### GEORGIA BOARD OF DENTISTRY

2 MLK Jr. Drive, SE, 11<sup>th</sup> Floor, East Tower, Atlanta, GA 30334 May 2, 2025 – Board Meeting Minutes

### The following Board members were present:

Dr. Michael Knight, President

Dr. Don Spillers, Jr.

Dr. Greg Goggans

Dr. Lacey Green

Dr. Glenn Maron Ms. Misty Mattingly

Dr. Larry Miles, Jr.

Dr. Ami Patel

Dr. David Reznik (virtual)

Ms. Mark Scheinfeld (virtual)

Dr. Jeffrey Schultz

Ms. Lisa Selfe

Dr. Lisa Shilman

Dr. J.C. Shirley

Dr. Brent Stiehl

Dr. Debra Wilson

Dr. Nancy Young

## Staff present:

J. Clinton Joiner, II, Executive Director

Tommy McNulty, Sr. Assistant Attorney

General

Itovia Evans, Deputy Director – Licensing

Stacy Altman, Deputy Director – Investigations Angela Johnson, Board Administrative Support

Kimberly Holland, RDH BSDH – Complaint

Investigator

#### **Visitors:**

Quintina Clark, GDHA

Rick Callan, Promethean Dental Systems

Jon Hoin, GDA

Dr. Lester Jackson

Mike Hill, Promethean Dental Systems

Luke Ray, DCG

Sheriese Ferguson, GDHA

Keonka Williams, GDHA

Kathleen Bowen, ADSO Dr. Keith Kitchen Mohamed Raqab Kim Viskil Deonna Perry

### **Open Session**

Dr. Knight established that a quorum was present and called the meeting to order at 10:03 a.m.

Dr. Maron made a motion to enter into the Executive Session and Dr. Spillers seconded, and the Board voted to enter into Executive Session.

At the close of the Executive Session, Dr. Knight declared the meeting to be back in Open Session.

### **Introduction of Visitors**

Dr. Knight welcomed the visitors and asked them to introduce themselves.

### **Approval of Minutes**

Dr. Maron made a motion to approve the Public and Executive Session minutes from March 7, 2025, meeting. Dr. Green seconded, and the Board voted unanimously in favor of the motion.

### **Report of Licenses Issued**

Dr. Spillers made a motion to ratify the list of licenses issued. Ms. Mattingly seconded, and the Board voted unanimously in favor of the motion.

### **Petitions for Rule Waiver or Variance:**

### Soo Jin Lee – Rule 150-7-.04(3)(c) and Rule 150-7-.04(1)(c)

Dr. Lee has not submitted a formal application but is requesting that the Board consider approving dental licensure by credentials despite not meeting the full-time clinical practice requirement. Dr. Goggans noted that Dr. Lee does not meet the five-year clinical practice requirement outlined in the rule. Dr. Shirley expressed that the Board should consider reviewing the rule to take additional factors into account. Ms. Mattingly stated that she would like the rule referred to the Rules Committee for further review. Dr. Knight agreed and advised that the rule could be added to the Rules Committee's agenda.

Dr. Knight asked the Board for any additional comments.

Director Joiner advised that the Board could approve a waiver of the rule. O.C.G.A. § 43-11-41 leaves the definition of "full-time clinical practice" to the discretion of the Board. Therefore, in light of Dr. Lee's circumstances, if the Board is willing to accept his residency as fulfilling the clinical practice requirement, it may do so. However, this decision is entirely at the Board's discretion, as it is not bound by statute in this matter.

### O.C.G.A.§ 43-11-41(a)(1)

"... Applicants must have been in full-time clinical practice, as defined by rules and regulations established by the board; full-time faculty, as defined by board rule and regulation; or a combination of both for the five years immediately preceding the date of the application and must hold an active dental license in good standing from another state...."

Ms. Mattingly asked for clarification if this petition could be approved based on hardship. Dr. Knight responded yes. Ms. Mattingly advised that she would approve it based on this hardship. Dr. Wilson agreed. Dr. Goggans asked what the hardship was. Ms. Mattingly replied that Dr. Lee was unable to complete the full-time clinic requirement due to having to move to Georgia to take care of ailing parents.

Dr. Spillers and Dr. Shirley questioned what Dr. Lee has been doing since 2023. Dr. Schultz suggested that Dr. Lee amend the request to provide information on what they have been doing for work since 2023. Dr. Schultz suggested that the Board could table the discussion until such time as more information can be gathered from Dr. Lee.

Dr. Schultz moved to table the waiver petition, which was seconded by Dr. Patel. The Board voted in favor of tabling the petition pending receipt of additional information from Dr. Lee.

### Regina Helena Rocha – Rule 150-3-.04(2)(a)

Dr. Schultz commented that it is difficult to have a discussion without a formal application. Director Joiner noted that the applicant does not have a DDS or DMD from a CODA or Board approved school. According to O.C.G.A. § 43-11-41 she is not eligible for a waiver.

Dr. Spillers made a motion to deny the waiver petition. Dr. Goggans seconded the motion, and the Board voted to deny the petition.

### **Janice Park – Rule 150-14-.04(f) &150-14-.04(h)**

Dr. Shirley asked for clarification of what Dr. Park was asking in this waiver. Dr. Goggans explained that Dr. Park is requesting an exception to the rule, which stipulates a requirement of 21 postdoctoral hours be completed before she would be allowed to administer injectable pharmacologics. Although the rule specifically states 'postdoctoral,' she completed 16 hours, 8 of which was while she was attending school. She is seeking approval for her 16 hours to be considered as fulfilling the postdoctoral requirement.

Ms. Mattingly made a motion to deny the waiver petition. Ms. Selfe seconded the motion, and the Board voted to deny the petition.

### **Correspondence**

Email from Dr. Keith Kitchens – Request to Appeal Board's Decision

Dr. Kitchens requested that the Board reconsider its February 7, 2025 decision, which determined that radiofrequency microneedling is not within the scope of practice of dentistry.

Dr. Knight recognized Dr. Kitchens for comment.

Dr. Kitchens informed the Board that he had sent an email with additional information supporting his position. He argued that dentists should be permitted to perform RF microneedling, citing their extensive training and the minimally invasive nature of the procedure. Dr. Kitchens noted that dentists across the U.S. regularly perform RF microneedling, and he expressed concern that Georgia's restrictions are inconsistent with national practices and limit the range of services Georgia dentists can offer.

He further stated that dentists who perform RF microneedling are fully covered by their malpractice insurance, suggesting that insurance providers, after conducting appropriate risk assessments, consider the procedure safe and within a dentist's scope of practice.

Dr. Kitchens initially mentioned being Board-approved for Botox injections. Dr. Maron then sought clarification, establishing that Dr. Kitchens was not Board certified, but had instead completed and passed a course approved by the Board.

Dr. Kitchens added that he has spoken with several dentists who are already using the procedure. However, he is seeking the Board's approval to use the microneedling device specifically to aid in the treatment of periodontal disease, as well as to perform dermal fillers and Botox injections.

Dr. Goggans commented that, in response to Dr. Kitchens' statement that microneedling is being performed by dentists across the country and that insurance is covering it, he would like to see a list of state boards that have formally approved its use by dentists for cosmetic purposes. He also requested a list of insurance providers and professional liability carriers that cover microneedling for cosmetic purposes when performed by a dentist.

Dr. Goggans then asked Dr. Kitchens if he had a list of states that allow dentists to perform this type of procedure. Dr. Kitchens responded that he did not have a list. Dr. Goggans also inquired whether Dr. Kitchens had a list of insurance and professional liability companies that provide coverage for this use. Dr. Kitchens again indicated that he did not have a list. Dr. Goggans asked if Dr. Kitchens had a list of states that prohibit the procedure.

Dr. Schultz noted that several states, including Alabama and Louisiana, explicitly prohibit the use of microneedling by dentists, as it falls outside the defined scope of dental practice in those states. Dr. Knight commented that Florida permits the procedure performed by Dentists. Dr. Schultz commented that the language does not grant dentists unlimited approval for all procedures or the full face.

Dr. Shirley asked how it would help patients. Dr. Kitchens explained that microneedling can help reduce inflammation, improve tissue regeneration, minimize scarring, and accelerate the healing process after surgery.

Dr. Maron commented that he supported the idea that dentists know their patients well and that microneedling can enhance treatment outcomes, possibly even providing psychological benefits. He pointed out that other medical professionals, such as OBGYNs, are performing cosmetic procedures, which blurs professional boundaries. He emphasized that the definition of dentistry is governed by law (not just interpretation) and suggested that expanding the scope—such as including microneedling—should be carefully considered in the context of the Dental Practice Act. He also acknowledged that many dentists are already operating in gray areas and advised reviewing the legal definition to ensure compliance.

Dr. Spillers asked Dr. Kitchens if he had considered getting a license from the Georgia Composite Medical Board. Dr. Kitchens replied that he had not.

Mr. Scheinfeld asked whether veneers are considered a cosmetic procedure. Dr. Green responded that veneers are not cosmetic but rather considered restorative.

Dr. Maron made a motion to uphold the original vote to deny the request. Dr. Wilson seconded the motion, and the Board voted in favor of the motion. The Board maintains its position that radiofrequency microneedling does not fall within the scope of the practice of dentistry.

### **Email from Michelle Walker with Lincoln Memorial University (LMU)**

LMU is requesting a partnership between LMU and the Georgia Board of Dentistry. Ms. Walker provided follow-up responses to the questions the Board had at the March Board meeting.

Dr. Maron pointed out that LMU just opened for initial accreditation in September 2022.

The Board discussed the program's length, rotations, curriculum, and graduation requirements. Dr. Maron and Dr. Young expressed concern about who would be selecting the preceptors. The Board noted that LMU has not been established for very long. They would like to observe how the partnership progresses with the other state before agreeing to enter into a partnership with LMU.

Dr. Maron made a motion to deny the formation of the partnership at this time. Dr. Green seconded the motion, and the Board voted in favor of the motion.

**Email from Jon Hoin,** with Georgia Dental Association, requesting clarification on Continuing Education Rule 150-9-.02(2)(c), Rule 150-9-.01(3)(y) and Rule 150-3-.09(4)(d)

#### Mr. Hoin's questions were:

- 1. Regarding coronal polishing. Rule 150-9-.01(3)(y) defines required training as, "a curriculum approved by the Board or a minimum of eight hours of on-the-job training in the provision of rubber cup prophies by a dentist licensed to practice in Georgia." Board policy indicates that, "a dental assistant with at least one year of prior chairside experience or a graduate of an approved dental assisting program is eligible to attend an 8-hour preapproved course of study." Please offer additional clarification on this. The policy seems to depart from the text of the rule as well as the 6-months of employment required for expanded duties in a later section of 150-9-.02.
- 2. Regarding expanded duties, Rule 150-9-.02(2)(c) includes a note in parentheses indicating that an expanded duties certificate may only be issued upon proper proof of graduation. Subsection c is a work experience pathway that enables an assistant to take an expanded duties class, prompting the question, graduation from what? Is this note intended for

subsection b, where someone who is eligible for graduation from a 1-year accredited program may take expanded duties courses?

3. The policy manual states that existing board policy is to accept all out-of-state dental assisting programs. The Board also posts an approved list of approved dental assisting programs. Is it correct to state that the board accepts graduates from all out-of-state programs meeting the criteria described in policy as well as select in-state programs?

Dr. Knight recognized Mr. Hoin for comment. Mr. Hoin stated that the questions in his email came from the IT Education Director, who is seeking clarification on company policy rules. He added that these questions are primarily intended to help patients understand the rules more clearly.

To facilitate discussion on Mr. Hoin's questions, Dr. Goggans suggested some ideas on how to resolve the discrepancies and provided proposed amended rule language via email for the Board's consideration.

# Proposed Language to amend Rule 150-9-.02(2): Expanded Duties Training Eligibility

A dental assistant may attend a Board-approved course in expanded duties upon meeting one of the following eligibility criteria:

- (a) Proof of current certification as a Certified Dental Assistant (CDA) by the Dental Assisting National Board (DANB);
- (b) Proof of graduation from a dental assisting program accredited by the Commission on Dental Accreditation (CODA) or from a Board-approved dental assisting program in Georgia.

Note: For eligibility under (b), an expanded duties certificate may only be issued upon proper proof of graduation from the program. This graduation requirement does not apply to those qualifying under subsection (c).

#### IV. Statement of Purpose and Justification

This amendment is proposed to:

- Clarify Intent of the Rule: Subsection (c) is designed to provide an alternative pathway based on experience. Requiring "proof of graduation" for this path undermines its purpose.
- Resolve Internal Inconsistency: The current rule language includes a parenthetical clause that seems misplaced and has led to confusion among applicants and instructors.
- Ensure Fair Access: The revised language confirms that dental assistants with sufficient supervised experience are not unfairly barred from expanded duties training due to a misunderstanding of the graduation requirement.
- Improve Enforcement and Compliance: Clear, unambiguous rule language supports consistent application and understanding by licensees, educators, and Board staff.

### V. Supporting Authority

This petition is submitted under the authority of:

• O.C.G.A. § 50-13-9 – Petitions for adoption, amendment, or repeal of rules;

• O.C.G.A. § 43-11-74 – Authority of the Board to regulate the delegation of duties and training for dental assistants.

Dr. Knight asked Mr. Hoin whether the emails from Dr. Goggans had clarified the questions. Mr. Hoin acknowledged that the explanation addressed the first two questions, but the third question required further clarification.

Dr. Goggans stated that the third question raised by Mr. Hoin still needed to be addressed. Ms. Mattingly agreed, adding that this particular question is frequently discussed in online forums. Mr. Hoin noted that it is a commonly asked question.

Dr. Spillers commented that, during his tenure as President, the GDA offered a program in which an assistant could work in a practice for six months before becoming eligible to take expanded duties courses through the GDA. For orthodontic assistants, the process was similar: they would work in an office for six months, and with the doctor's approval, they could enroll in the Georgia Association of Orthodontists' expanded duties program.

Dr. Goggans stated that the Board had answered the question, affirming that it approves all out-of-state dental assisting programs but selectively determines which programs receive approval.

Dr. Spillers remarked that it was his understanding that when a certified dental assistant relocates from another state and works for an orthodontist for six months, they are still required to complete an approved expanded duties program. He added that he believes all dental assistants should follow a similar process. Ms. Mattingly expressed her support for the idea.

Dr. Shirley questioned why the Board would require a test if the dental assistants are already certified. Ms. Mattingly responded that until a dental assistant has worked under a dentist or orthodontist, there is no way to verify whether they are truly qualified. She added that Georgia does not register or certify dental assistants. Director Joiner explained that dental assisting is not considered a profession under the Board's rules. Rather, it is a specific set of delegable duties, ranging from clerical tasks to coronal polishing.

Dr. Spillers asked whether dental assistant duties are covered under expanded duties. Director Joiner replied that it is a specific task with distinct requirements as outlined by the Board. He noted similar examples such as placing and exposing radiographs, which require additional training mandated by the Department of Community Health. Each task has its own set of requirements, and the Board views them as individual duties that a dental assistant can only perform if properly trained.

Dr. Spillers suggested that dental assistants should be required to provide certificates verifying their training. Ms. Mattingly commented that, since the Board does not register dental assistants, monitoring compliance would be difficult. She added that she believes most complaints received by the Board involve individuals practicing dentistry without a license—and it is her understanding that these individuals are often dental assistants. She expressed interest in having the Board register or license dental assistants to create a system of accountability. Director Joiner responded that such a change would require legislation.

Dr. Maron expressed opposition to imposing new restrictions or registration requirements on dental assistants, citing existing workforce shortages that already make it difficult to hire qualified staff. He emphasized that the responsibility for verifying the qualifications of hired assistants lies with the licensed dentist, not the Board.

Dr. Maron argued that adding registration requirements would create unnecessary burdens, particularly when the Board is already struggling to meet current responsibilities. He questioned the feasibility of regulating such a large number of dental assistants. He stressed that the Board's role is to license dentists and hygienists in service of Georgia's citizens, while it is the responsibility of the dentist to ensure that their assistants are properly qualified. Dr. Reznik voiced his agreement with Dr. Maron.

Ms. Mattingly stated that the Board also has a duty to protect the public, and that she believes many dental assistants operate without any form of supervision. She noted that dentists do not always adequately vet their employees.

Deputy Director Altman highlighted a significant gap in the Board's regulatory authority regarding dental assistants. He explained that he is frequently asked why the Board cannot take direct action against problematic dental assistants, since the current framework primarily holds supervising dentists accountable. He pointed out that an assistant may be dismissed by one dentist and simply move to another practice, continuing harmful behavior undetected until a pattern emerges.

Deputy Director Altman added that this lack of oversight leads to public confusion. When complaints are filed, it's often unclear whether the dentist or the assistant is at fault, making it difficult to identify the true violator. He underscored Ms. Mattingly's earlier comment, and added that 75% of complaints involve unlicensed dental practice and often concern individuals posing as dental assistants. His experience reviewing cases confirms the ambiguity and challenges this issue creates.

Dr. Shirley suggested that the Board review the proposed language from Dr. Goggans and develop potential solutions to the third question for discussion at the next meeting.

Dr. Shirley made a motion to table the discussion for a future meeting. Ms. Mattingly seconded the motion, and the Board voted to approve it.

Dr. Maron acknowledged that the discussion regarding dental assistants is ongoing. He emphasized that licensed dentists bear primary responsibility for ensuring that their assistants are adequately trained and qualified. He noted that although some dentists fulfill this responsibility, others do not.

Dr. Maron reiterated that the Board should focus on making dentists fully aware that they are ultimately accountable for their assistants' actions, and that the Board will take disciplinary action against a dentist's license if an assistant under their supervision violates regulations.

Dr. Maron suggested that it would be helpful to provide updates in the GDA newsletters and other publications.

### General - Dr. Michael Knight

#### **Formation of Dental Hygiene Committee**

Dr. Knight asked the Board to consider forming a Hygiene Committee. Dr. Maron asked what that meant and what they would do.

Director Joiner explained that the goal is to establish a dental hygiene committee to give dental hygienists greater autonomy in prioritizing those issues which are specific to their profession. Historically, when the board considered matters affecting dental hygiene, such as laser use or local anesthesia, ad hoc committees were formed—like the Laser Committee and the Local Anesthesia Committee. However, these committees primarily addressed hygiene-specific concerns rather than

the broader scope of those topics within dentistry. The proposed committee would serve as a centralized unit to handle hygiene-related issues more effectively and consistently.

Ms. Selfe mentioned that several other states have a Hygiene Committee. Ms. Mattingly added that this Board had one previously, and she believes 19 other states currently have some form of a Dental Hygiene Committee.

Dr. Reznik asked whether the effort was intended to increase the influence of dental hygienists. He expressed that it is appropriate for hygienists to make decisions regarding the scope of their practice. Dr. Wilson inquired about the specific responsibilities of the committee. Ms. Mattingly responded that there are numerous hygiene-related topics and pending rules that need to be addressed.

Dr. Shilman asked who would serve on the committee and how many members would be needed. Director Joiner suggested that the committee consist of five (5) members, including both hygienists and three (3) additional Board members.

Ms. Mattingly advised that she is in support of the committee being formed. Ms. Selfe agreed.

Dr. Knight declared that a dental hygiene committee would be formed, consisting of 5 board members: both dental hygienist members and 3 dentist board members. He further stated that the committee would be chaired by one of the dental hygiene members.

### **Board Meeting Locations**

Dr. Knight asked whether the Board was interested in holding meetings at locations other than the Board office or the Dental College of Georgia in Augusta. Several members responded affirmatively. Mattingly likes idea and would like for the Board to schedule meetings in the Dental Hygiene schools. Dr. Goggans & Ms. Mattingly think it should happen once a quarter at least.

Dr. Knight then invited public comment on the matter. Several members of the public responded affirmatively.

#### **Professional Responsibility**

Dr. Knight addressed the rise in dental-related complaints and other problems within the industry. He emphasized that professionals (dentists and hygienists) must take responsibility for their licenses and their profession. He further suggested that while professionals are responsible, the issues he observes are increasingly originating from broader industry entities, such as labs or external business arrangements, rather than solely from individual practitioners. He believes that the Board's current regulatory scope (focused primarily on individual licenses) might be too narrow to address these true sources of problems. Therefore, he suggested that the Board might need to expand its regulatory power to oversee these entities directly, similar to how other industries regulate facilities.

### **Applications**

Dr. Knight requested that Board members help with application reviews during the renewal process, which runs from April to June.

### **Internal Committee Reports**

Infection Control Committee – Dr. David Reznik, Dr. JC Shirley, Dr. Nancy Young, Dr. Debra Wilson, Ms. Lisa Selfe, RDH

Dr. Reznik expressed pride in the group's work on the new waterline rule, noting that the rule has led to significant progress in waterline safety. He also thanked Dr. Shirley for his assistance.

Dr. Maron asked when the rule would become effective. Director Joiner advised that the rule is still pending the Governor's signature and should be sent to the Secretary of State soon.

### **External Committee Reports**

Electronic Database Review Advisory Committee (PDMP) Report – Dr. Lisa Shilman No Report.

# **CRDTS Steering Committee Report – Dr. Brent Stiehl** No Report.

# **CRDTS Examination Committee Report - Dr. Ami Patel** No Report.

# Dental College of Georgia Liaison Report - Dr. Michael Knight

Dr. Young advised that Wellstar has taken over Augusta University Health System, now known as Wellstar MCG Health, which has caused issues for residents regarding DEA numbers. He noted that there has been ongoing discussion about the best way to address the situation. One proposed solution is for the Board to issue a resident license that would allow residents to obtain a DEA number. Dr. Shirley added that in many other states, all medical residents are required to have a license.

Director Joiner advised that to authorize the license, a change in law is necessary. He added that the Board should be in favor of this, as it offers significant benefits, including greater regulatory flexibility. This change could also facilitate initiatives such as fourth-year dental practice beyond academic settings, if the Board is interested, and provide a resolution for issues like the LMU concern.

Dr. Young congratulated Dr. Spillers for being recognized as a Distinguished Alumnus by Augusta University.

# CDCA-WREB-CITA Steering Committee Report – Dr. Ami Patel, Dr. JC Shirley, Ms. Misty Mattingly, RDH

Ms. Mattingly reported that she is on the Local Anesthesia Committee for ADEX. She attended a meeting last Tuesday night, where she advised that the committee is working on an exam for local anesthesia for Dental Assistants. She also noted that in some states, Dental Assistants are permitted to administer local anesthesia and are now being registered. Currently, there is no existing test for Dental Assistants for this procedure.

Dr. Maron asked which states allow Dental Assistants to perform local anesthesia. Ms. Mattingly replied that twelve states allow them to administer local anesthesia under general supervision: Alaska, Arizona, Colorado, Idaho, Maine, Minnesota, Montana, Nevada, New Mexico, Oregon, Utah, and Washington. She additionally mentioned that Oregon has a denturist, defining a denturist as a licensed health professional who specializes in providing removable dentures and is trained to design, create, and fit full or partial dentures directly to patients.

Dr. Shirley reported that he is on the Steering Committee. He provided some brief highlights of the evolving landscape of dental licensure, including the widespread (but not universal) adoption of the ADEX exam, disparities in performance based on training background, and the increasing dialogue surrounding the necessity of clinical assessments.

The ADEX licensure examination is currently accepted in all U.S. states except for Delaware and New York for general dentistry, and Delaware and Nebraska for dental hygiene. Fifteen states exclusively accept ADEX. ADEX is administered in all CODA-accredited U.S. dental schools, and internationally in Mexico, Jamaica, and, starting in July, in Saudi Arabia (a newly CODA-approved school).

There are five (5) states that require rigorous hand-skills components for clinical examination for licensure. Conversely, several states do not require hand skills for clinical examination for licensure due to alternative pathways like a postgraduate year. These include Arizona, Washington, Colorado, Oregon, New York, and recently Wisconsin. He added that there is now a pathway for foreign trained Dentists to be licensed as Hygienists.

Dr. Shirley highlighted recent statistics on pass rates for different groups taking the ADEX examination, which show a performance gap between CODA-trained and non-CODA-trained candidates. A common concern is the number of attempts allowed for candidates who fail the exam. For the Class of 2024, approximately 82 candidates have not yet passed after multiple attempts. This has raised questions about potential limits on attempts and ongoing eligibility.

He added that the Dental Boards of other states have more than one or two Board members who assist with the examinations. He also noted that even though the Board accepts the ADEX exam, Georgia does not have a Board member who assists in the creation of the exam. He would like the Board to have representation in the creation of the examination.

# <u>GDHEA Liaison Report</u> – Dr. David Reznik, Ms. Lisa Selfe, RDH No. Report

# <u>Attorney General's Report</u> – Mr. Tommy McNulty No Report

# <u>Executive Director's Report</u> – Director J. Clinton Joiner, II No Report.

# <u>Legal Services</u> – Director J. Clinton Joiner, II No Report.

#### Miscellaneous

### Request for Approval as Peer Reviewer – Collin Richman

Dr. Goggans made a motion to approve the request. Ms. Mattingly seconded, and the Board voted in favor of the motion.

# Fortis College (Dr. Mohamed Ragab) -Request for Approval of Coronal Polishing Course. The Board had a discussion regarding Dr. Ragab's proposed coronal polishing course. Dr. Knight asked if any members had questions, comments, or concerns.

Ms. Mattingly commented that she had reviewed the proposed syllabus and found it consistent with other programs. She recommended its approval.

Ms. Mattingly moved to approve the course syllabus. Ms. Selfe seconded the motion, and the Board voted in favor.

# **Dent ED Online – Updated Syllabus Local Anesthesia for Dental Hygienists Course**– Jess McFarlin

Dent ED Online provided the Board with an updated syllabus for their existing Local Anesthesia for Dental Hygienists. Dr. Maron questioned whether the course had all of the required hours.

Ms. Mattingly commented that she had reviewed the amended syllabus and correspondence, and she recommends its approval. She added that the syllabus met the requirements for the minimum sixty (60) hours of coursework, comprised of thirty (30) didactic hours, fifteen (15) laboratory hours, and fifteen (15) clinical hours.

Ms. Mattingly moved to approve the course syllabus. Ms. Selfe seconded the motion, and the Board voted in favor of the motion.

### **HeartBeats CPR Training**

The Board discussed the proposed CPR training course. Dr. Knight asked if any members had any questions, comments or concerns. Dr. Maron commented that the proposed plan looked good.

Dr. Spillers made a motion to approve the course. Dr. Shilman seconded the motion, and the Board voted in favor of the Motoin.

### **Academy of Laser Dentistry – Request for Approval of Laser Courses**

Ms. Mattingly commented that she had reviewed the proposed syllabus and found it consistent with other programs. She recommended its approval.

Ms. Mattingly moved to approve the course syllabus. Ms. Selfe seconded the motion, and the Board voted in favor of the motion.

# Clayton State University (CSU)- Request for Approval of Local Anesthesia Course

The Board had discussion about CSU request for approval of Local Anesthesia Course.

Ms. Mattingly commented that she reviewed the proposed syllabus and that she recommends approval. Dr. Maron questioned whether or not the syllabus met all of the live hour requirements.

Ms. Mattingly made a motion to approve the course syllabus. Ms. Selfe seconded, and the Board voted in favor of the motion.

Dr. Shilman reported that her review of the proposed syllabus revealed a shortfall in the live hour requirement. The course was six (6) hours short of the thirty (30) required live hours because CSU's plan included six (6) hours of at-home lab exercises, which must instead be conducted live.

Dr. Shilman made a motion to reconsider the Board's previous motion to approve the course syllabus. Dr. Maron seconded the motion, and the Board voted in favor to deny the request for approval of the syllabus.

### **Nominations for President and Vice President**

Dr. Knight requested nominations for the positions of President and Vice President of the Board for the upcoming term.

- Dr. Goggans nominated Dr. Spillers for President. Dr. Knight confirmed with Dr. Spillers, who accepted the nomination.
- Dr. Wilson nominated Dr. Reznik for President. Dr. Knight confirmed with Dr. Reznik, who accepted the nomination.
- Dr. Miles nominated Dr. Stiehl for Vice President. Dr. Knight confirmed with Dr. Stiehl, who accepted the nomination.
- Dr. Wilson nominated Ms. Mattingly for Vice President. Dr. Knight confirmed with Ms.

Mattingly, who accepted the nomination.

The election for these officer positions will be held at the next Board meeting in June.

### **Discussion**

# Promethean Dental Systems – Skill Assessments for Reinstatement Applications

Promethean Dental Systems was invited to present to the Board regarding the services they offer in the area of clinical skill assessments. Representatives from the organization provided a brief overview of their programs, which are designed to evaluate and enhance the clinical competencies of dental professionals. The presentation included information on their assessment methodologies, simulation technologies, and potential remediation, and continuing education.

### Wiregrass College update

Ms. Mattingly informed the Board that Wiregrass College is graduating its first class of students trained in local anesthesia, making them one of the first of the three programs in the state to do so as part of the initial curriculum. She expressed appreciation to the Board for enabling this advancement and shared that the college is very excited about the opportunity to better prepare their students to meet professional standards.

# **Morehouse School of Medicine**

Dr. Maron shared that, for the first time, Morehouse School of Medicine will be including dental literature in its medical library. He noted this is a positive development for Georgia, promoting greater integration of dental and medical disciplines. A colleague reached out to him seeking current dental textbooks or other resources that could be donated to Morehouse. Dr. Maron encouraged anyone with relevant materials to consider contributing and suggested the information also be shared with the Dental Association. He emphasized the importance of dentistry being more actively included in broader health discussions and education.

Dr. Reznik shared that as a member of the Medical Executive Committee at Grady, that he has a strong working relationship with Morehouse leadership on that committee. He expressed his willingness to donate his dental textbooks—which are relatively new and cover a broad range of topics—as a contribution to Morehouse's new dental literature initiative.

Dr. Shirley noted that Children's Healthcare of Atlanta (CHOA) has an existing agreement with Morehouse and expressed his willingness to assist with the donation of dental literature for inclusion in the medical library.

Dr. Knight thanked everyone in attendance

Dr. Maron made a motion to enter into Executive Session and Dr. Spillers seconded, and the Board voted to enter into Executive Session in accordance with O.C.G.A. § 43-1-19(h), § 43-11-47(h), § 43-1-2(h) and § 50-14-3(b)(2). Voting in favor of the motion were those present who included Dr. Michael Knight, Dr. Greg Goggans, Dr. Lacey Green, Dr. Glenn Maron, Ms. Misty Mattingly, Dr. Larry Miles, Dr. Ami Patel, Dr. David Reznik, Mr. Mark Scheinfeld, Dr. Jeffrey S. Shultz, Ms. Lisa Selfe, Dr. Lisa Shilman, Dr. J.C. Shirley, Dr. Don Spillers Jr., Dr. Brent Stiehl, Dr. Debra Wilson and Dr. Nancy Young.

#### **Executive Session**

**Appearances:** None

### **LOC Recommendations**

| L.K.R.B. | A.L.E. | S.J.V. | M.C.   | S.S.   | C.S. |
|----------|--------|--------|--------|--------|------|
| D.A.C.W. | D.T.   | D.P.   | E.T.E. | A.S.L. |      |

**Applications** 

| H.T.W. | C.Y.  | E.J.   | J.J. | P.C. | J.B. |
|--------|-------|--------|------|------|------|
| S.P.   | T.N.  | M.H.   | W.V. | R.C. | H.K. |
| A.P.   | B.H.  | D.E.   | L.L. | M.A. | C.W. |
| M.M.   | T.G.S | S.A.A. | J.P. | K.S. |      |

Correspondence

J.T.H. Proposed Continuing Education Plan for Review

**Investigative Committee's Referral Case List:** 

| DENT250616 | DENT250781 | DENT250837 | DENT240242 | DENT250184 |
|------------|------------|------------|------------|------------|
| DENT250300 | DENT250017 | DENT250292 | DENT250308 | DENT250310 |
| DENT250316 | DENT250322 | DENT250394 | DENT250474 | DENT250549 |
| DENT250348 | DENT250361 | DENT250049 | DENT250341 |            |

# Attorney General's Report – Mr. Tommy McNulty

# **Signed Orders**

J.T. A.G.

**Open Cases** 

| KGP    | ı    | тр   | MP   | CM   |
|--------|------|------|------|------|
| K.G.P. | S.S. | I.K. | M.P. | S.M. |
| P.B.K. | D.M. | K.B. | K.W. |      |

# **Executive Director Report** – Mr. Clint Joiner

No Report.

<u>Legal Services</u> – Mr. Clint Joiner

No Report.

### <u>Investigations & Compliance Report</u> – Mr. Stacy Altman

Deputy Director Altman gave an update on cases.

No votes were taken in Executive Session. Dr. Knight declared the meeting back in Open Session.

### **Open Session**

Dr. Maron made a motion to approve all recommendations based on deliberations made in Executive Session as follows:

### **LOC Recommendations**

|          | 200 Recommendations            |  |  |  |
|----------|--------------------------------|--|--|--|
| L.K.R.B. | Dental Hygienist Reinstatement | Approved – Referral to AG's Office             |  |  |
| A.L.E.   | Dental Hygienist Reinstatement | Approved                                       |  |  |
| D.A.C.W. | Request to Remove Probation    | Approved after confirmation that CE hours have |  |  |
|          |                                | been completed                                 |  |  |
| S.J.V.   | Dental Credentials Application | Approved                                       |  |  |
| M.C.     | Dental Credentials Application | Approved                                       |  |  |
| S.S.     | Review of CEs                  | Must take CODA approved course                 |  |  |
| C.S.     | Guidance on CEs for Consent    | Must do risk management and CEs must be in     |  |  |

|        | Order                          | person                                 |
|--------|--------------------------------|--|
| D.T.   | Dentist Reinstatement          | Approved                               |
| D.P.   | Dental Hygienist Reinstatement | Approved – Referral to AG's Office     |
| E.T.E. | Dental Credentials Application | Approved                               |
| A.S.L. | Hygienist Renewal              | Tabled. Recommended interview with LOC |

.Applications

| прриси | Applications                   |   |  |  |  |
|--------|--------------------------------|---|--|--|--|
| H.T.U. | Licensure by Examination       | Deny  |  |  |  |
| C.Y.   | Licensure by Credentials       | Deny  |  |  |  |
| E.J.   | General Anesthesia             | Approve                                     |  |  |  |
| J.J.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| P.C.   | Additional Permits             | Tabled – Recommend Interview with Committee |  |  |  |
| J.B.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| S.P.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| T.N.   | Sedation Evaluation            | Approve                                     |  |  |  |
| M.H.   | Additional Permits             | Partial Approval                            |  |  |  |
| W.V.   | Parental Conscious Permit      | Tabled – Application being amended          |  |  |  |
| V.R.   | Enteral Conscious Permit       | Deny  |  |  |  |
| R.C.   | Extension Request              | Approve                                     |  |  |  |
| H.K.   | Parenteral Conscious Permit    | Approve                                     |  |  |  |
| A.P.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| B.H.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| D.E.   | Sedation Evaluation            | Tabled – Recommend Interview with Committee |  |  |  |
| L.L.   | Sedation Evaluation            | Tabled – Send deficiency notice             |  |  |  |
| M.A.   | Parenteral Conscious           | Approve                                     |  |  |  |
| C.W.   | Extension Request              | Approve                                     |  |  |  |
| T.W.   | Dentist Reinstatement          | Approve                                     |  |  |  |
| B.B.   | Dental Hygienist Reinstatement | Approve                                     |  |  |  |
| C.P.   | Dentist Reinstatement          | Approve                                     |  |  |  |
| M.G.   | Dental Hygienist Reinstatement | Approve                                     |  |  |  |
| J.S.   | Dentist Reinstatement          | Approve                                     |  |  |  |
| M.M.   | Faculty License                | Denied – Doesn't meet criteria              |  |  |  |
| T.G.   | Faculty License                | Approve                                     |  |  |  |
| S.A.A. | Faculty License                | Approve                                     |  |  |  |
| J.P.   | IP Application                 | Deny  |  |  |  |
| K.S.   | Volunteer                      | Approve                                     |  |  |  |

# **Correspondence**

J.T.H. Proposed CE Plan for Consent Order | Deny – CEs must be in person

**Investigative Committee's Referral Case List:** 

| threstigative Committee & Referral Case List. |                             |  |  |  |
|---|-----------------------------|--|--|--|
| Case #  | Description                 | Recommendation                                     |  |  |
| DENT250616                                    | Standard of Care            | Peer Review / Referral to AG for Revocation        |  |  |
| DENT250781                                    | Morbidity and Mortality     | Voluntary Surrender to be served by Investigations |  |  |
| DENT250837                                    | Standard of Care, Unethical | Referral to AG for OMPE                            |  |  |
|   | Conduct & Unprofessional    |  |  |  |
|   | Conduct                     |  |  |  |
| DENT240242                                    | Unprofessional Conduct      | Referral to AG for Indefinite Suspension           |  |  |
| DENT250184                                    | Unprofessional Conduct      | Referral to AG for Indefinite Suspension           |  |  |
| DENT250300                                    | Unprofessional Conduct      | Referral to AG for Indefinite Suspension           |  |  |

| DENT250017 | Unethical Conduct      | Close No Action               |
|------------|------------------------|-------------------------------|
| DENT250292 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250308 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250310 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250316 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250322 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250394 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250474 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250549 | Unprofessional Conduct | Referral to AG for Revocation |
| DENT250348 | Unprofessional Conduct | Close No Action               |
| DENT250361 | Standard of Care and   | Close No Action               |
|            | Unprofessional Conduct |                               |
| DENT250049 | Standard of Care       | Close No Action               |
| DENT250213 | Standard of Care       | Close No Action               |
| DENT250341 | Unprofessional Conduct | Close with Letter of Concern  |

Dr. Goggans seconded, and the Board voted unanimously in favor of the motion.

There being no further business to come before the Board, the meeting was adjourned at 1:24 p.m.

The next scheduled meeting of the Georgia Board of Dentistry will be held on Friday, June 6, 2025, at 10:00 a.m. at the Georgia Board of Dentistry, 2 MLK Jr. Drive SE, 11<sup>th</sup> Floor, East Tower, Atlanta, GA 30334.

Minutes recorded by Angela C. Johnson, Board Administrative Secretary Edited J. Clinton Joiner, II, Executive Director