.
3. Ensure that the application is complete when you submit it and provide any necessary explanations with the application. Print legibly or type your application.

Applications will be processed according to the date received. You will be notified in writing or by email as soon as your application has been reviewed.

The Alaska State Board of Dental Examiners conducts a thorough evaluation of education, training, employment or work history, malpractice history, and any criminal or disciplinary history. The Board will not accelerate one application over others nor will it forego any elements of its screening process.

! General Information

APPLICATION PROCESSING:

The average time to process a paper application varies by program, but can take 6-8 weeks from the date it is received in this office, complete with all correct forms, supporting documents and appropriate fees paid. If the application is incomplete, the applicant will be notified of the incomplete and/or incorrect documents and fees. When the application is complete and correct and all supporting documents have been received and all fees have been paid the license will be issued and sent to you with a cover letter about Alaska statutory requirements. If the application is not approved for licensure, a written explanation of the basis of that denial and information on how to appeal the decision will be provided. Start the process far enough in advance to allow for processing time. Applications are reviewed in order of receipt in our office, and walk-in customers should not expect immediate review.

RENEWAL INFORMATION:

All dental licenses and sedation permits expire on February 28 of odd-numbered years regardless of when issued, except licenses issued within 90 days of the expiration which are issued through the next biennium. The sedation permit fee for subsequent renewal periods is \$350.00.

“YES” RESPONSES:

A “Yes” response in the application does not mean your application will be denied. If you have responded “Yes” to any professional fitness questions in the application, be sure to submit a signed and dated explanation, and both charging and closing court documentation.

DENIAL OF APPLICATION:

Please be aware that the denial of an application of licensure may be reported to any person, professional licensing board, federal, state, or local governmental agency, or other entity making a relevant inquiry or as may be required by law.

RANDOM AUDIT:

If your program requires continuing education, the Division will audit a percentage of the license renewals. If your license is randomly selected for audit, you will be sent a letter and required to submit copies of documentation and proof that you satisfied the continuing competency requirements as you stated on this renewal form. Please note that licensees are randomly selected by computer and may be randomly selected as often as the computer program chooses. You must save your documents for at least four years so you can respond to audits.

ADDRESS OR NAME CHANGE:

In accordance with 12 AAC 02.900, it is the applicant's/licensee's responsibility to notify the Division, in writing, of changes of address or name. Name and address change notification forms are available on the Division's website. The address of record with the Division will be used to send renewals and all other official notifications and correspondence. The name appearing on the license must be your current legal name.

CERTIFIED TRUE COPIES:

If any of the required documents will be issued under a former name, indicate on the application and submit marriage license and/or court documents that are notarized as a “certified true copy of the original document”.

SOCIAL SECURITY NUMBERS:

AS 08.01.060 and 08.01.100 require that a U.S. Social Security Number be on file with the Division before a professional license is issued or renewed for an individual. If you do not have a U.S. Social Security Number, please complete the Request for Exception from Social Security Number Requirement form located at ProfessionalLicense.Alaska.gov or contact the Division for a copy of the form.

SPECIAL ACCOMMODATIONS FOR EXAMINATION:

Programs under the jurisdiction of the Division of Corporations, Business and Professional Licensing are administered in accordance with the Americans with Disabilities Act. If you require a special accommodation when taking the licensing examination, you must submit an *Application for Examination Accommodations for Candidates with Disabilities form* (08-4214).

PUBLIC INFORMATION:

Please be aware that all information on the application form will be available to the public, unless required to be kept confidential by state or federal law. Information about current licensees, including mailing addresses, is available on the Division's website at ProfessionalLicense.Alaska.gov under License Search.

ABANDONED APPLICATIONS:

Under 12 AAC 02.910, an application is considered abandoned when 12 months have elapsed since correspondence was last received from or on behalf of the applicant. An abandoned application is denied without prejudice. At the time of abandonment, the Division will send notification to the last known address of the applicant, who has 30 days to submit a written request for a refund of biennial license and other fees paid. The application fee will not be refunded. If no request for refund is received within that timeframe, no refund will be issued and all fees will be forfeited.

PAYMENT OF CHILD SUPPORT AND STUDENT LOANS:

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, or if the Alaska Commission on Postsecondary Education has determined you are in loan default, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900, or the Postsecondary Education office at (907) 465-2962 in Juneau, or (800) 441-2962 to resolve payment issues.

BUSINESS LICENSES:

The status of a professional license will directly impact the status of an associated business license. Renewal applications for business licenses are mailed separately. For more information about business licenses, call (907) 465-2550 or online at: BusinessLicense.Alaska.gov

STATUTES AND REGULATIONS:

The complete set of statutes and regulations for this program are available by written request or online at the Division's website: ProfessionalLicense.Alaska.Gov

If you would like to receive notice of all proposed regulation changes for your program, please send a request in writing with your name, preferred contact method (mail or email), and the program you want to be updated on to:

REGULATIONS SPECIALIST
Email: RegulationsAndPublicComment@Alaska.Gov
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
P.O. Box 110806
Juneau, Alaska 99811-0806

12 AAC 28.015. Permit requirements for use of moderate sedation, or for use of minimal sedation for a patient younger than 13 years of age.

- (a) Unless exempt under 12 AAC 28.065, before administering moderate sedation to a patient, or minimal sedation to a patient younger than 13 years of age, a dentist licensed under AS 08.36 must have a moderate sedation permit issued by the board.
- (b) The requirement to obtain a permit to administer moderate or minimal sedation under this section does not apply to a dentist currently permitted under 12 AAC 28.010 to administer deep sedation and general anesthesia.
- (c) A dentist who holds a permit under this section may not administer or employ an agent or technique that has so narrow a margin for maintaining consciousness that the agent or technique is most likely to produce deep sedation or general anesthesia. These agents include ketamine, propofol, brexival, and sodium pentothal.
- (d) An applicant for an initial or renewed permit to administer moderate or minimal sedation under this section must
 - (1) submit a completed application on a form provided by the board;
 - (2) submit a dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with all applicable statutes and regulations;
 - (3) submit, on a form provided by the board, a dated and signed affidavit attesting that the dentist's facility meets the requirements of this chapter for the administration of moderate or minimal sedation under this section;
 - (4) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);
 - (5) provide proof of current certification in advanced resuscitative techniques with hands-on simulated airway and megacode training for healthcare providers, including basic electrocardiographic interpretation; qualifying certification for an applicant who seeks to treat patients 13 years of age and older includes the American Heart Association's Advanced Cardiac Life Support (ACLS) for Health Professionals; qualifying certification for an applicant who seeks to treat patients younger than 13 years of age includes Pediatric Advanced Life Support (PALS) for Health Professionals; an applicant who seeks to treat patients of any age must also be certified in both ACLS for Health Professionals and PALS for Health Professionals or must be certified in equivalent qualifying certifications under this paragraph, one for advanced cardiac life support for health professionals and one for pediatric advanced life support for health professionals; and
 - (6) submit the applicable fees specified in 12 AAC 02.190.
- (e) In addition to meeting the requirements of (d) and (g) of this section,
 - (1) an applicant for an initial permit to administer moderate sedation to a patient who is at least 13 years of age under this section must provide documentation that the applicant completed either
 - (A) training in moderate sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, as adopted by the American Dental Association (ADA) House of Delegates, October 2016, adopted by reference; the applicant must complete the training required under this subparagraph while enrolled in
 - (i) a dental program accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association; or
 - (ii) a post-doctoral university or teaching hospital program; or
 - (B) a board-approved continuing education course in sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, adopted by reference in (A) of this paragraph; the course must consist of a minimum of 60 hours of instruction plus administration of sedation for at least 20 individually managed patients per participant to establish competency and clinical experience in moderate sedation and management of a compromised airway; and
- (f) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate or minimal sedation only to patients who are younger than 13 years of age under this section must provide proof of administration of sedation for at least 20 individually managed patients younger than 13 years of age to establish competency and clinical experience in management of a compromised airway, and provide documentation that the applicant has completed
 - (1) a Commission on Dental Accreditation (CODA) accredited residency in pediatric dentistry; or
 - (2) at least 60 hours of continuing education coursework in pediatric moderate sedation approved by the board.
- (g) In addition to meeting the requirements of (d) and (e) of this section, or (f) of this section if administering moderate or minimal sedation to a patient who is younger than 13 years of age, an applicant for an initial permit to provide moderate sedation and minimal sedation under this section must provide documentation that
 - (1) within three years immediately before application, the applicant completed training or education as required in this section in moderate sedation;
 - (2) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed all continuing education that would have been required for a permit under this section;
 - (3) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed a comprehensive review course approved by the board in moderate sedation;
 - (4) if more than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant holds a permit for moderate sedation from another jurisdiction where the applicant is also licensed to practice dentistry and where the applicant completed at least 25 anesthesia cases at the moderate sedation level not earlier than the 24 months immediately preceding application; or
 - (5) demonstrates current competency to the satisfaction of the board that the applicant has skill in moderate sedation to safely deliver moderate sedation services to the public.

12 AAC 28.040. Informed written consent. Before administering deep sedation, general anesthesia, or moderate sedation, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall

- (1) discuss with the patient, or with the patient's parent, legal guardian, or caregiver if the patient is younger than 13 years of age, the nature and objectives of the sedation and anesthesia along with the risks, benefits, and alternatives;
- (2) obtain informed written consent of the patient or of the parent or legal guardian; and
- (3) maintain a copy of the informed written consent in the patient's permanent record.

12 AAC 28.050. Medical history.

- (a) Before administering deep sedation, general anesthesia, or moderate sedation to a patient, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall
 - (1) obtain and record the patient's medical history, including
 - (A) a description of all current treatments;
 - (B) all current medications and dosages;
 - (C) assessment of the patient's body mass index (BMI);
 - (D) impending operations;
 - (E) pregnancies; and
 - (F) other information that may be helpful to the person administering the sedation or anesthesia; and
 - (2) record the questions asked of and answers received from the patient, parent, legal guardian, or caregiver, signed by the patient, parent, legal guardian, or caregiver, as a permanent part of the patient's treatment record.
- (b) The dentist is not required to make a medical examination of the patient and draw medical diagnostic conclusions. If the dentist suspects a problem and calls in a physician for an examination, the dentist may rely upon the physician's conclusion and diagnosis.

12 AAC 28.060. Requirements for administering deep sedation, general anesthesia, moderate sedation, or minimal sedation for a patient younger than 13 years of age.

- (a) The document Guidelines for the Use of Sedation and General Anesthesia by Dentists, as adopted by the American Dental Association (ADA) House of Delegates, October 2016, is adopted by reference as the standards for administering deep sedation, general anesthesia, and moderate sedation to patients 13 years of age and older and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.
- (b) The document Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures, developed and endorsed by the American Academy of Pediatrics and the American Academy of Pediatric Dentistry, adopted in 2006 and reaffirmed in 2011, is adopted by reference as the standards for administering deep sedation, general anesthesia, moderate sedation, and minimal sedation to patients younger than 13 years of age and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.
- (c) When a patient younger than 13 years of age requires sedation or anesthesia, a sedating medication may not be prescribed for or administered to that patient before the patient arrives at the dentist's facility.
- (d) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years old is administered, the dentist
 - (1) shall record baseline vital signs before administration of a controlled substance and before discharge, unless the patient's behavior prevents this determination; in this paragraph "controlled substance" has the meaning given in AS 11.71.900;
 - (2) shall continually monitor a patient's heart rate, blood pressure, and respiration using electrocardiographic monitoring, pulse oximetry, a blood pressure monitoring device, and a respiration monitoring device;
 - (3) shall record sedation and anesthesia records in a timely manner; the records must include
 - (A) blood pressure;
 - (B) heart rate;
 - (C) respiration;
 - (D) blood oxygen saturation;
 - (E) drugs administered, including dosages, the time that drugs were administered, and the route of administration;
 - (F) the length of the procedure;
 - (G) the patient's temperature; if depolarizing medications or volatile anesthetics are administered, temperature must be monitored constantly; and
 - (H) any complications from anesthesia or sedation;
 - (4) shall stop the dental procedure if a patient enters a deeper level of sedation than the dentist is permitted to provide until the patient returns to, and is stable at, the intended level of sedation; while returning the patient to the intended level of sedation, the patient's pulse, respiration, blood pressure, and pulse oximetry must be monitored and recorded at least every five minutes;
 - (5) may not discharge a patient until the person who administered the sedation or anesthesia, or another practitioner qualified to administer the same level of sedation or anesthesia, determines that the patient's level of consciousness, oxygenation, ventilation, and circulation are satisfactory for discharge and vital signs have been taken and recorded;
 - (6) shall give postoperative instructions verbally and in writing; the written instructions must include a 24-hour emergency telephone number that directly calls the dental provider;
 - (7) shall discharge the patient to a responsible individual who has been instructed with regard to the patient's care; and
 - (8) shall make a discharge entry in the patient's record describing the patient's condition upon discharge and the responsible party to whom the patient was discharged.
- (e) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years of age is administered, the dentist's facility shall

- (1) have an operating table or chair that permits the patient to be positioned so the operating team can maintain the airway, quickly alter patient position in an emergency, and provide a firm platform for the administration of basic life support;
- (2) have a lighting system that is adequate to permit evaluation of the patient's skin and mucosal color, and a backup lighting system of sufficient intensity to permit conclusion of the operation when power fails;
- (3) have suction equipment capable of aspirating gastric contents from the mouth and pharyngeal cavities, and a backup suction device that does not depend on power supply from the facility;
- (4) have an oxygen delivery system with adequate full face masks and appropriate connectors that is capable of delivering high flow oxygen to the patient under positive pressure, and an adequate portable backup system;
- (5) have a recovery area that has available oxygen, adequate lighting, suction, and electrical outlets, though the recovery area can be the operating area;
- (6) have a defibrillator or automated external defibrillator (AED) available and in reach within 60 seconds from any area where anesthesia or sedation is administered;
- (7) have written basic emergency procedures established and maintain a staff of supervised personnel capable of handling procedures, complications, and emergency incidents; all personnel involved in patient care must hold a certification in healthcare professional cardiopulmonary resuscitation (CPR);
- (8) conduct a training exercise at least two times each calendar year and log each exercise; the log must be signed and dated and must include
 - (A) the names and positions of facility personnel or practitioners present;
 - (B) proof of current certification in cardiopulmonary resuscitation (CPR), advanced cardiac life support (ACLS), or pediatric advanced life support (PALS) for each person involved in patient care; and
 - (C) a completed checklist provided by the board, or an equivalent, to establish competency in handling procedures, complications, and emergency incidents;
- (9) maintain the following equipment and drugs in the facility and available for immediate use:
 - (A) oral and nasal airways of various sizes;
 - (B) a supra-glottic airway device;
 - (C) a blood pressure cuff of appropriate size and stethoscope, or equivalent monitoring devices;
 - (D) a pulse oximeter;
 - (E) a respiratory monitoring device;
 - (F) adequate equipment to establish an intravenous infusion, including hardware and fluids;
 - (G) a narcotic antagonist;
 - (H) a corticosteroid;
 - (I) a bronchodilator;
 - (J) an anticholinergic;
 - (K) an antiarrhythmic;
 - (L) an antihistamine;
 - (M) a coronary artery vasodilator;
 - (N) a benzodiazepine antagonist;
 - (O) sterile needles, syringes, tourniquets, and tape;
 - (P) epinephrine;
 - (Q) an antiemetic; and
 - (R) 50 percent dextrose or other anti-hypoglycemic; and
- (10) display a permit for moderate sedation, deep sedation, or general anesthesia and current dental license in a conspicuous place where the dentist practices.

12 AAC 28.062. Additional requirements for administering moderate sedation, or minimal sedation for a patient younger than 13 years of age.

In addition to meeting the requirements of 12 AAC 28.060, when moderate sedation is administered to a patient of any age, or minimal sedation is administered to a patient younger than 13 years of age,

- (1) the dentist's facility must have an operating area of size and design to permit access of emergency equipment and personnel and to permit effective emergency management;
- (2) the dentist shall use an end-tidal carbon dioxide monitor or a pre-cordial stethoscope to monitor respiration;
- (3) the treatment team shall consist of the treating dentist and a second person to assist, monitor, and observe the patient; both the treating dentist and the second person shall be in the operating area with the patient throughout the dental procedure; and
- (4) the dentist shall continually monitor the patient's heart rate, blood pressure, and respiration using electrocardiographic monitoring, pulse oximetry, a blood pressure monitoring device, and a respiration monitoring device, unless the patient's behavior prevents it and is documented in the patient record.

Please refer to the Statute and Regulation booklet on the Board's website for the full sedation requirements.

Updated Professional Fitness Questions

1. **Have you ever practiced dentistry illegally?**
2. **Have you ever had a professional license denied, revoked, suspended or otherwise restricted, conditioned, or limited?**
3. **Have you ever surrendered a professional license, been fined, placed on probation, reprimanded, disciplined, or entered into a settlement with a licensing authority in connection with a professional license you have held? in any jurisdiction including Alaska and including that of any military authorities?**
4. **Is any such action against a professional license you hold pending?**
5. **Have you been convicted of a crime or are you currently charged with committing a crime? For purposes of this question "crime" includes a misdemeanor, felony, or a military offense, including but not limited to, driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license. "Convicted" includes having been found guilty by verdict of a judge or jury, having entered a plea of guilty, nolo contendere or no contest, or having been given probation, a suspended imposition of sentence or a fine.**
Have you been convicted of or are currently charged with committing a misdemeanor, felony or military offense?
6. **Have you ever been the subject of a report from the National Practitioner Data Bank or the American Association of Dental Boards Clearinghouse for Board Actions that relates to criminal or fraudulent activity or dental malpractice?**
7. **Are you the subject of a decision based upon a complaint, investigation, review procedure, or other disciplinary proceeding within the five years immediately preceding this application?**
8. **Are you the subject of an unresolved complaint, investigation, review procedure or other disciplinary proceeding? undertaken by a state, territorial, local, or federal dental licensing jurisdiction or a dental society?**
9. **Are you the subject of an unresolved decision or a decision based upon a complaint, investigation, review procedure, or other disciplinary proceeding, undertaken by a state, territorial, local or federal dental licensing jurisdiction, dental society, or law enforcement agency that relates to criminal or fraudulent activity, dental malpractice, or negligent dental care and that reflects on your ability or competence to practice dentistry or on the safety or well-being of patients?**
10. **Within the five years immediately preceding the date of application for licensure have you experienced or been treated for bipolar disorder, schizophrenia, depression (except for situational or reactive depression) psychotic disorder or other mental or physical condition or disability?**
11. **Within the past five years have you been or are you addicted to, excessively used, or misused alcohol, narcotics, barbiturates, or habit-forming drugs?**

- 1. Are you a graduate of a dental school approved by the Alaska Board of Dental Examiners?**
- 2. Have you ever had a professional license denied by this or another licensing jurisdiction?**
- 3. Have you had your license to practice dentistry revoked, suspended or voluntarily surrendered in this or any other state or licensing jurisdiction?**
- 4. Are you the subject of an adverse decision against you or your license based on a complaint, investigation, review procedure, or other disciplinary proceeding within five years immediately preceding this application?**
- 5. Are you the subject of an unresolved complaint, investigation, review procedure, or other disciplinary proceeding?**
- 6. Are you the subject of an adverse report from the National Practitioner Data Bank?**
- 7. Are you the subject of an adverse report from the American Association of Dental Boards Clearing House for Board Actions?**
- 8. Are you or have you ever been addicted to or misused alcohol, narcotics, barbiturates, marijuana, or any other habit forming drug?**
- 9. Have you been diagnosed and/or treated with for bipolar disorder, schizophrenia, depression, psychotic disorder or other mental or physical condition or disability?**

PDMP Penalty Matrix & Dental Penalty Matrix

Radiologic Equipment Inspections

PDMP Report/Compliance

Break



Review / Compare Dental Exams

From: [Ellis Hall](#)
To: [Wiard, Tracy L \(CED\)](#)
Cc: [Alexander Vandiver](#); [Stuart Blumenthal](#); [Stephanie Beeler](#)
Subject: FW: From ALASKA
Date: Wednesday, November 27, 2019 4:04:44 AM

Tracy Wiard,

Per your request, let me provide the following information about the CTP (Comprehensive Treatment Planning) portion of our DSE OSCE computer examination.

The CTP section includes questions on treatment planning in all of the following areas:

Oral Medicine
Endodontics
Orthodontics
Restorative Dentistry
Oral Surgery
Pediatric Dentistry
Prosthodontics
Periodontics
Implantology
Medical Considerations in Treatment Planning
Systemic Diseases/Medical Emergencies/Special Care

Our most recent version of the DSE OSCE includes, in the CTP section, a number of updated/alternative item types including constructive response questions.

In addition this new version includes questions specifically relevant to the treatment of underserved patient populations.

If you have any further questions, please feel free to contact me.

Ellis H. Hall, DDS
CDCA Director of Examinations

From: Wiard, Tracy L (CED) <tracy.wiard@alaska.gov>
Sent: Monday, November 25, 2019 3:48 PM
To: Stephanie Beeler <sbeeler@cdcaexams.org>
Cc: Carrillo, Christianne D (CED) <christianne.carrillo@alaska.gov>; Bonnell, Joseph K (CED) <joseph.bonnell@alaska.gov>
Subject: RE: CDCA AIT Announcement (with corrected graphic)

Good Afternoon,

The State of Alaska Board of Dental Examiners has a board meeting coming up on 12.06.19. They were wanting to know what the new CTP portion of the exam will be

covering an what components are tested. They were hoping for a detailed breakdown of the exam contents so they can compare and make sure the requirements of the exam meet the regulations. Thank you,

Tracy Wiard

State of Alaska Division of Professional Licensing
Board of Certified Real Estate Appraisers
Guardians and Conservators
Pawnbrokers
PO BOX 110806
Juneau, AK 99801

(907) 465-2542 Phone

(907) 465-2974 Fax

Any guidance provided by this electronic communication is not a binding legal opinion, ruling, or interpretation that may be relied upon, but merely guidance concerning existing statutes and regulations. There may be other unique or undisclosed facts, circumstances, and information that may have changed any guidance provided in this communication.

CONFIDENTIALITY NOTICE: This communication is intended for the sole use of the individual or entity to whom it is addressed to and is covered by the Electronic Communications Privacy Act (18 USC § 2510-2521), and may contain Confidential Official Use Only Information that may be exempt from public release under the Freedom of Information Act (5 USC § 552). If you are not the intended recipient, you are prohibited from disseminating, distributing or copying any information contained in this communication.

The State of Alaska cannot guarantee the security of e-mails sent to or from a state employee outside the state e-mail system. If you are not the intended recipient or receive this communication in error, please notify the sender by reply e-mail and delete the original message and all copies from your computer.

From: Stephanie Beeler [<mailto:sbeeler@cdcaexams.org>]
Sent: Wednesday, October 16, 2019 8:38 AM
To: Stephanie Beeler <sbeeler@cdcaexams.org>
Subject: RE: CDCA AIT Announcement (with corrected graphic)

<image001.jpg>

Special Announcement
October 16, 2019
(Corrects graphics in release dated 10/15/19)

CDCA Advances Technology in Dental OSCE

Testing

The Commission on Dental Competency Assessments (CDCA) is introducing high-fidelity item types to the ADEX Dental Skills Examination (DSE) OSCE. The purpose of introducing these new kinds of questions to further enhance the measurement of diagnosis, treatment planning, and other dental knowledge, clinical judgment, skills of licensure candidates. The CDCA anticipates psychometrically validated AITs will appear beside previously evaluated examination questions beginning in early 2020.

The CDCA's DSE OSCE is the first and continuously maintained, independent, third-party OSCE in dentistry, first computerized from its paper form in 2001. An OSCE is an Objective Structured Clinical Examination, the DSE OSCE is the didactic computerized portion of the five-element American Board of Dental Examiners (ADEX) dental licensure examination. Pilot questions have been a part of *every* examination given and are integral to the test development process. A thorough evaluation of piloted items leads to valid, reliable and fair examinations for all candidates.

Items in the ADEX DSE OSCE will now include multiple-choice (single response); multiple choice (multiple response), extended match, drop down, fill in the blank, hot spot and drag and drop questions. CDCA subject matter experts and psychometricians have evaluated AITs, and believe with their inclusion, components of the ADEX blueprint will be presented in a context that adds increased fidelity with respect to the live practice of dentistry. The ADEX Dental Hygiene CSCE examination will undergo similar development. AITs facilitate a more thorough evaluation of a licensure candidate's knowledge, through a demonstration of cognitive reasoning and applied judgments to case scenarios, rather than just identification of a correct choice. They offer the ability to require multiple answers to complex questions and assign scaled points and penalties for less than ideal, but not incorrect,

responses.

Founded in 1969, and formerly known as the North East Regional Board of Dental Examiners, the CDCA is committed to serving boards of dentistry by designing and administering assessments that are based on sound principles of testing and measurement. A founding principle, the CDCA remains committed to a national uniform examination process dedicated to the protection of the public.

For more information about AITs, to see examples, and to learn about how the CDCA is working to incorporate them, [click here](#). Questions concerning the utilization of this technology

<image005.jpg>

can be addressed to Stephanie Beeler, Multimedia and Communications

Specialist at sbeeler@cdcaexams.org.

Diagram of ADEX Dental Licensure components. Full-size rendering

attached for your use,

unmodified.

<image004.png>

Board Business



THE STATE
of **ALASKA**
GOVERNOR MICHAEL J. DUNLEAVY

Department of Commerce, Community,
and Economic Development

BOARD OF DENTAL EXAMINERS

P.O. Box 110806
Juneau, AK 99811-0806
Main: 907.465.2542
Toll free fax: 907.465.2974

October 4, 2019

David Albertson, DDS
President, Alaska Dental Society
1407 W. 31st Ave #304
Anchorage, Alaska 99503

Dear Dr. Albertson,

The Alaska Board of Dental Examiners supports reinstating a dental specialty license into dentistry statute AS 08.36 of the Alaska State Practice Act.

The Board feels having a specialty license issued to properly qualified dental specialists would help restrict advertising as a dental specialist to only those dentists who have completed the required training. The Board believes it is an important step to help eliminate current and future instances of false or misleading advertising by non-specialist dentists. Such advertising tends to confuse the public as they search for help with their dental needs.

Any assistance the Alaska Dental Society can provide with this endeavor would be welcomed.

Thank you For Your Consideration,

A handwritten signature in black ink, appearing to read "David Nielson".

David Nielson, DDS
President, Alaska State Board of Dental Examiners

STATE OF ALASKA 2020

State Holidays

Date	Holiday
01/01	New Year's Day
01/20	MLK Jr.'s Birthday
02/17	Presidents' Day
03/30	Seward's Day
05/25	Memorial Day
07/04	Independence Day (observed 7/3)
09/07	Labor Day
10/18	Alaska Day (observed 10/19)
11/11	Veterans' Day
11/26	Thanksgiving Day
12/25	Christmas Day

Biweekly employees please refer to appropriate collective bargaining unit agreement for more information regarding holidays.

 Holiday



State calendar maintained by the
Division of Finance,
Department of Administration
<http://doa.alaska.gov/calendars.html>
Revised 10/31/2019

HOLIDAY CALENDAR

JANUARY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY

S	M	T	W	T	F	S
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2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

MARCH

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

APRIL

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

JUNE

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

JULY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

AUGUST

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

OCTOBER

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

NOVEMBER

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

DECEMBER

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

New Business

Adjourn