



STATE OF WISCONSIN
Department of Safety and Professional Services
1400 E Washington Ave.
Madison WI 53703

Mail to:
PO Box 8935
Madison WI 53708-8935

Email: dsps@wisconsin.gov
Web: <http://dsps.wi.gov>
Phone: 608-266-2112

Governor Scott Walker Secretary Dave Ross

DENTISTRY EXAMINING BOARD
Room 121A, 1400 E. Washington Avenue, Madison
Contact: Angela Hellenbrand (608) 266-2112
July 10, 2013

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions of the Board.

AGENDA

8:30 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

A. Pledge of Allegiance

B. Recognition of Board Members

C. Welcome New Board Members

D. Adoption of Agenda (1-4)

E. Approval of Minutes – May 1, 2013 (5-8)

F. Administrative Updates

- 1) Staff Updates
- 2) New Board Member(s) **(9-10)**
- 3) Nomination and Election of Vice Chair **(11-12)**
- 4) Wisconsin Open Meetings Law **(13-16)**
- 5) DSPP Public Board Agenda Request Form **(17-20)**

G. DLSC Matters

- 1) Dental Inspection Checklist **(21-26)**

H. Credentialing Matters

- 1) Discussion of Exam and Endorsement Application Processing Procedures **(27-28)**
- 2) Discussion and Review of Foreign Trained Dentists Licensure Pathways **(29-30)**

I. Education and Examination Matters

- 1) Hygiene Examination Review Committee Report – Cathy Martin **(31-32)**
- 2) Report of NERB Steering Committee Meeting **(33-34)**
- 3) Board Discussion of Examination Failures and Retakes

J. Legislative/Administrative Rule Matters

- 1) DE 2.03(7) Display of License – Board Discussion **(35-36)**
- 2) DE 9 Lab Work Authorization Rule Draft – Board Discussion and Consideration **(37-42)**
- 3) DE 11 Sedation Permits - Discussion and Consideration of Public Hearing Draft **(43-48)**
- 4) DE 12 Training Verification Forms Scope Statement – Review and Consideration of Approval **(49-50)**
- 5) Records Retention and Destruction – Board Discussion and Consideration **(51-52)**

K. Practice Matters

L. Informational Items

M. Items Added After Preparation of Agenda

- 1) Introductions, Announcements and Recognition
- 2) Presentations of Petition(s) for Summary Suspension
- 3) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
- 4) Presentation of Final Decisions
- 5) Disciplinary Matters
- 6) Administrative Matters
- 7) Education and Examination Matters
- 8) Credentialing Matters
- 9) Class 1 Hearing(s)
- 10) Practice Matters
- 11) Legislative/Administrative Rule Matters
- 12) Liaison Report(s)
- 13) Informational Item(s)
- 14) Speaking Engagement(s), Travel, or Public Relation Request(s)

N. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.; consider closing disciplinary investigation with administrative warning (s. 19.85(1)(b), Stats. and 440.205, Stats., to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.; and, to confer with legal counsel (s. 19.85(1)(g), Stats.)

O. Presentation and Deliberation on Proposed Stipulations, Final Decisions and Orders by the Division of Legal Services and Compliance (DLSC)

- 1) Daniel A. Humiston, DDS – 11 DEN 105 and 12 DEN 058 **(53-62)**
 - o Case Advisor – Lyndsay Knoell
- 2) Timothy M. Fischer, DDS – 12 DEN 016 **(63-70)**
 - o Case Advisor – Mark Braden

P. Credentialing Matters – Application Review(s)

- 1) K.A.W. – Dental Hygiene Application by Re-Registration **(71-94)**
- 2) K.N.C. – Dental Hygiene Application by Examination **(95-112)**
- 3) J.L. ., DMD – Dentistry Application by Endorsement and Consideration of State Board Examination **(113-222)**

Q. Monitoring (223-228

- 1) **APPEARANCE 11:30 A.M.** – Gretchen Evenson, DDS – Request for Full Licensure **(229-250)**
- 2) **APPEARANCE 11:45 A.M.** – Edward McGrath, DDS – Request for Termination of Suspension and Reinstatement of License **(251-268)**
- 3) **APPEARANCE 12:00 P.M.** – Blair Moldenhauer, DMD – Request for Reinstatement of Stay of Suspension **(269-304)**
- 4) Christopher Kania, DDS – Request for Reduction in Frequency of Drug and Alcohol Screens **(305-320)**

R. DLSC Matters

- 1) Case Status Report
- 2) Case Closing(s)

S. Deliberation of Items Received After Printing of the Agenda

- 1) Disciplinary Matters
- 2) Education and Examination Matters
- 3) Credentialing Matters
- 4) Class 1 Hearings
- 5) Monitoring Matters
- 6) Professional Assistance Procedure (PAP) Matters
- 7) Petition(s) for Summary Suspensions
- 8) Petition(s) for Extension of Time
- 9) Proposed Stipulations, Final Decisions and Orders
- 10) Administrative Warnings
- 11) Proposed Decisions
- 12) Matters Relating to Costs
- 13) Motions
- 14) Petitions for Rehearing
- 15) Case Closings
- 16) Appearances from Requests Received or Renewed

T. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

U. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

ADJOURNMENT

Page intentionally left blank

**DENTISTRY EXAMINING BOARD
MINUTES
MAY 1, 2013**

PRESENT: Debra Beres, RDH; Mark Braden, DDS; Eileen Donohoo, RDH; John Grignon, DDS; Adriana Jaramillo, DDS (arrived at 8:37); Lyndsay Knoell, DDS; Sandra Linhart, RDH; Kirk Ritchie, DDS; Beth Welter, DDS

STAFF: Angela Hellenbrand, Executive Director; Karen Rude-Evans, Bureau Assistant

CALL TO ORDER

Lyndsay Knoell, Chair, called the meeting to order at 8:30 a.m. A quorum of eight (8) members was confirmed.

ADOPTION OF AGENDA

Amendments:

- Item 1 (closed) – Application Review – insert additional information after page 60
- Item 2 (closed) – Appearance – Maggy McGarry, Division of Professional Credential Processing – Review of Petition for Acceptance of Florida State Dental Exam – J. ., DMD
- Item S3 (closed) – Appearance – Chad Koplien, DLSC Division Administrator – Discussion Regarding Open Compliance Matter
- Case Status Report – insert at the end of the agenda in closed session
- Updated Board Roster – for Board information only

MOTION: Lyndsay Knoell moved, seconded by John Grignon, to adopt the agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES OF MARCH 6, 2013

Corrections:

- On page 1, under PRESENT, for William Anderson, change “excused” to “resigned”.

MOTION: Eileen Donohoo moved, seconded by John Grignon, to approve the minutes of March 6, 2013 as corrected. Motion carried unanimously.

LEGISLATIVE/ADMINISTRATIVE RULE MATTERS

Scope Statement to Amend DE 9 Relating to Lab Work Authorizations

MOTION: Lyndsay Knoell moved, seconded by Mark Braden, to forward the scope statement to the Governor's Office for review. Motion carried unanimously.

MOTION: Eileen Donohoo moved, seconded by Beth Welter, to authorize the Chair to approve the scope statement after publication for implementation. Motion carried unanimously.

Discussion Regarding Possible Record Retention Guidelines

MOTION: Eileen Donohoo moved, seconded by John Grignon, to authorize DSPS staff to draft a scope statement regarding record retention and to bring the draft to the next Board meeting. Motion carried unanimously.

MOTION: Lyndsay Knoell moved, seconded by Eileen Donohoo, to authorize Mark Braden to review and approve the scope statement for submittal to the Governor and for publication. After publication, approve the scope statement for implementation. Motion carried unanimously.

CLOSED SESSION

Lyndsay Knoell, Chair, read to motion to convene to closed session.

MOTION: Lyndsay Knoell moved, seconded by Eileen Donohoo, to convene to Closed Session to deliberate on cases following hearing (Wis. Stat. § 19.85(1) (a)), to consider licensure or discipline (Wis. Stat. § 19.85(1) (b)), to consider individual histories or disciplinary data (Wis. Stat. § 19.85(1) (f)), and to confer with legal counsel (Wis. Stat. § 19.85(1) (g)). Roll call vote: Debra Beres-yes; Mark Braden-yes; Eileen Donohoo-yes; John Grignon-yes; Adriana Jaramillo-yes; Lyndsay Knoell-yes; Sandra Linhart-yes; Kirk Ritchie-yes; Beth Welter-yes. Motion carried unanimously.

Open Session recessed at 9:41 a.m.

RECONVENE TO OPEN SESSION

MOTION: Lyndsay Knoell moved, seconded by John Grignon, to reconvene into open session. Motion carried unanimously.

The Board reconvened into open session at 11:33 a.m.

REAFFIRM ALL MOTIONS MADE IN CLOSED SESSION

MOTION: Lyndsay Knoell moved, seconded by John Grignon, to reaffirm all motions made in closed session. Motion carried unanimously.

PROPOSED STIPULATION(S), FINAL DECISION(S) AND ORDER(S)

MOTION: Eileen Donohoo moved, seconded by John Grignon, to adopt the Proposed Stipulation, Final Decision and Order in the disciplinary proceedings against **Daniel E. Binzak, DDS (10 DEN 008 and 11 DEN 066)**. Motion carried unanimously.

MOTION: Eileen Donohoo moved, seconded by John Grignon, to adopt the Proposed Stipulation, Final Decision and Order in the disciplinary proceedings against **Robert S. Bates DDS (11 DEN 106)**. Motion carried unanimously.

PROPOSED ADMINISTRATIVE WARNING

MOTION: Eileen Donohoo moved, seconded by Adriana Jaramillo, to issue the Administrative warning in case **12 DEN 100**. Motion carried unanimously.

APPLICATION REVIEW(S)

MOTION: Adriana Jaramillo moved, seconded by Lyndsay Knoell, to deny the request from **K.K.W.** to retake the CRDTS hygiene examination pursuant to DE 2.09 for reasons outlined in the application file. Motion carried unanimously.

MOTION: Lyndsay Knoell moved, seconded by John Grignon, to appoint Deb Beres and Eileen Donohoo to work with Department staff to evaluate the matter and make a recommendation to the Board on examination equivalency regarding the application of **J.Z., DMD**. Motion carried unanimously.

MONITORING

MOTION: Adriana Jaramillo moved, seconded by John Grignon, to approve the request for full licensure from **Dennis R. Anderson, DDS**. Motion carried unanimously.

ADJOURNMENT

MOTION: Lyndsay Knoell moved, seconded by Mark Braden, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 1:43 p.m.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 18 June 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 Jul 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Matters -New Board Members	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Wendy Pietz, DDS, SC			
11) Authorization			
Signature of person making this request			Date
Supervisor (if required)			Date
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)			Date
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Page intentionally left blank

Page intentionally left blank

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 27 June 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Matters -WI Open Meetings Law	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Excerpt taken from "Wisconsin Open Meetings Law" A Compliance Guide, August 2010 -Department of Justice, Attorney General J.B. Van Hollen http://www.doj.state.wi.us/sites/default/files/dls/open-meetings-law-compliance-guide-2010.pdf			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

The presence of the governmental body's legal counsel is not, in itself, sufficient reason to authorize closure under this exemption. The exemption applies only if the legal counsel is rendering advice on strategy to adopt for litigation in which the governmental body is or is likely to become involved.

There is no clear-cut standard for determining whether a governmental body is "likely" to become involved in litigation. Members of a governmental body should rely on the body's legal counsel for advice on whether litigation is sufficiently "likely" to authorize a closed session under Wis. Stat. § 19.85(1)(g).

6. Remaining exemptions.

The remaining exemptions in Wis. Stat. § 19.85(1) authorize closure for:

1. Considering applications for probation or parole, or considering strategy for crime detection or prevention. Wis. Stat. § 19.85(1)(d).
2. Specified deliberations by the state council on unemployment insurance and the state council on worker's compensation. Wis. Stat. § 19.85(1)(ee) and (eg).
3. Specified deliberations involving the location of a burial site. Wis. Stat. § 19.85(1)(em).
4. Consideration of requests for confidential written advice from an ethics board. Wis. Stat. § 19.85(1)(h).
5. Considering specified matters related to a business ceasing its operations or laying off employees. Wis. Stat. § 19.85(1)(i).
6. Considering specified financial information relating to the support of a nonprofit corporation operating an ice rink owned by the state. Wis. Stat. § 19.85(1)(j).⁵

D. Who May Attend A Closed Session.

A frequently asked question concerns who may attend the closed session meetings of a governmental body. In general, the open meetings law gives wide discretion to a governmental body to admit into a closed session anyone whose presence the body determines is necessary for the consideration of the matter that is the subject of the meeting. *Schuh Correspondence*, December 15, 1988. If the governmental body is a subunit of a parent body, the subunit must allow members of the parent body to attend its open session and closed session meetings, unless the rules of the parent body or subunit provide otherwise. Wis. Stat. § 19.89. Where enough non-members of a subunit attend the subunit's meetings that a quorum of the parent body is present, a meeting of the parent body occurs, and the notice requirements of Wis. Stat. § 19.84 apply. *Badke*, 173 Wis. 2d at 579.

E. Voting In An Authorized Closed Session.

The Wisconsin Supreme Court has held that Wis. Stat. § 14.90 (1959), a predecessor to the current open meetings law, authorized a governmental body to vote in closed session on matters that were the legitimate subject of deliberation in closed session. *Cities S. O. Co.*, 21 Wis. 2d at 538. The Court reasoned that "voting is an integral part of deliberating and merely formalizes the result reached in the deliberating process." *Id.* at 539.

In *Schaeve*, 125 Wis. 2d at 53, the Court of Appeals commented on the propriety of voting in closed session under the current open meetings law. The Court indicated that a governmental body must vote in open

⁵For more detailed information on these exemptions, consult the text of Wis. Stat. § 19.85(1), which appears in Appendix A.

session unless an exemption in Wis. Stat. § 19.85(1) expressly authorizes voting in closed session. *Id.* The Court's statement was not essential to its holding and it is unclear whether the Supreme Court would adopt a similar interpretation of the current open meetings law.

Given this uncertainty, the Attorney General advises that a governmental body vote in open session, unless the vote is clearly an integral part of deliberations authorized to be conducted in closed session under Wis. Stat. § 19.85(1). Stated another way, a governmental body should vote in open session, unless doing so would compromise the need for the closed session. *Accord, Epping*, 218 Wis. 2d at 524 n.4 (even if deliberations were conducted in an unlawful closed session, a subsequent vote taken in open session could not be voided).

None of the exemptions in Wis. Stat. § 19.85(1) authorize a governmental body to consider in closed session the ratification or final approval of a collective bargaining agreement negotiated by or for the body. Wis. Stat. § 19.85(3); 81 Op. Att'y Gen. 139.

F. Reconvening In Open Session.

A governmental body may not commence a meeting, convene in closed session, and subsequently reconvene in open session within twelve hours after completion of a closed session, unless public notice of the subsequent open session is given "at the same time and in the same manner" as the public notice of the prior open session. Wis. Stat. § 19.85(2). The notice need not specify the time the governmental body expects to reconvene in open session if the body plans to reconvene immediately following the closed session. If the notice does specify the time, the body must wait until that time to reconvene in open session. When a governmental body reconvenes in open session following a closed session, the presiding officer has a duty to open the door of the meeting room and inform any members of the public present that the session is open. Claybaugh Correspondence, February 16, 2006.

V. WHO ENFORCES THE OPEN MEETINGS LAW AND WHAT ARE ITS PENALTIES?

A. Enforcement.

Both the Attorney General and the district attorneys have authority to enforce the open meetings law. Wis. Stat. § 19.97(1). In most cases, enforcement at the local level has the greatest chance of success due to the need for intensive factual investigation, the district attorneys' familiarity with the local rules of procedure, and the need to assemble witnesses and material evidence. 65 Op. Att'y Gen. Preface, ii. Under certain circumstances, the Attorney General may elect to prosecute complaints involving a matter of statewide concern.

A district attorney has authority to enforce the open meetings law only after an individual files a verified open meetings law complaint with the district attorney. *See* Wis. Stat. § 19.97(1). Actions to enforce the open meetings law need not be preceded by a notice of claim. *State ex rel. Auchinleck v. Town of LaGrange*, 200 Wis. 2d 585, 594-97, 547 N.W.2d 587 (1996). The verified complaint must be signed by the individual and notarized and should include available information that will be helpful to investigators, such as: identifying the governmental body and any members thereof alleged to have violated the law; describing the factual circumstances of the alleged violations; identifying witnesses with relevant evidence; and identifying any relevant documentary evidence.⁶ The district attorney has broad discretion to determine whether a verified complaint should be prosecuted. *State v. Karpinski*, 92 Wis. 2d 599, 607, 285 N.W.2d 729 (1979). An enforcement action brought by a district attorney or by the Attorney General must be commenced within 6 years after the cause of action accrues or be barred. *See* Wis. Stat. § 893.93(1)(a).

⁶A model complaint appears in Appendix B.

Page intentionally left blank

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 26 June 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Matters -DSPS Public Board Agenda Item	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: New feature on the DSPS website under "Boards & Council" for public to request a topic go before the Board.			
11) Authorization			
Signature of person making this request			Date
Supervisor (if required)			Date
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)			Date
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Boards and Councils | Licenses/Permits/Registrations | Online Services | Plan Review | Complaints &

DSPS PUBLIC BOARD AGENDA ITEM

Please use this form to submit an item for consideration at a board or council meeting. Please visit our [Board and Council Listing](#) professions regulated by each board. You may be asked to appear at the meeting to present and explain your request. Before su consult your [Profession Specific Codebook](#) which will contain the answer to most questions. Please note, neither the Department the following issues: potential or ongoing litigation, billing, business advice, employer / employee disputes, legal opinions, and qu judgment or discretion.

FILL OUT THIS FORM

* Board:

* First Name:

* Last Name:

Association/Organization:

* Address Line 1:

Address Line 2:

* City:

* State:

* Zip:

Phone Number:

* Email:

* Subject:

* Message:

File attachments:

Select



Type the code from the image

Phone:

(608) 266-2112
(877) 617-1565

Post Office Mailing Address:

State of Wisconsin
Department of Safety and Professional Services
PO Box 8935
Madison, WI 53708-8935

Street Address:

Department of Safety and Professional Services
1400 East Washington Avenue, Room 112
Madison, WI 53703

Email:

web@dsp.s.state.wi.us

Page intentionally left blank

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 9 May 13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? DSPS Dental Inspection Form	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: n/a	
10) Describe the issue and action that should be addressed: The DEB requested a copy of the DSPS Dental Inspection Form during the May Meeting to be placed on the agenda for the July meeting.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

**SUGGESTED INVESTIGATIVE INSPECTION OUTLINE
DENTISTRY EXAMINING BOARD**

DATE _____ CASE _____

PERSON(S) INTERVIEWED _____

OFFICE NAME/ADDRESS _____

Note: This is intended as an investigative tool ONLY. It is not intended to be a complete or exhaustive list, nor is it intended to be an instructional tool for dental practitioners.

A. GENERAL INFORMATION:

(DIAGRAM the clinic on reverse as needed)

ASK:

1. How many dentists practice in the clinic?
2. How many hygienists?
3. What type of practice is it? (e.g., orthodontist, general dentistry, prosthodontics, etc.)
4. How many operatories does the clinic have?
5. How many are used on a daily basis?
6. How many patients are seen by the dentist/s each day?
7. How many patients are seen by the hygienist/s? each day
8. Does the clinic employ dental assistants? YES NO
 8a. If yes, how many?
9. What tasks do the dental assistants perform?
10. Is there a separate employee break area? YES NO
11. Is there an eye wash station within the clinic? YES NO
 11a. If yes, DESCRIBE the location (include the distance from operatories):

B. PATIENT MEDICAL INFORMATION:

OBTAIN a copy of the medical history form used by the clinic.

ASK:

1. Who completes the form?
2. Where is the completed form kept?
3. Who has access to the information contained on the form?
4. How, when and by whom is the information updated?

C. ANESTHESIA:

If nitrous oxide is used by the clinic, ASK:

1. Who administers the nitrous oxide?
2. Who performs routine maintenance on the equipment?
 2a. When?
3. Where is the scavenged nitrous oxide vented?
4. How is the employees' exposure to nitrous oxide monitored?
5. What type(s) of local anesthetic is used?
 5a. OBSERVE a carpule of each type, record product name and expiration date.

D. X-RAY EQUIPMENT:

If any type of x-ray is taken, ASK:

1. How is the lead apron decontaminated?
 1a. When/how often?
 1b. By whom?
2. Does the x-ray ON switch have a barrier to prevent contamination?
 2a. If NO, how is the switch decontaminated or how is contamination prevented?
3. Are lead-lined boxes used to store x-ray film at any location or station in the office?

E. LABORATORY:

If the clinic has a lab in which study models are prepared, ASK:

1. How is the laboratory cleaned?
 - 1a. When?
 - 1b. By whom?
2. Are impressions disinfected?
 - 2a. How?
 - 2b. When?
3. Are impressions sent to a commercial lab for pouring?
 - 3a. How are impressions packaged and labeled for transport?

OBSERVE the lab.

3. Is there plaster dust or debris on the floor?
4. Is there a plastic safety cover over the polisher and grinder wheels?
5. If the lab appears unclean, DESCRIBE the discrepancies.

F. HANDWASHING:

1. OBSERVE and note anything out of the ordinary, such as soap containers that appear unused, or containers that have clearly been refilled with something other than what is identified on the label. NOTE if bar soap is used anywhere.
2. Where are the handwashing stations? (Are they near or in each operatory?)
3. What are the types of controls for the faucets at the stations (hand, foot, other)?
4. What is the material provided for drying hands?
5. ASK the practitioner to describe their daily handwashing routine.
6. If possible, OBSERVE and DESCRIBE the handwashing done between patients.

G. SHARPS:

OBSERVE the following:

1. Are sharps containers located within each operatory?
 - 1a. If YES, are they placed out of the reach of children?
 - 1b. If YES, are they easily accessible?
 - 1c. If NO, where are the sharps containers located?
 - 1d. If the clinic has NO sharps containers, ASK the practitioner to explain why.
 - 1e. If the practitioner says they use sharps in their practice but don't have sharps containers ASK how they dispose of the sharps.
2. How are the sharps containers labeled?
3. Are the safety mechanisms on the sharps containers intact?
4. ASK how the sharps containers are disposed of when filled?
5. ASK if the clinic or the respondent practices needle recapping. If YES, have them describe and NOTE the method they use to recap the needle.

H. BIOHAZARDOUS WASTE:

1. OBSERVE AND NOTE any blood tainted or soaked items visible in the dental clinic.

ASK:

2. What items does the clinic consider biohazardous waste? (Examples of typical biohazardous waste are cotton rolls, gauze pads, etc.)
3. How is the disposal of biohazardous waste handled?
4. What is done with extracted teeth?
 - 9a. If returned to the patient, how are they prepared before being returned?
 - 9b. If discarded, how are they discarded?

OBSERVE:

5. How are the containers that contain biohazardous waste labeled?

I. INSTRUMENT STERILIZATION:

ASK:

1. What steps are taken to process instruments used for treating a patient after the patient leaves the operatory?
2. Are any contaminated instruments hand scrubbed? If YES, LIST.
3. Is an ultrasonic used on the instruments?
4. IF YES, for what purpose is the ultrasonic used? (eg., sanitizing, removing debris, disinfecting)

If YES, OBSERVE:

5. What is the make and model of the unit?
6. Is the unit covered?

If YES, ASK:

7. Is the unit tested for effectiveness?
 - 7a. How?
 - 7b? When/how frequently?
 - 7c. By whom?
8. What solution is used in the ultrasonic?
 - 8a. How often is the solution changed?
 - 8b. By whom?
 - 8c. How does the clinic keep record of when the solution needs changing?
9. How long are instruments kept in the solution?

OBSERVE a bottle of the solution.

10. RECORD the name brand, the active ingredient, and the expiration date.
11. NOTE if instruments are not completely submerged or if the solution appears dirty.
12. ASK for a demonstration of the ultrasonic in use. NOTE if the instruments are submerged, if the unit is covered, and the length of time the machine is set to run.

13. Is 'cold sterilization' or high-level disinfection used on any instrument(s) or item(s)? If YES, LIST.

If YES, ASK:

14. What type of solution is used?
15. How often is the solution changed?
 - 12a. By whom?
16. How does the clinic keep record of when the solution needs changing?
17. For what purpose is 'cold sterilization' used? (eg., sanitizing, removing debris, disinfection)
18. How long are instruments kept in the solution?

OBSERVE:

19. RECORD the brand, the active ingredient(s) and the expiration date of the solution.
20. Are the 'cold sterilization' container(s) covered?
21. NOTE if instruments are not completely submerged or if the solution appears dirty.
22. Is an autoclave or Chemclave used on any instrument(s) or item(s)?

If YES, obtain the following information:

23. OBSERVE the make and model of the autoclave/Chemclave. RECORD the condition of the unit and its contents.
24. ASK if the autoclave/Chemclave is tested for effectiveness.
 - 24a. If YES, how is it tested?
 - 24b. How often?
 - 24c. By whom?
25. For what purpose is the autoclave/Chemclave used? (sanitizing, removing debris, disinfection)
26. How long are instruments autoclaved/Chemclaved?
27. Are instruments bagged before being placed in the autoclave/Chemclave?
 - 25a. Are the bags dated?
 - 25b. Do the bags show evidence of having been autoclaved/Chemclaved?
28. How are the instruments stored after being removed from the autoclave/chemclave?

If a Chemclave is used, ASK:

- 29. What type of solution is used?
 - 27a. How often is the solution changed?
 - 27b. By whom?
 - 27c. How does the clinic keep record of when the solution needs changing?
- 30. OBSERVE the condition of instruments that have completed the sterilization process. NOTE discrepancies such as loose tools, debris on tools, opened bags, instruments breaking through bags or bags without heat indicators .
- 31. OBSERVE and NOTE where instruments are stored.

ASK:

- 32. Does staff use rubbing alcohol to clean or disinfect any instrument or surface?
 - 32a. If YES, on what items is it used?
 - 32b. How is it used?
- 33. For each of the instruments listed below, ASK whether or not the clinic or practitioner uses a disposable form of the instrument, if they 'cold sterilize' the instrument only, or if they use any combination of other cleaning methods and then autoclave the instruments. (Put N/A if they don't use the item.)

	<u>DISP.</u>	<u>COLD STER.</u>	<u>AUTOCLAVE</u>
33a. Prophy angles	_____	_____	_____
33b. Prophy cups	_____	_____	_____
33c. HVE tips (suction)	_____	_____	_____
33d. Saliva ejectors	_____	_____	_____
33e. Air/Water syringe tips	_____	_____	_____
33f. Dappen dishes	_____	_____	_____
33g. Cheek retractors	_____	_____	_____
33h. Bite blocks	_____	_____	_____
33i. Endo files	_____	_____	_____
33j. Burs	_____	_____	_____
33k. Impression trays	_____	_____	_____

- 34. How are slow and high speed hand pieces cleaned?
 - 28a. When? (Between patients, daily, etc.)
- 35. How are the instruments prepared before being sent for repair?
- 36. How are the instrument trays cleaned?
 - 36a. How often?
 - 36b. By whom?
- 37. How are items retrieved from cupboards or drawers during a dental procedure?

J. OPERATORY DISINFECTION:

OBSERVE:

- 1. On what surfaces are barriers (pieces of tape, bags, or other disposable protectors) used?
- 2. When are the barriers changed?
- 3. Are there any unusual observations or concerns? (eg., counters showing evidence of residues, dirty areas, food, drinks or consumables, etc.)
- 4. OBSERVE the bottle. RECORD the disinfectant name, active ingredient and the expiration date.

ASK:

- 5. How are the hard surfaces in the operatory cleaned?
- 6. How often during the day is this done?
- 7. What product(s) are used?
- 8. How often is the high volume evacuation system (suction) cleaned?
- 9. Is the trap cleaned?
 - 9a. How often?

10. When are the anti-retractor valves in the air/ water syringes and high speed handpieces flushed? (NOTE if they do not have anti-retractor valves.)
11. Does the clinic contract with an outside service to clean the clinic or operatory areas?
 - 11a. If YES, NOTE what tasks the service performs.

(If the service is actually performing any disinfection or sanitation of the operatory surfaces or if it is handling instruments, ASK about the nature of the service. Is it a service specializing in cleaning medical/dental clinics? If not, what training is provided to the service personnel? Does the clinic have documentation of the training? What personal protective equipment is given to them for their use?)

K. EMPLOYEE ISSUES:

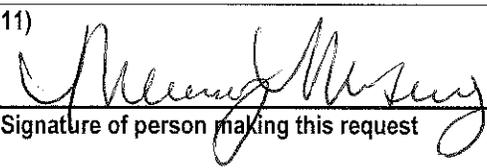
(Note: If the practitioner is self-employed, not incorporated, and has no employees involved in the care of patients, those items marked with an asterisk do not apply.)

OBSERVE the practitioner as well as any other employee working with a patient, if possible. If it cannot be observed, ASK:

1. Are gloves worn?
 - 1a. When?
 - 1b. When are they changed?
2. Are face masks worn?*
- 2a. When?
- 2b. When are they changed?*
3. Are eye protection or chin-length face shields worn?*
- 3a. If eyeglasses are worn, are side shields used?*
- 3b. How often is the eye protection cleaned?*
- 3c. How is it cleaned?*
4. Are employees wearing uniforms and/or gowns?* DESCRIBE style of uniforms/gowns.
 - 4a. Who is responsible for laundering uniforms/gowns?*
 - 4b. What is done with the uniform at the end of the work day?*
 - 4c. What is done if a uniform/gown becomes soiled or contaminated during the work day?*
5. Is a sharps container present in the laundering area?*
6. Are staff personally responsible for any costs of uniforms, protective eyewear, gloves or masks?*
7. Is there a written protocol for handling biohazardous spills?* If YES, OBTAIN a copy.
 - 7a. If NO, ASK the practitioner to describe how staff is instructed to handle spills.
8. What is the protocol for handling an amalgam spill?
9. Ask if the office has a protocol for follow-up to an employee's significant biohazard exposure.*
 - 9a. If YES, ASK for a copy of the written protocol and include with the report.
 - 9b. If NO, ASK the practitioner to describe how this would be handled.
10. Is the hepatitis B vaccine offered to all staff at no charge?* If NO, NOTE to whom it is not offered.
 - 10a. If YES, what would be done if an employee refused the vaccination?*
11. Does the practitioner maintain a confidential employee medical file on each staff member?*
 - 11a. If YES, what type of information is included in the file?
12. Are new employees trained in infection control procedures?*
 - 12a. Is retraining in infection control procedures provided?*
 - 12b. How frequently is it provided?*
 - 12c. Is there a record of the training?

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Maggy McGarry, License Program Associate		2) Date When Request Submitted: 06/12/2013	
Items will be considered late if submitted after 4:30 p.m. and less than:			
<ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 			
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 07/10/2013	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Discussion of Exam & Endorsement Application Processing Procedures	
7) Place Item in: <input type="checkbox"/> Open Session <input checked="" type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input checked="" type="checkbox"/> Yes (Fill out Board Appearance Request) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Discussion of application processing of exam and endorsement applications including how applicants may apply, requirements, and procedures.			
11) Authorization <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">  Signature of person making this request </div> <div style="width: 30%; text-align: right;"> 06/12/13 Date </div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">Supervisor (if required)</div> <div style="width: 30%; text-align: right;">Date</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">Executive Director signature (indicates approval to add post agenda deadline item to agenda)</div> <div style="width: 30%; text-align: right;">Date</div> </div>			
Directions for including supporting documents:			
<ol style="list-style-type: none"> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting. 			

BOARD APPEARANCE REQUEST FORM

Board Name: Dental Examining Board

Board Meeting Date: 07/10/2013

Person Submitting Agenda Request: Maggy McGarry

Person requesting an appearance: Maggy McGarry

Mailing address: 1400 East Washington Avenue, Madison, WI 53703

Email address: maggy.mcgarry@wisconsin.gov

Telephone #: 608-266-2112

Reason for Appearance: Aid in discussion of application processes and procedures

Is the person represented by an attorney? If so, who? NA

Attorney's mailing address: NA

Attorney's e-mail address: NA

Phone Attorney: NA

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 6 May 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Credentialing Matters Discussion/review of foreign trained dentists licensure pathways	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: <p>Discussion/review of foreign trained dentists' licensure pathways.</p> <p>DE 2.01 Main difference between foreign & US trained licensees (graduating from foreign dental school + AEGD / GPR vs. just graduating from US trained dental school) AEGD = advanced education in general dentistry or GPR = general dental practice residency</p> <p>The foreign trained individual has to complete either a postgraduate accredited advanced education in general dentistry or complete an accredited general dental practice residency.</p>			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Page intentionally left blank

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 24 June 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Education Exams Hygiene Examination Review Committee Report by Cathy Martin	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Hygiene Examination Review Committee Report by Cathy Martin			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Report to WDEB June 2013

Hygiene Examination Review Committee Report by Cathy Martin

Updates for 2013:

CRDTS Hygiene exams utilized updated tablets for scoring devices in 2013. Electronic scoring devices have been utilized by CRDTS dental and hygiene exams for a few years. Software is very user friendly and state of the art.

I implemented a Soft tissue Laser course for hygienists in Madison. Course included a hands on component utilizing pig jaws and lasers from 6 different manufacturers. Cost was \$299.99 for Hygienists with all proceeds going to Madison College CE. During registration, I fielded numerous questions from dental professionals as to the necessity for the hands on course. More laser programs are currently offered in state, with the largest one to be held at the Indigo Conference in October, 2013.

I attended the CRDTS 2 day Annual Meeting and workshops in August of 2012 and was an examiner at 4 hygiene exams during the 2013 season. In March of 2013, I attended and participated in a state wide conference with WI Dental Hygiene faculty in Green Bay.

I would suggest members of the WDEB review the 2013 reports generated by CRDTS on the pass/failure rates for WI CRDTS exams given annually to the department.

I suggest WDEB require remediation after 3 failures of clinical competency exams before allowing candidates to retake any clinical licensing exam a 4th time.

I would suggest the Department maintain verifiable records on those Dental Hygienists certified in local anesthesia. Also suggest including local anesthesia certification directly on individual dental hygiene license. Employers would be assured of the status of an applicant's ability to legally administer local anesthesia. Many states currently have this capability. I would be willing to assist the Department to implement this process in Wisconsin.

I will attend the July Hygiene ERC meeting. I will provide an additional written report to the WDEB pending Steering Committee's final approval of the ERC recommendations. One of my assignments for 2013 includes researching and then updating criteria for the interpreters at hygiene testing sites.

I am at your service as a resource regarding the clinical competency licensing examination which is currently required for licensure to practice Dental Hygiene within the U.S. licensing jurisdiction.

Cathy Martin RDH
Member of Hygiene ERC - CRDTS
CEMartin@madisoncollege.edu

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Eileen Donohoo		2) Date When Request Submitted: 6/25/2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: July 10, 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Report of NERB Steering Committee Meeting	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Review and discuss the changes to ADEX for 2013 and 2014.			
11) Authorization			
Karen Rude-Evans on behalf of Eileen Donohoo			
Signature of person making this request			Date
Supervisor (if required)			Date
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			
Date			
Directions for including supporting documents: <ol style="list-style-type: none"> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting. 			

Report of North East Regional Steering Committee meeting
Thursday, June 13, 2013

Changes in the ADEX exams for 2013 and 2014 are as follows:

1. The Periodontal portion of the examination is optional based on candidate wishes and individual state board requirements.
2. For the Restorative exam, any tooth treated must have all carious lesions treated by the end of the exam.
3. For the Restorative exam, two lesions may be assigned at the same time but the restoration on the first lesion must be completed before the second lesion can be started.
4. If a lesion was initially inappropriately assigned for treatment with an open contact, it may be restored to appropriate contour, without having contact and this will not result in a failing grade.
5. For the Endo/Pros exams, if a candidate finishes the Endo procedure early he/she may, following approval by a CFE, move immediately on to the second Pros procedure without having to wait for the start of that section on the exam day but still only get 4 hours to complete
6. Retakes of any one part of the exam will have a time limit that matched the current exam time limits for individual parts of the exam- (6 hours for a restorative retake, 3 hours for a perio retake, 3 hours for an endo retake and 4 hours for a pros retake)
7. The Captain is permitted to counsel examiners who apparently misapply objective, measureable criteria
8. Begin the transition to Acidental tyodont for the Endo and Pros exams.

In 2014, the exam will be reported as Pass/Fail. 75 or higher will be passing.

Dental Hygiene changes for 2013 included adding teeth for calculus detection and increasing the number of qualifying surfaces that could be selected for treatment from 12 to 16

2014 Changes for Dental Hygiene:

1. The Local Anesthesia computer-based exam will be required along with the CSCE and Patient Treatment exam for ADEX status
2. The exam will be reported as Pass/ Fail
3. Scoring will be changed to the SRTA format

Respectfully Submitted,
Eileen Donohoo

**State of Wisconsin
Department of Safety & Professional Services**

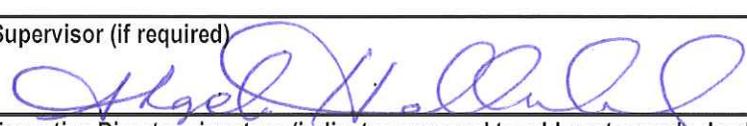
AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Angela Hellenbrand Executive Director		2) Date When Request Submitted: 19 June 2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 10 July 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislative/Administrative Rule Matters DE 2.03 (7) Display of license - Discussion	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Legislative/Administrative Rule Matter DE 2.03 (7) Display of license. The license and certificate of registration shall be displayed in a prominent place by every person licensed and currently registered by the board.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Page intentionally left blank

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Jean MacCubbin, Program Manager		2) Date When Request Submitted: 07/02/2013 <small>Items will be considered late if submitted after 4:30 p.m. and less than:</small> <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 20130710	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? LEG_ADMIN MATTERS 1. DE 9 – lab work authorization rule draft	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (<u>Fill out Board Appearance Request</u>) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: 1. Discuss and Consider Public Hearing Draft-- DE 9.02, Lab Work Authorization Rule Draft (attached)			
11) Authorization			
<i>Jean MacCubbin</i>		<i>7/02/2013</i>	
Signature of person making this request		Date	
		Date	
Supervisor (if required)		Date	
		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
DENTISTRY EXAMINING BOARD

IN THE MATTER OF RULE-MAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	DENTISTRY EXAMINING BOARD
DENTISTRY EXAMINING BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Dentistry Examining Board to amend ss. DE 9.02 (Intro.), (1), (2) and (4); create s. DE 9.015; and repeal and recreate s. DE 9.01, relating to lab work authorizations.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Section 447.03 (3) (f) 1., Stats.

Statutory authority: Sections 15.08 (5) (b), 227.11 (2), and 447.03 (3) (f) 1., Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., requires that examining boards shall promulgate rules for their own guidance and for the guidance of the professions over which they have jurisdiction.

Section 227.11 (2), Stats., permits an agency to promulgate rules interpreting the provisions of any statute enforced or administered by the agency.

Section 447.03 (3) (f) 1. Stats., authorizes the Wisconsin dentistry examining board to grant a license to practice dentistry to any individual who meets the requirements established in ch. 447, Stats., with some exceptions. One specific exception is enumerated in s. 447.03 (3) (f), which reads:

“A dental laboratory or dental laboratory technician to construct appliances or restorations for dentists if all of the following apply: 1. The appliances or restorations are constructed upon receipt from a dentist of impressions or measurements, directions, and a written work authorization on a form approved by the examining board.”

Related statute or rule:

There are no other related statutes or rules beyond those indicated above.

Plain language analysis: The objective of the proposed rule is to eliminate the requirement that a written authorization for dental laboratory work shall be on a form approved by the board. The proposed rule will also allow for the continued use of current technologies, such as the request may be made electronically and work orders detailed digitally.

SECTIONS 1. and 2. These sections are proposed to separate the subjects of authority and definitions from the current section, s. DE 9.01 whereby creating two renumbered sections ss. 9.01 and 9.015. The definitions for both dental laboratory and work authorization now clearly remove any reference to a written request or the use of a board-approved form.

SECTION 3. This section deals primarily with the changes to no longer requiring written lab work authorizations, in so far as amending ss. DE 9.02 (Intro.), (1), (2) and (4) to remove references to out-dated methods of work order requests.

Summary of, and comparison with, existing or proposed federal regulation:

No rules or laws were found in an Internet-based search of the U.S. Code or the Code of Federal Register (CFR) for dental lab work authorizations, written or electronic, made by dentists.

Comparison with rules in adjacent states:

Illinois: The Illinois statues and codes were researched via the Internet and no specifications were found for dental work authorizations, either written or electronic.
[PART 1220 ILLINOIS DENTAL PRACTICE ACT]

Iowa: In searching Iowa codes, ch. 153, Dentistry, no specifications were found for dental work authorizations, either written or electronic.
[http://www.state.ia.us/dentalboard/board/rules-policy/docs/IowaCode153_2013.pdf]

Michigan: Board of Dentistry **2012-111 LR**, No specifications were found for dental work authorizations, either written or electronic.
[http://www7.dleg.state.mi.us/orr/Files/AdminCode/1118_2012-111LR_AdminCode.pdf]

Minnesota: Minnesota board of dentistry rules for Dentists, Hygienists, and Assistants are contained in ch. 3100 [<https://www.revisor.mn.gov/rules/?id=3100>]. No specifications were found for dental work authorizations, either written or electronic.

Summary of factual data and analytical methodologies:

The Board, in reviewing their rules in response to Executive Order 61, recognized these out-dated methods for making lab work order requests and authorizations. These methods are costly and time consuming to small business.

The proposed provisions are expected to make such requests more efficient, more accurate and less costly for small business.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

THIS WILL BE COMPLETED AFTER THE 14-DAY EIA notification period ends.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Greg.Gasper@wisconsin.gov, or by calling (608) 266-8608.

Agency contact person:

Jean MacCubbin, Program Manager, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, Wisconsin 53708-8935; telephone 608-266-0955; email at Jean.MacCubbin@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Jean MacCubbin, Program Manager, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, WI 53708-8935, or by email to Jean.MacCubbin@wisconsin.gov. Comments must be received on or before _____* to be included in the record of rule-making proceedings.

-PROPOSED TEXT BEGINS ON NEXT PAGE-

TEXT OF RULE

SECTION 1. DE 9.01 is repealed and recreated to read:

DE 9.01 Authority. The provisions in chapter are adopted pursuant to authority in ss. 15.08 (5) and 227.11 (2) (a), Stats., and ch. 447, Stats.

SECTION 2. DE 9.015 created to read:

DE 9.015 Definitions. In this chapter:

(1) "Dental laboratory" means any dental workroom directly or indirectly engaged in the construction, repair or alteration of appliances to be used as substitutes for or as a part of natural teeth or jaws or associated structures, or for the correction of malocclusions or deformities.

(2) "Work authorization" means an official, signed request to a dental workroom or laboratory from a licensed dentist that clearly and thoroughly transmits at least the date of request the doctor's name, license number and contact information, the patient information, choice of base material, choice of metal alloy or type of porcelain to be used for the prosthesis, choice of margin and pontic design of the prosthesis, impressions or measurements, and shade description.

SECTION 3. DE 9.02 (Intro.), (1), (2) and (4) are amended to read:

DE 9.02 Work authorizations. ~~Written work~~ Work authorizations shall ~~be on a form approved by the board~~ include data which is substantially similar to the ~~official board~~ form set forth below:

(1) Each work authorization ~~or a carbon copy thereof~~ shall be retained and filed by the issuing dentist and by the dental laboratory for a period of at least 3 years from the date of issuance. The filed work authorization ~~or carbon copy thereof~~ shall be available for inspection by the board or its representatives during such period.

(2) No dental laboratory shall have in its possession any prosthetic dentures, bridges, orthodontic or other appliances or structures to be used as substitutes for or as a part of natural teeth or jaws or associated structures, or for the correction of malocclusions or deformities, either completed or being fabricated, without having in its possession a ~~written,~~ signed work authorization ~~therefore~~.

(4) The board, its agents or employees may inspect dental laboratories' records of work authorization. Any dental laboratory which violates any provisions of this ~~aet~~

chapter, or refuses to allow the board, its agents or employees to inspect the work authorization records is subject to such penalties as provided ~~by law~~ in s. 470.09, Stats.

SECTION 4. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

Dated _____

Agency _____

Board Chairperson
Dentistry Examining Board

File: 165-DE 9 lab work authorization public hearing draft 1

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Jean MacCubbin, Program Manager		2) Date When Request Submitted: 06/21/2013 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Dentistry Examining Board			
4) Meeting Date: 20130710	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? LEG_ADMIN MATTERS 1. Ch. DE 11, Sedation Permits, Rule Draft 2. Ch. DE 12, Training Verification Forms, Scope Statement 3. Records Retention Guidelines	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: 1. Ch. DE 11, Sedation Permits, Rule Draft —Discuss and Consider Public Hearing Draft (attached) 2. UPDATE Ch. DE 12, Training Verification Forms, Scope Statement —will be published 7/15; need a motions for approval to implement/draft rule post 7/25 3. Records Retention & Destruction — Discuss and Consider			
11) Authorization			
Jean MacCubbin		6/21/2013	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

DRAFT 1 7/10/13
STATE OF WISCONSIN
DENTISTRY EXAMINING BOARD

IN THE MATTER OF RULE-MAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : DENTISTRY EXAMINING BOARD
DENTISTRY EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Dentistry Examining Board to amend ss. DE 11.05 (1), 11.06 (1) and 11.07 (1) and create DE 11.02 (9m), relating to sedation permits and classes of permits.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: s. 447.02 (2) (b), Stats.

Statutory authority: ss. 15.08 (5) (b) and 447.02 (2) (b), Stats.

Explanation of agency authority:

15.08 (5) (b), Stats. The examining board shall promulgate rules for the guidance of the profession to which it pertains and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.

447.02 (2) (b), Stats. The examining board shall promulgate rules specifying the "...standards, conditions and any educational requirements that are in addition to the requirements specified in s. 447.04(1) that must be met by a dentist to be permitted to induce general anesthesia or conscious sedation in connection with the practice of dentistry".

Related statute or rule: s. 447.01 (8) (d), Stats.

Plain language analysis:

The intent of the rule is to allow the Dentistry Examining Board discretion in approving sedation permits for licensees who have discipline action against them; therefore, the granting of permits shall be permissive. In addition, the definitions of classes of sedation permits are added as no such reference occurs in the rule or the rule series, chs. DE 1 to 13.

SECTION 1 provides a definition of sedation permit classes which correspond to the permit application process.

SECTIONS 2 to 4 modify the current text making the approval of permits permissive and update the permit classes as now defined in DE 11.02 (9m).

Summary of, and comparison with, existing or proposed federal regulation:

No existing or proposed rules or laws were found in an Internet-based search of the U.S. Code or the Code of Federal Register (CFR) regarding classes of sedation, sedation permits for licensed dentists or how discipline may affect dentists applying for or maintaining such permits.

Comparison with rules in adjacent states:

Illinois - The State of Illinois has an application process for dental sedation permits, which includes conscious sedation - Permit A and deep sedation and general anesthesia - Permit B. A permit application includes a request for information on fines, reprimands, probations, censures, revocations, suspensions, license surrenders, restrictions or limitations, but does not specifically list a prohibition of permit approval as a consequence of any discipline. [Title 68, subch. VIIb, sec. 1220.510]

Iowa - Iowa rules, IAC 650--Chapter 29, much like Illinois, have permits for sedation and their application forms request the following information: “ have your clinical activities ever been limited, suspended, revoked, not renewed, voluntarily relinquished, or subject to other disciplinary or probationary conditions?” In order to obtain a permit for deep sedation/general anesthesia, a dentist must hold current certification in *Advanced Cardiac Life Support (ACLS)* 650 IAC 29.3(4) – procedures by a dentist with a permit for deep sedation/general anesthesia can only be done with the assistance of at least two auxiliary personnel that have current basic life support certification. IAC 29.3(5) In this search, no rule or law was found to specifically prohibit applying for or maintaining such a permit while a licensee has been disciplined.

Michigan – In a search of ch. 33 Michigan health code, no provisions for application for sedation classes or permits were found.

Minnesota – In Minnesota dentists must obtain a certificate from the Board to administer general anesthesia or conscious sedation per Ch. 3100.3600 Subp 9. Requirements for both general anesthesia and conscious sedation stipulate for the dentist to have current *ACLS certification*. (Subp 2,3)

Dentists, dental hygienists and registered dental assistants may administer nitrous oxide inhalation analgesia with current CPR certification (Subp 4 D). The required continuing education includes both advanced cardiac life support (ACLS) and pediatric advanced life support (PALS). There is no mention of the ability to apply for or termination of such certification based on discipline or a licensee.

Summary of factual data and analytical methodologies:

No factual data and analytical methodologies were used to draft these rules.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The information comparing the states listed in this analysis was obtained directly from an Internet-based search and a review of the applicable regulations and rules, when found.

Fiscal Estimate and Economic Impact Analysis:

~~The Fiscal Estimate and Economic Impact Analysis is attached.~~

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at Greg.Gasper@wisconsin.gov, or by calling (608) 266-8608.

Agency contact person:

Jean MacCubbin, Program Manager, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, Wisconsin 53708-8935; telephone (608) 266-0955 or Contact Through Relay; email at Jean.MacCubbin@wisconsin.gov

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Jean MacCubbin, Program Manager, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, WI 53708-8935, or by email to Jean.MacCubbin@wisconsin.gov. Comments must be received on or before _____ to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. DE 11.02 (9m) is created to read:

DE 11.02 (9m) “Sedation permit classes” mean all of the following:

- (a) A class I permit only enables a dentist to do oral conscious sedation-enteral.

(b) A class II permit enables a dentist to do conscious sedation-parenteral and conscious sedation-enteral.

Note: Dentists who hold a Class II permit do not have to obtain a Class I Permit.

(c) A class III permit enables a dentist to do deep sedation, general anesthesia, conscious sedation-parenteral, and conscious sedation-enteral.

Note: Dentists who hold Class III Permits do not have to obtain any other class of sedation permit.

SECTION 2. DE 11.05 (1) (intro.) is amended to read:

DE 11.05 (1) ~~Beginning on January 1, 2007, no~~ No dentist may administer conscious sedation via an enteral route without having first obtained a class-~~one~~ I permit from the board, unless a dentist has been granted a permit under s. DE 11.06 or 11.07. A class-~~one~~ I permit enables a dentist to utilize conscious sedation enterally. The board ~~shall~~ may grant a class-~~one~~ I permit to administer conscious sedation enterally to a dentist who ~~does~~ meets all of the following:

SECTION 3. DE 11.06 (1) is amended to read:

DE 11.06 (1) ~~Beginning on January 1, 2007, no~~ No dentist may administer conscious sedation via a parenteral route without having first obtained a class-~~2~~ II permit from the board, unless a dentist has been granted a permit under s. DE 11.07. A class-~~2~~ II permit enables a dentist to utilize conscious sedation=~~enteral~~, and conscious sedation-parenteral. The board ~~shall~~ may grant a class-~~2~~ II permit to administer conscious sedation-parenterally to a dentist who ~~does~~ meets all the following:

[NOTE TO LRB: In s. DE 11.06 (1), the change is correcting the equals sign to a hyphen in the following: “sedation=enteral” to “sedation-enteral”.]

SECTION 4. DE 11.07 (1) is amended to read:

DE 11.07 (1) ~~Beginning on January 1, 2007, no~~ No dentist may administer deep sedation ~~or~~, general anesthesia deep sedation or general anesthesia without having first obtained a class-~~3~~ III permit from the board. A class-~~3~~ III permit enables a dentist to utilize conscious sedation-enteral, conscious sedation-parenteral, deep sedation, and general anesthesia. The board ~~shall~~ may grant a class-~~3~~ III permit to administer deep sedation or general anesthesia to a dentist who does all of the following:

SECTION 5. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

Dated _____

Agency _____

Member of the Board
Dentistry Examining Board

File: DE 11 sedation PH draft 1 bd07102013

STATEMENT OF SCOPE

Dentistry Examining Board

Rule No.: Ch. DE 12

Relating to: Training Unlicensed Persons

Rule Type: Permanent

1. Finding/nature of emergency (Emergency Rule only):

N/A

2. Detailed description of the objective of the proposed rule:

Chapter DE 12, delegation of functions to unlicensed persons, has not been revised since 1991. The Dentistry Examining Board requests to repeal the requirements for the submittal of a form to verify a dentist's training and delegation of any dental procedure to an unlicensed person. In practice this process has not been followed and no form was approved by the board for such reporting or verification. Sections 447.065 and 447.06, Stats., provide authority to delegate procedures to unlicensed persons; this section does not mandate the maintenance of verifiable records or the use of a board-approved form to verify such delegation; in addition, the dentist delegating such functions is responsible for the unlicensed person's performance. Other minor corrections to this chapter, such as formatting and correcting typographical errors, may be included in this proposed rule revision.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

The deletion of this procedure will represent current practice, makes the rule consistent with statutory authority and no new policy is being established.

Leaving the existing rule language in s. DE 12.02 would not represent current practice and may burden the Dentistry Examining Board with the possible need to review such documentation, if and when submitted.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., requires all examining boards to "...promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 227.11 (2) (a), Stats., authorizes all agencies to promulgate rules interpreting the statutes it enforces or administers, when deemed necessary to effectuate the purpose of such statutes.

Section 447.065(1), Stats., authorizes a dentist who is licensed to practice dentistry under this chapter to delegate to an individual who is not licensed under this chapter only the performance of remediable procedures, and only if specific conditions are met.

Section 447.065 (3), Stats., authorizes a dentist who delegates to another individual the performance of any practice or remediable procedure be responsible for that individual's performance of that such practice or procedure.

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

The department estimates that approximately 60 hours will be needed to perform the review and develop any needed rule changes. This time includes meeting with the Dentistry Examining Board, drafting the rule changes and processing the changes through public hearing, legislative review, and adoption. The department will assign existing staff to perform the review and develop the rule changes; no other resources will be needed.

6. List with description of all entities that may be affected by the proposed rule:

Licensees and the Dentistry Examining Board

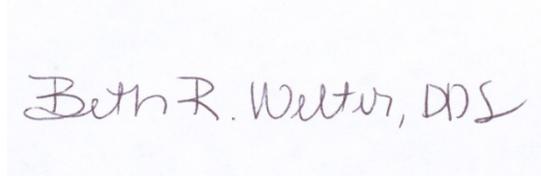
7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

An Internet-based search of the U.S. Code and Federal Register did not reveal any laws or proposals related to the training of unlicensed persons by dentists or verification forms of such training.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The Department believes that proposed revisions under chapter DE 12 will have no economic impact on small business.

Contact Person: Jean MacCubbin, (608) 266-0955.



Department Head or Authorized Signature

05/30/2013
Date Submitted

File: 165-DE 12 training verify form Scope signed 05302013

Issue	IL	IA	MN	MI
Electronic Format	N/A	When electronic records are kept, a dentist shall keep either a duplicate hard copy record or use an unalterable electronic record.	When electronic records are kept, a dentist must keep either a duplicate hard copy record or use an unalterable electronic record.	N/A
Available for Forensic	subpoena	?	N/A	Record of dental treatment required; records must be able to be used for identification purposes.
RDA (records retention)	10 yrs.	6 yrs. from last exam, treatment or medication.	7 years beyond the time the dentist last treated the patient	Not less than 10 yrs. from last treatment.
Confidentiality *				
Other	may refuse to issue or renew, or may revoke, suspend, place on probation, reprimand or take other disciplinary or non-disciplinary action			

*For more information on HIPAA Security regulations related to electronic records and communications, consult the ADA *HIPAA Security Kit* available for purchase through the ADA Catalog.

ADA 2007: Guidelines for dental Records:

http://www.ada.org/sections/professionalResources/pdfs/dentalpractice_dental_records.pdf

Retention and Storage

State laws and participating provider contracts generally specify the time following the last patient visit that records must be maintained. There is usually a different requirement for the retention of records of children; these records must be kept for a certain period after the child reaches the age of majority. **HIPAA also affects recordkeeping requirements for offices that are covered by generally requiring that such offices maintain patient records for six (6) years and two (2) years after a patient’s death.** The dental office should have a records retention policy and all staff should understand it. The office’s professional liability insurance company will likely have recommendations about retention.

Destruction and Confidentiality

If your office decides to destroy records as allowed by state law, caution must be used in the destruction of records. Confidential information is included in the dental record. You have an obligation to protect the patient’s privacy and personal health and financial information.

For those inactive patient records (passed the Statute of Limitation) that will not be transferred or returned to patients, a more secure way of eliminating these unwanted records generally involves shredding.

If possible, the dentist who is planning to close a practice should notify patients well in advance that the practice is closing. In most states, letters to patients of record or an announcement in a community newspaper are ways in which a dentist might give advance notice of a closing. Notice of 30 - 60 days is sufficient for most patients and circumstances.

Forensics

The American Dental Association's policy Dental Radiographs for Victim Identification (2003:363) gives guidance with regard to dentists making available original records to authorized investigators attempting to identify a disaster victim, for example.

Wisc 146.819 Stats. (Dept. of health Services – Misc. Health Provisions)

Preservation or destruction of patient healthcare records. (1) Except as provided in sub. (4), any health care provider who ceases practice or business as a health care provider or the personal representative of a deceased health care provider who was an independent practitioner shall do one of the following for all patient health care records in the possession of the health care provider when the health care provider ceased business or practice or died:

- (a) Provide for the maintenance of the patient health care records by a person who states, in writing, that the records will be maintained in compliance with ss. 146.81 to 146.835.
 - (b) Provide for the deletion or destruction of the patient health care records.
 - (c) Provide for the maintenance of some of the patient health care records, as specified in par. (a), and for the deletion or destruction of some of the records, as specified in par. (b).
- (2) If the health care provider or personal representative provides for the maintenance of any of the patient health care records under sub. (1), the health care provider or personal representative shall also do at least one of the following:
- (a) Provide written notice, by 1st class mail, to each patient or person authorized by the patient whose records will be maintained, at the last-known address of the patient or person, describing where and by whom the records shall be maintained.
 - (b) Publish, under ch. 985, a class 3 notice in a newspaper that is published in the county in which the health care provider's or decedent's health care practice was located, specifying where and by whom the patient health care records shall be maintained.
- (3) If the health care provider or personal representative provides for the deletion or destruction of any of the patient health care records under sub. (1), the health care provider or personal representative shall also do at least one of the following:
- (a) Provide notice to each patient or person authorized by the patient whose records will be deleted or destroyed, that the records pertaining to the patient will be deleted or destroyed. The notice shall be provided at least 35 days prior to deleting or destroying the records, shall be in writing and shall be sent, by 1st class mail, to the last-known address of the patient to whom the records pertain or the last-known address of the person authorized by the patient. The notice shall inform the patient or person authorized by the patient of the date on which the records will be deleted or destroyed, unless the patient or person retrieves them before that date, and the location where, and the dates and times when, the records may be retrieved by the patient or person.
 - (b) Publish, under ch. 985, a class 3 notice in a newspaper that is published in the county in which the health care provider's or decedent's health care practice was located, specifying the date on which the records will be deleted or destroyed, unless the patient or person authorized by the patient retrieves them before that date, and the location where, and the dates and times when, the records may be retrieved by the patient or person.