GEORGIA BOARD OF DENTISTRY Board Meeting 2 Peachtree St., N.W., 5th Floor Atlanta, GA 30303 December 1, 2017 10:00 a.m.

The following Board members were present:

Dr. Tom Godfrey, President Dr. Greg Goggans, Vice-President Ms. Becky Bynum Ms. Wendy Johnson Dr. Logan Nalley Dr. Antwan Treadway Dr. Bert Yeargan

Staff present:

Tanja Battle, Executive Director Bryon Thernes, Assistant Attorney General Kimberly Emm, Attorney Brandi Howell, Business Support Analyst I

Visitors:

John Watson, ADSO Ryan Loke, PDS Scott, Lofranco, GDA Charles Craig, GDHA Valerie Ferro, GDHA Bekah Adamson, GDHA Marjorie M. Cabell, NGDS Dawn Lipfert Richard Lipfert, DMD Summer Grisamore James E. Barron, GDS Kevin Frazier, DCG Eunice Chay, Grady Terrisha Scott Felicia Williams Sid Barrett, Public Health Mark Willis Kim Willis Martin Krieger, GA Academy of Pediatric Dentists Pam Wilkes, Help A Child Smile/Shurett Dental

Dr. Godfrey established that a quorum was present and called the meeting to order at 10:04 a.m.

Dr. Godfrey welcomed the visitors.

Public Hearing

Dr. Godfrey called the public hearing to order at 10:06 a.m.

Rule 150-5-.03 Supervision of Dental Hygienists

Public comments were received from Valerie Ferro, GDHA. Ms. Ferro spoke to section (5)(a) of the proposed rule regarding prophylaxis and assessment. She requested the Board to also consider including periodontal maintenance in addition to oral prophylaxis as a listed dental hygiene service under general supervision.

Public comments were received from Dr. Martin Krieger, GA Academy of Pediatric Dentistry: Dr. Krieger asked if there was any special certification required for hygienists to do general supervision with children. Dr. Krieger gave an example of a two year-old patient that came in for an initial oral exam and began to have a seizure. There was no seizure history and had there not been a dentist there, it would have been a concern. He asked more specifically, what is the training, or experience, of these hygienists, to manage these types of medical emergencies? He asked if the hygienists have the training to manage those types of medical emergencies. He only knows of Basic Life Support (BLS) being required. Dr. Goggans asked if Dr. Krieger was suggesting if the hygienists are going to be working by themselves, they need to have as much training as the general dentist? Dr. Krieger responded that he did not know. He stated that maybe additional training in medical emergencies would be needed.

Dr. Nalley commented that he understood what Dr. Krieger was stating. He stated that if Dr. Krieger was uncomfortable with leaving a hygienist under general supervision, then he suggested to not do it. Dr. Nalley added that he wished these comments would have been brought up earlier.

Public comments were received from Becca Adamson, GDHA. Ms. Adamson commented that medical emergency training is part of the training of dental hygiene curriculum. She suggested adding a requirement for additional medical emergency training through continuing education. Dr. Godfrey responded that would be important to look at. Ms. Ferro added that she is also licensed in another state as well and she is required to have so many continuing education hours of medical emergency training for licensure renewal.

Dr. Godfrey stated that because it is a life safety issue that the Board is now discussing, it really raises a question. Does the Board rush forward, or does the Board add a very important component to the rule. Dr. Nalley commented that the Board needs to move forward. He stated the rule is incomplete as there is a life/safety issue. Dr. Nalley responded that the life/safety issue is there for dentists as well as hygienist. He stated if the Board needs to amend the language, it can amend the language; however, it is his opinion that the Board has had adequate time to do so.

Dr. Godfrey discussed the language regarding two (2) years' experience in section (6) of the rule. Dr. Nalley asked if 1000 hours be added to the proposed draft now. Ms. Battle reminded the Board that it has a conference call on Monday to consider adoption of the rule. Dr. Nalley responded that the Board needs to get a rule in place as it has been charged to do such. Dr. Goggans suggested that a course named "Identification and Prevention of Medical Emergencies" be required as continuing education. Ms. Ferro commented that she does agree with Dr. Krieger's comments as we want to make sure we are protecting the public. She stated that GDHA has partnered with several medical emergency experts that provide continuing education. She suggested it may be that the Board consider when hygienists renew biennially, a certain amount of hours are required for medical emergencies. Dr. Nalley agreed and stated that this is an issue that should be addressed under continuing education instead of this particular rule.

Dr. Godfrey stated that a decision needs to be made. He asked the board members do they want to get it right or move forward.

Ms. Dangler commented that she reached out to two hygiene schools during the hearing and both did have medical emergency management as part of its curriculum. Dr. Godfrey stated the programs should be reviewed by the Board when considering future guidelines.

Written comments were received from Leslie Broome, GDHA, and the Department of Public Health.

The public hearing was concluded at 10:50 a.m. Ms. Battle stated that the Board will move forward with the conference call on Monday, December 4, 2017.

Approval of Minutes

Dr. Nalley made a motion to approve the Public Session minutes for the November 3, 2017 meeting as amended. Dr. Goggans seconded and the Board voted unanimously in favor of the motion.

Dr. Nalley made a motion to approve the Executive Session minutes for the November 3, 2017 meeting. Dr. Yeargan seconded and the Board voted unanimously in favor of the motion.

Licenses to Ratify

Dr. Nalley made a motion to ratify the list of licenses issued. Dr. Yeargan seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Jeffrey N. James

The Board recommended tabling discussion of this item until later in the meeting.

Correspondence from Sydney T. Bacchus, PhD.

The Board considered this correspondence regarding what diagnostic procedures/tests are required for dentists practicing in Georgia as part of the standard assessment of periapical tissues. Dr. Yeargan made a motion to direct staff to respond by stating that while the Board's law and rules do not address this specific question, the dentist should use his/her own clinical judgement to ensure standard of care is met. Ms. Bynum seconded and the Board voted unanimously in favor of the motion.

Correspondence from Sean Murphy, American Association of Orthodontists

Ms. Battle commented that this correspondence was in reference to a proposed rule and was made available to the Rules Committee and was made available to the full Board as well. Dr. Godfrey added that it had been addressed at the Rules Committee meeting earlier that morning.

General – Dr. Tom Godfrey

Hurricane Irma – Impacted Licensees: Dr. Godfrey stated the situation was dire for many people in Puerto Rico. Dr. Godfrey stated at the last meeting there was discussion regarding the application process for dentists on an emergency basis. He stated that while the Board cannot change the standard requirements, in the past it has lowered the fee. He stated that he was not present at the Board's last meeting when this matter was discussed and offered the Board a motion to lower the fee for impacted licensees as it did for dentists impacted by Hurricane Katrina. The Board did not second the motion.

<u>CE Audit Committee Report – Dr. Richard Bennett</u>

No report.

<u>Conscious Sedation/General Anesthesia Committee Report – Dr. Antwan Treadway</u> No report.

<u>Credentials Committee Report – Dr. Greg Goggans</u> No report.

Dental Hygiene Committee Report – Ms. Rebecca Bynum No report.

Examination Committee Report – Dr. Bert Yeargan

Dr. Yeargan reminded the board members to turn in availability assignments to CRDTS.

Investigative Committee Report – Dr. Bert Yeargan

No report.

Legislative Committee Report – Dr. Greg Goggans

No report.

Licensure Overview Committee Report – Dr. Tracy Gay

No report.

Rules Committee Report – Dr. Tom Godfrey

Dr. Godfrey made a motion to post Rule 150-3-.09 Continuing Education for Dentists. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-3-.09. Continuing Education for Dentists

(1) Dentists licensed to practice in the state of Georgia shall maintain and furnish to the Board, upon request, official documentation of having completed a minimum of forty (40) hours of continuing education during each biennium. Official documentation shall be defined as documentation from an approved provider that verifies a licensee's attendance at a particular continuing education course. Official documentation of course attendance must be maintained by a dentist for at least three (3) years following the end of the biennium during which the course as taken.

(a) Compliance with all continuing education requirements is a condition for license renewal. Failure to complete all hours of mandatory continuing education shall serve as grounds to deny the renewal of a license and may also result in disciplinary action being taken against a licensee.

(b) Upon its own motion, the Board may at any time randomly select a percentage of actively licenses dentists for the purpose of auditing their compliance with the continuing education requirements of the Board. Those licensees selected for an audit shall submit official documentation of their compliance within thirty (30) days of receipt of the audit letter. Failure to respond to an audit request in a timely manner shall be grounds for disciplinary action against a licensee.

(c) The continuing education requirements shall not apply to dentists whose licenses are on inactive status.

(d) The continuing education requirements shall apply within the first biennium that a dentist is licensed in Georgia. However, in order to meet the continuing education requirements during the first biennium, a newly licensed dentist may submit as their continuing education hours proof of dental coursework taken within the previous two (2) years of the date of the renewal application from a university or other institution accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor agency. Following the first biennium that a dentist is licensed in Georgia such licensees shall comply with the continuing education requirements set forth in Rule 150-3-.09(2) and (3).

(e) The continuing education requirements for dentists holding volunteer licenses may be satisfied by compliance with this rule, or they may alternatively be satisfied by compliance with Rule 150-3-.10.(2) Coursework, including home study courses, sponsored or approved by the following recognized organizations will be accepted:

(a) American Dental Association/American Dental Hygienists association, and their affiliate associations and societies;

(b) Academy of General Dentistry;

(c) National Dental Association and its affiliate societies;

(d) Colleges, and universities and institutions with programs in dentistry and dental hygiene that are accredited by the Commission on Dental Accreditation of the American Dental

Association when the professional continuing education course is held under the auspices of the school of dentistry or school of dental hygiene;

(e) CPR courses offered by the American Red Cross, the American Heart Association, the

American Safety and Health Institute, the National Safety Council, EMS Safety Services, or other such agencies approved by the Board.

(f) National and State Associations and/or societies of all specialties in dentistry recognized under Georgia law;

(g) Veterans Administration Dental Department;

(h) Armed Forces Dental Department;

(i) Georgia Department of Public Health;

(j) American Medical Association, the National Medical Association and its affiliate associations and societies;

(k) Hospitals accredited by the Joint Commission on Accreditation of Hospital Organizations (JCAHO). (3) Course content:

(a) All courses must reflect the professional needs of the dentist in providing quality dental health care to the public;

(b) At least thirty (30) hours of the minimum requirement shall be clinical courses in the actual delivery of dental services to the patient or to the community;

(c) Four (4) credit hours for successful completion of the CPR course required by Georgia law may be used to satisfy continuing education requirements per renewal period;

(d) Effective for the 2019 renewal year, one (1) hour of the minimum requirement shall include the impact of opioid abuse and/or the proper prescription writing and use of opioids in dental practice;

(d) (e) Up to fifteen (15) hours of continuing education per year may be obtained by assisting the Board with administering the clinical licensing examination. These hours shall be approved by the Continuing Education Committee of the Georgia Board of Dentistry and need not be sponsored by any agency listed in 150-3-.09 (2);

(e)-(f) Eight (8) hours per biennium may be obtained by assisting the board with investigations of licensees. This may include consultant review on behalf of the Georgia Board of Dentistry and peer reviews completed by committees of the Georgia Dental Association but shall be limited to two (2) hours for each case reviewed. These hours shall be approved by the Continuing Education Committee of the Georgia Board of Dentistry and need not be sponsored by any agency listed in 150-3-.09 (2);

(f) (g) Up to ten (10) hours of continuing education per year may be obtained by teaching clinical dentistry or dental hygiene at any ADA-approved educational facility. These hours shall be awarded in writing by the course director at the facility and approved by the Continuing Education Committee of the Georgia Board of Dentistry;

(g) (h) Up to ten (10) hours of continuing education per biennium may be obtained by providing, uncompensated dental care at a public agency or institution, not for profit agency, not for profit institution, nonprofit corporation or not for profit association which provides dentistry services to indigent patients;

(h) (i) Up to twenty (20) hours of continuing education per biennium may be obtained by members of the Georgia Board of Dentistry for member service, where one continuing education hour is credited for each five hours of Board service provided.

(4) Criteria for receiving credit for attending an approved continuing education course:

(a) Credit hours are not retroactive or cumulative. All credit hours must be received during the two (2) year period to which they are applied;

(b) One credit hour for each hour of course attendance will be allowed;

(c) Only twelve hours of credit will be accepted per calendar day;

(d) Effective January 1, 2008, at least twenty (20) of the required forty (40) hours of credit must be acquired in person at an on-site course or seminar; you are not allowed to acquire all CE hours through on-line courses, electronic means, journal studies, etc.

(5) Criteria for receiving credit for teaching an approved continuing education course:

(a) Credit hours for teaching an approved course must be obtained and used during the biennium that the approved course is taught;

(b) A dentist who teaches an approved continuing education course is eligible to receive two (2) credit hours for each hour of course work that he or she presents at a particular course. Credit will be given for teaching a particular course on one occasion. A maximum of ten (10) credit hours per biennium may be obtained by a dentist by whom an approved continuing education course is taught;

(c) Only continuing education courses sponsored by organizations designated in Rule 150-3.09(2) will be considered for credit pursuant to this subsection of the rule.

(d) In the event that an audit is conducted of the continuing education hours of a dentist who has taught a course approved by a recognized organization, the following information shall be required to document the dentist's role in presenting a continuing education course:

(i) Documentation from an approved provider verifying that the dentist presented an approved continuing education course;

(ii) Documentation from an approved provider reflecting the content of the course;

(iii) Documentation from an approved provider specifying the list of materials used as a part of the course; and

(iv) Documentation from an approved provider verifying the hours earned and the dates and times that the course in question was given.

(e) In the event that an approved continuing education course is taught by more than one dentist,

continuing education credit will be given for those portions of coursework for which the dentist is directly involved and primarily responsible for the preparation and presentation thereof.

Continuing education credit will not be available to a dentist whose participation in preparing and presenting an approved course is not readily identifiable.

(6) Criteria for receiving credit for providing uncompensated indigent dental care.

(a) Up to ten (10) hours of continuing education per biennium may be obtained by providing,

uncompensated dental care at a public agency or institution, not for profit agency, not for profit institution, nonprofit corporation or not for profit association which provides dentistry services to indigent patients.

(b) Dentists may receive one hour of continuing education for every four hours of indigent dental care the dentist provides, up to ten (10) hours. Such continuing education credits will be applied toward the dentist's clinical courses.

(c) All credit hours must be received during the two (2) year renewal period;

(d) All appropriate medical/dental records must be kept;

(e) Dentists shall at all times be required to meet the minimal standards of acceptable and prevailing dental practice in Georgia;

(f) The Board shall have the right to request the following:

1. Documentation from the organization indicating that the dentist provided the dental services;

2. Documentation from the organization that it provided medical and/or dental services to the indigent and/or those making up the underserved populations;

3. Notarized verifications from the organization documenting the dentist's agreement not to receive compensation for the services provided;

4. Documentation from the organization detailing the actual number of hours spent providing said services; and

5. Documentation from the dentist and/or organization verifying the services provided.

(7) Effective January 1, 2012, dentists may receive continuing education credit for dental coursework taken during a residency program from a university or other institution accredited by the Commission on Dental Accreditation of the American Dental Association. Such coursework must have been taken during the current license renewal period.

(1) Submission of a copy of the certificate of completion of program showing dates of completion is sufficient proof of coursework.

(2) One (1) credit hour equals one (1) continuing education credit.

Dr. Goggans made a motion to post Rule 150-4-.01 Investigations. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-4-.01 Investigations.

(1) The Board shall promptly conduct investigations to determine whether violations of the rules and laws governing the practice of dentistry or dental hygiene have occurred. Disciplinary proceedings may be initiated by the Board upon its own motion or upon receipt of a written complaint.

(2) Any matter pertaining to an investigation shall be kept in confidence by the Board until such matter is made part of a public document, is introduced as evidence at a hearing, or is provided to a law enforcement agency or another lawful licensing authority of this state or any other state upon inquiry by said agency or authority under to O.C.G.A. §§43-1-19(h)(2), 43-1-21, or is otherwise released as required or permitted under applicable state and/or federal law. Upon the revocation or suspension of a license to practice dentistry or dental hygiene, notice may be released to the press and other news media.
(3) The Board, in its discretion, may schedule an interview with a licensee as a part of its investigation of a matter. Notice of the date, time and location of the interview shall be provided to the dentist or hygienist along with information apprising him or her of the subject matter of the allegations to be discussed the dentist of the primary concern to be discussed.

Dr. Goggans made a motion to post Rule 150-7-.04 Dental Provisional Licensure by Credentials. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-7-.04 Dental Provisional Licensure by Credentials.

(1) For purposes of this rule:

(a) "State" includes Washington D.C. and all U.S. territories.

(b) "Provisional Licensure by Credentials" means a license to practice dentistry in the State of Georgia granted to individuals licensed to practice dentistry in another state who have not met all of the requirements for a regular dental license by examination but who have met equivalent requirements for the practice of dentistry as set forth in O.C.G.A. § 43-11-41 and by board rule.

(c) "Full-Time Clinical Practice" means a minimum of 1,000 hours for each full twelve (12) month period of licensure immediately preceding the date of the application in the hands-on treatment of patients. For the purposes of this rule, each such period shall not be less than a full twelve (12) months. <u>Neither clinical practice through Ttraining programs nor during periods of residency do not qualifyies</u> as full-time clinical practice. <u>Whether a part of or separate from the training or residency program, no clinical practice while participating in or enrolled in any training or residency program shall be considered for the purposes of this rule.</u>

(d) "Active Dental License" is defined as an unencumbered means a license to practice dentistry held by an individual without restrictions.

(e) "Full-Time Clinical Faculty Practice" means a minimum of 1,000 hours for each full twelve (12) month period of licensure immediately preceding the date of the application in the teaching of clinical dental skills at an ADA-accredited dental school/program. For the purposes of this rule, each such period shall not be less than a full twelve (12) months. For any time periods during which the applicant is participating in or enrolled in any training or residency program, the teaching of clinical skills shall not be considered for the purposes of this rule.

(2) Only those applicants licensed and currently engaged in full-time clinical practice, as defined in subsection (1)(c) of this rule, in a state that has a credentialing law similar to the licensure by credentials law in Georgia will be considered by the board for a provisional license by credentials. Applicants from states not issuing licenses by credentials are ineligible.

(3) The board may, in its discretion, grant a provisional license by credentials to dentists licensed in another state who do not hold a Georgia license to practice dentistry.

(4)(3) As set forth in O.C.G.A. § 43-11-41, an applicant for a provisional license by credentials must also meet the following requirements:

(a) Must have an active dental license in good standing from another state.

(b) Must have received a doctor of dental surgery (D.D.S.) degree or a doctor of dental medicine (D.M.D.) degree from a dental school approved by the board and accredited by the Commission on Dental Accreditation of the American Dental Association (A.D.A.) or its successor agency.

(c) Applicants must have been in full-time clinical practice, as defined in subsection (1)(c) of this rule; full-time faculty as defined in subsection (1)(e) of this rule; or a combination of both for each of the five years immediately preceding the date of the application.

(d) Candidates with any felony convictions are not eligible. Candidates convicted of a misdemeanor involving moral turpitude or dealing with the administering, dispensing or taking of drugs including, but not limited to controlled substances, are not eligible.

(e)(d) Those applicants who have received a doctoral degree in dentistry from a dental school accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor agency, must provide the following in order to complete their application:

1. Certified copy of the applicant's testing results showing passage of all sections with a score of 75 or higher or its equivalent score on a clinical examination administered by the board or a testing agency designated and approved by the board.

(i) After a fourth failure of one or more sections of any clinical examination, no further attempts will be recognized by the board for licensure by credentials in Georgia.

2. Show passage with a score of 75 or higher on a jurisprudence examination on the laws and rules governing the practice of dentistry in the State of Georgia. Such examination shall be administered in the English language.

3. Proof of current CPR certification;

4. Copies of any and all National Practitioner's Data Bank reports pertaining to the applicant;

5. Official transcripts under seal from a school or university from which the applicant received his/her a doctorate in dentistry;

6. National Board scores showing passage of all sections of the examination with a score of 75 or higher;7. Verification of licensure from all states where the applicant has ever held or currently holds a license to practice dentistry;

8. Furnish a background check. The applicant shall be responsible for all fees associated with the performance of a background check.

9. In accordance with O.C.G.A. §50-36-1, all applicants applying for licensure must submit an Affidavit Regarding Citizenship and submit a copy of secure and verifiable documentation supporting the Affidavit with his or her an application.

(5)(4) Those applicants who have received a doctoral degree in dentistry from a dental school not accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor agency, in addition to the information required in subsection (8)(3)(a), (c), and (d) and (e) of this rule must also provide the following in order to complete their application:

(a) Proof of successful completion at an ADA-accredited dental school approved by the board of the last two years of a pre-doctoral program as a full-time student under the conditions required of other full-time students, except as excused or limited in the manner that any other student's participation would be excused or limited by state and federal law, and receipt of the doctor of dental surgery (D.D.S.) or doctor of dental medicine (D.M.D.) degree; and

(b) Certification by the dean of the accredited dental school where the applicant took the required supplementary program specified in O.C.G.A. § 43-11-41(a) setting forth that the applicant has achieved the same level of didactic and clinical competency as expected of a graduate of the school and that the student has completed the last two years of a pre-doctoral program under the conditions required of other full-time students, except as excused or limited in the manner that any other student's participation would be excused or limited by state and federal law.

(6)(5) A certification letter from a dental board or regional testing agency of a passing score of 75 or higher on each section of a clinical licensure examination substantially equivalent to the clinical licensure examination required in Georgia and which was administrated by the dental board or its designated testing agency. A certification letter from the applicant's dental school is not acceptable. Sections of clinical

licensure examinations that include slot preparations of restorative dentistry shall not be deemed substantially equivalent to the sections of clinical licensure examinations required in Georgia. Such scores shall neither be accepted nor recognized by the Board.

(a) Such certification shall state that the examination included procedures performed on human subjects as part of the assessment of clinical competencies and shall have included evaluations in the following areas:

1. periodontics, human subject clinical abilities testing;

2. endodontics, clinical abilities testing;

3. posterior class II amalgam or posterior class II composite preparation and restoration, human subject clinical abilities testing;

4. anterior class III composite preparation and restoration, human subject clinical abilities testing;

5. crown preparation, clinical abilities testing;

6. prosthetics, written or clinical abilities testing;

7. oral diagnosis, written or clinical abilities testing; and

8. oral surgery, written or clinical abilities testing.

(b) Evaluations of restorative dentistry from slot preparations shall not meet the requirements of (5)(a).

(b) (c) In addition to the foregoing requirements to be eligible for licensure consideration by credentials, a license examination after January 1, 1998 shall include:

1. anonymity between candidates and examination raters;

2. standardization and calibration of raters; and

3. a mechanism for post exam analysis.

(c) (d) After a fourth failure of one or more sections of any clinical examination, no further attempts will be recognized by the board for licensure by credentials in Georgia.

(d) (e) All applicants must show passage of a jurisprudence examination on the laws and rules governing the practice of dentistry in the State of Georgia. Such examinations shall be administered in the English language.

(7) Within the first two (2) years of being granted a provisional license by credentials, the applicant must establish full-time clinical practice that is defined as 1,000 hours in the hands on treatment of patients per twelve (12) month period, or the license will be automatically revoked.

(8)(6) Active duty military dentists on federal installations are exempt from the state of practice requirement as contained in subsection (2) of this rule as long the applicant has an active license in an acceptable state and meets all other requirements as set forth in this rule.

(9)(7) Contract employees on Georgia federal installations are exempt from the state of practice requirement as contained in subsection (2) of this rule as long the applicant has an active license in an acceptable state and meets all other requirements as set forth in this rule.

(10)(8) An active duty military dentist or contract employee on a Georgia federal installation who applies for licensure by credentials must provide a letter from the supervising authority/commanding officer at the federal installation. Such letter must include but not be limited to the applicant's general service record, any complaint or disciplinary action as well as continuing education that the credentialing candidate may have obtained.

(11) (9) For the first five biennial renewal periods, the holder of a dental provisional license by credentials must attest to the fact that he or she has maintained full-time clinical practice in the State of Georgia as defined in subsection (1)(c) of this rule.

(12) (10) The Board shall have the authority to refuse to grant a provisional license by credentials to an applicant, or to revoke the provisional license by credentials to a dentist licensed by the Board, or to discipline a dentist holding a provisional license by credentials in accordance with the provisions of O.C.G.A. §§ 43-1-19, 43-11-47.

(11) Upon receipt of license, the applicant by credentials must establish active practice in this State within two years of receiving such license or the license shall be automatically revoked. "Active practice" shall mean a minimum of 500 hours for each full twelve (12) month period of licensure in the hands-on treatment of patients.

Dr. Yeargan made a motion to post Rule 150-8-.01 Unprofessional Conduct Defined. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-8-.01 Unprofessional Conduct Defined.

The Board has the authority to refuse to grant a license to an applicant, or to discipline a dentist or dental hygienist licensed in Georgia if that individual has engaged in unprofessional conduct. For the purpose of the implementation and enforcement of this rule, unprofessional conduct is defined to include, but not be limited to, the following:

(a) Failing to conform to current recommendations of the Centers for Disease Control and Prevention (C.D.C.) for preventing transmission of Human Immunodeficiency Virus, Hepatitis B Virus, and all other communicable diseases to patients. It is the responsibility of all currently licensed dentists and dental hygienists to maintain familiarity with these recommendations, which are considered by the Board to be minimum standards of acceptable and prevailing dental practice. (Copies of the guidelines may be obtained from the Centers for Disease Control, the Department of Human Resources, or from the Board.) (b) Violating any lawful order of the Board:

(c) Violating any Consent Agreement entered into with the Georgia Board of Dentistry or any other licensing board;

(d) Violating statutes and rules relating to or regulating the practice of dentistry, including, but not limited to, the following:

1. The Georgia Dental Practice Act (O.C.G.A. T. 43, Ch. 11);

2. The Georgia Controlled Substances Act (O.C.G.A. T. 16, Ch. 13, Art. 2);

3. The Georgia Dangerous Drug Act (O.C.G.A. T. 16, Ch. 23, Art. 3);

4. The Federal Controlled Substances Act (21 U.S.C.A., Ch. 13);

5. Rules and Regulations of the Georgia Board of Dentistry;

6. Rules of the Georgia State Board of Pharmacy, Ch. 480, Rules and Regulations of the State of Georgia, in particular those relating to the prescribing and dispensing of drugs, Ch. 480-28;

7. Code of Federal Regulations Relating to Controlled Substances (21 C.F.R. Par. 1306);

8. O.C.G.A. T. 31-33 Health Records. <u>A dentist must send a patient a copy of his/her request records upon</u> request where the request complies with O.C.G.A. Title 31-33, et. seq., even if the patient has an

outstanding balance with the dentist, but the patient may be required to pay costs of copying and mailing records and for search, retrieval, certification, and other direct administrative costs related to compliance with the request.

9. The Health Insurance Portability and Accountability Act (Pub. L. 104-191).

(e) Failing to maintain appropriate records whenever controlled drugs are prescribed. Appropriate records, at a minimum, shall contain the following:

1. The patient's name and address;

2. The date, drug name, drug quantity, and diagnosis for all controlled drugs;

3. Records concerning the patient's history.

(f) Prescribing controlled substances for a habitual drug user in the absence of substantial dental justification:

(g) Prescribing drugs for other than legitimate dental purposes -:

(h) Any departure from, or failure to conform to, the minimum standards of acceptable and prevailing dental practice. Guidelines to be used by the Board in defining such standards may include, but are not restricted to:

1. Diagnosis. Evaluation of a dental problem using means such as history, oral examination, laboratory, and radiographic studies, when applicable.

2. Treatment. Use of medications and other modalities based on generally accepted and approved indications, with proper precautions to avoid adverse physical reactions, habituation or addiction.

3. Emergency Service. Dentists shall be obliged to make reasonable arrangements for the emergency care of their patients of record. For purposes of this rule, a "patient of record" is defined as a patient who has received dental treatment on at least one occasion within the preceding year.

4. Records. Maintenance of records to furnish documentary evidence of the course of the patient's medical/dental evaluation, treatment and response. A dentist shall be required to maintain a patient's complete dental record, which may include, but is not limited to, the following: treatment notes, evaluations, diagnoses, prognoses, x-rays, photographs, diagnostic models, laboratory reports, laboratory prescriptions (slips), drug prescriptions, insurance claim forms, billing records, and other technical information used in assessing a patient's condition. Notwithstanding any other provision of law, a dentist shall be required to maintain a patient's complete treatment record for no less than a period of ten (10) years from the date of the patient's last office visit.

(i) Practicing fraud, forgery, deception or conspiracy in connection with an examination for licensure or an application;

(j) Knowingly submitting any misleading, deceptive, untrue, or fraudulent misrepresentation on a claim form, bill or statement to a third party;

(k)_Knowingly submitting a claim form, bill or statement asserting a fee for any given dental appliance, procedure or service rendered to a patient covered by a dental insurance plan, which fee is greater than the fee the dentist usually accepts as payment in full for any given dental appliance, procedure or service: (l) Abrogating or waiving the co-payment provisions of a third party contract by accepting the payment

received from a third party as payment in full, unless the abrogation or waiver of such co-payment of <u>or</u> the intent to abrogate or waive such copayment is fully disclosed, in writing, to the third party at the time the claim is submitted for payment. For the purpose of this rule, a "third party" is any party to a dental prepayment contract that may collect premiums, assume financial risks, pay claims, and/or provide administrative service:

(m) Falsifying, altering or destroying treatment records in contemplation of an investigation by the Board or a lawsuit being filed by a patient;

(n) Committing any act of sexual intimacy, abuse, misconduct or exploitation related to the licensee's practice of dentistry or dental hygiene;

(o) Delegating to unlicensed or otherwise unqualified personnel duties that may only be lawfully performed by a dentist or dental hygienist;

(p) Using improper, unfair or unethical measures to draw dental patronage from the practice of another licensee-:

(q) <u>Termination of Terminating</u> a dentist/patient relationship by a dentist, unless notice of the termination is provided to the patient. A "dentist/patient relationship" exists where a dentist has provided dental treatment to a patient on at least one occasion within the preceding year.

(1)1. "Termination of a dentist/patient relationship by the dentist" means that the dentist is unavailable to provide dental treatment to a patient, under the following circumstances:

(i) The office where the patient has received dental care has been closed permanently or for a period in excess of (30) days; or

(ii) The dentist discontinues treatment of a particular patient for any reason, including non-payment of fees for dental services, although the dentist continues to provide treatment to other patients at the office location.

(2)2. The dentist who is the owner or custodian of the patient's dental records shall mail notice of the termination of the dentist's relationship to patient, which notice shall provide the following:

(i) The date that the termination becomes effective, and the date on which the dentist/patient relationship may resume, if applicable;

(ii) A location at which the patient may receive emergency dental care for at least (30) days following the termination of the dentist/patient relationship;

(iii) A statement of further dental treatment required, if any; and

(iv)(ii) A means for the patient to obtain a copy of his of <u>or</u> her dental records. The notice shall be mailed at least fourteen (14) days prior to the date of termination of the dentist/patient relationship, unless the termination results from an unforeseen emergency (such as sudden injury or illness), in which case the notice shall be mailed as soon as practicable under the circumstances.

(r) Knowingly certifying falsely to the accuracy or completeness of dental records provided to the Board.

Dr. Godfrey commented that the Rules Committee tabled Rule 150-8-.02 Fee Splitting.

Dr. Goggans made a motion to post Rule 150-9-.01 General Duties of Dental Assistants. Dr. Yeargan seconded and the Board voted unanimously in favor of the motion.

Rule 150-9-.01 General Duties of Dental Assistants.

(1) A dental assistant shall be defined as one who is employed in a dental office to perform certain duties that assist the dentist. It is expected that the dental assistant will be familiar with the operations performed in the conduct of a dental practice; specifically, the sterilization of instruments, the general hygiene of the mouth, secretarial work, making appointments and bookkeeping. Under no circumstances may he or she perform any of the operations catalogued as dental hygiene treatments in Board Rule 150-5-.03(5). (2) Direct supervision and control as it pertains to a dental assistant shall mean that a dentist licensed in Georgia is in the dental office or treatment facility, personally diagnoses the condition to be treated, personally authorizes the procedures and remains in the dental office or treatment facility while the procedures are being performed by the dental assistant and, before dismissal of the patient, evaluates the performance of the dental assistant.

(3) In addition to routine duties, the general duties identified below may be delegated to dental assistants under the direct supervision of a licensed dentist. These duties may only be delegated in those instances when they are easily reversible and will not result in increased risk to the patient:

(a) Make impressions for diagnostic models and opposing models.

(b) Place and expose radiographs after completing the training required by Ga. Comp. R. & Regs. 290-5-

22-.04 entitled X-Rays in the Health Arts.

(c) Remove sutures - other than wire sutures.

(d) Remove periodontal dressing.

(e) Place and remove rubber dams.

(f) Apply topical anesthetic.

(g) Remove visible excess cement from supramarginal areas of dental restorations and appliances with non-mechanical hand instruments.

(h) Fabricate extraorally temporary crowns and bridges.

(i) Cement temporary crowns and bridges with intermediate cement.

(j) Remove temporary crowns and bridges seated with intermediate cement.

(k) Place intracoronal temporary restorations using intermediate cement.

(1) Place drying and deoiling agents prior to the cementation of permanent crowns and bridges.

(m) Remove dry socket medication.

(n) Place and take off a removable prosthesis with a pressure sensitive paste after the appliance has been initially seated by the dentist.

(o) Etch unprepared enamel.

(p) Polish the enamel and restorations of the anatomical crown; however, this procedure may only be executed through the use of a slow speed handpiece (not to exceed 10,000 rpm), rubber cup and polishing agent. This procedure shall in no way be represented to patient as a prophylaxis. This procedure shall be used only for the purpose of enamel preparation for:

1). Bleaching,

2). Cementation of fixed restorations,

3). Bonding procedures including supramarginal enamel restorations after removal of orthodontic appliances. No direct charge shall be made to the patient for such procedure.

(q) Dry canals with absorbent points and place soothing medicaments (not to include endodontic

irrigation); and place and remove temporary stopping with non-mechanical hand instruments only.

(r) Place matrix bands and wedges.

(s) Select, pre-size and seat orthodontic arch wires with brackets which have been placed by the dentist. Adjustment of the arch wire may only be made by the dentist.

(t) Select and pre-size orthodontic bands which initially must be seated by the dentist.

(u) Place and remove pre-treatment separators.

(v) Cut and tuck ligatures, remove ligatures and arch wires, remove loose or broken bands.

(w) Remove and recement loose bands that previously have been contoured and fitted by a dentist, but only after a dentist has examined the affected tooth and surrounding gingival and found no evidence of pathology.

(x) Perform phlebotomy and venipuncture procedures after appropriate training is acquired.

(y) Use a rubber cup prophy on a patient with primary dentition.

(18). A dental assistant may only begin providing rubber cup prophies after the dental assistant has completed 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.

Dr. Goggans made a motion to post Rule 150-9-.02 Expanded Duties of Dental Assistants. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-9-.02 Expanded Duties of Dental Assistants.

(1) To meet the requirements of an expanded duty dental assistant, a dental assistant must have a high school diploma, or the equivalent thereof, proof of current CPR certification and a certificate documenting that he or she has successfully completed the course pertaining to the specific duties outlined in that certificate. Only those expanded duties, which are listed on the certificate(s), may be performed by an expanded duty dental assistant. An expanded duty dental assistant certificate may be issued by an accredited dental assisting program, a dental hygiene school, a dental school or a professional association recognized and approved by the Georgia Board of Dentistry to a candidate who has successfully completed the required certificate courses (each of which must be a minimum of four hours) from an accredited dental assisting program, a dental hygiene school, a dental school or professional association recognized and approved by the Georgia Board of Dentistry and met all other requirements of an expanded duty assistant; and completed an examination demonstrating competency in specific duties that is administered by a licensed dentist on behalf of the accredited dental assistant program, dental hygiene school, dental school or professional association <u>recognized</u> and approved by the Georgia Board of Dentistry and met all other requirements of an expanded duty assistant; and completed an examination demonstrating competency in specific duties that is administered by a licensed dentist on behalf of the accredited dental assistant program, dental hygiene school, dental school or professional association <u>recognized</u> and approved by the Georgia Board of the accredited dental assistant program, dental hygiene school, dental school or professional association <u>recognized</u> and approved by the Georgia Board of Dentistry.

(2) Eligibility for taking said courses requires that the candidate meet at least one of the following criteria:(a) Possess current certification that the candidate is a Certified Dental Assistant.

(b) Be a graduate of a one (1) year accredited dental assisting program or a dental assisting program approved by the Board or be eligible for graduation.

(c) Have been employed as a chair side assistant by a licensed dentist for a continuous six (6) month period within the previous three (3) years. (Note: An expanded duties certificate would be issued to a candidate only upon proper proof of graduation.)

(3) The employer of the expanded duty assistant shall have readily available in the dental office a copy of the certificate(s) issued from the sponsor of the accredited course(s) of study to the expanded duty dental assistant. The expanded duties specific to the course(s) taken and in which [a] certificate(s) [has/have] been issued may be delegated to dental assistants, who are performing their duties under the direct supervision of a licensed dentist. The following expanded duties may be delegated to those assistants meeting the educational requirements established by Board Rule 150-9-.02(1) and possessing a certificate(s) of the course(s) taken delineating the duties specific to that course.

(a) Apply desensitizing agents to root surfaces of teeth and prepared dentinal surfaces of teeth prior to cementation of temporary restorations and crowns, bridges, or inlays.

(b) Place cavity liner, base or varnish over unexposed pulp.

(c) Intraoral fabrication of temporary crowns and bridges. All such adjustments must be performed extraorally.

(d) Perform face bow transfer.

(e) Make impressions to be used to repair a damaged prosthesis.

(f) Place periodontal dressing.

(g) Redressing (not initial placement of dressing) and removing dressing from alveolar sockets in postoperative osteitis when the patient is uncomfortable due to the loss of dressing from the alveolar socket in a diagnosed case of post-operative osteitis.

(h) Make impressions to be used to fabricate a night guard (bruxism or muscle relaxation appliance). All adjustments must be performed extraorally. Final adjustment must be made by the dentist.

(i) Monitor the administration of nitrous oxide/oxygen; turn off nitrous oxide/oxygen at the completion of the dental procedure and make adjustments to the level of nitrous oxide/oxygen, but only following the specific instructions of the dentist.

(j) Apply topical anticariogenic agents.

(k) Apply pit and fissure sealants, and primer and bonding agents to etched enamel or dentin; and lightcure with a fiber-optic light source (not to include the use of a laser device).

(1) Packing and removing retraction cord, as prescribed by the dentist, so long as said cord is used solely for restorative dental procedures.

(m) Changing of bleaching agent, following initial applications by the dentist, during the bleaching process of vital and non-vital teeth after the placement of a rubber dam; and applying the fiber-optic light source of a curing light for activation of the bleach (not to include the use of a laser device).

(n) Rebond brackets after a licensed dentist has examined the affected tooth and surrounding gingiva and found no evidence of pathology.

(o) Remove bonded brackets with hand instruments only.

(p) Make impressions for passive orthodontic appliances.

(q) Apply primer and bonding agents to etched enamel or dentin; and light cure with fiber-optic light source (not to include use of a laser device).

(r) Take and record vital signs.

(s) Size and fit stainless steel crowns on a primary tooth only.

(t) Place springs on wires.

(u) Place hooks on brackets.

(v) Remove loose or broken bonds.

(w) Remove ligature and arch wires.

(x) Band, select, and pre-size arch wires and place arch wires after final adjustment and approval by the dentist.

(y) Select, pre-fit, cement, cure, and remove ortho bands or brackets.

(z) Place and remove pre-treatment separators.

(aa) Scan dDigital scans for fabrication orthodontic appliances and models.

A motion was made by Ms. Bynum, seconded by Dr. Nalley, and the Board voted that the formulation and adoption of these rule amendments do not impose excessive regulatory cost on any licensee and any cost to comply with the proposed amendments cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

In the same motion, Board also voted that it is not legal or feasible to meet the objectives of the relevant code sections to adopt or implement differing actions for businesses as listed at O.C.G.A§ 50-13-4(a)(3)(A), (B), (C) and (D). The formulation and adoption of these amendments will impact every licensee in the same manner, and each licensee is independently licensed, owned and operated and dominant in the field of dentistry.

Dr. Frazier from the Dental College of Georgia asked questions and provided comments regarding a dental application. The Board informed the representative that applications were confidential and could not be discussed in Open Session.

Education Committee Report – Dr. Tom Godfrey

No report.

Long Range Planning Committee Report – Dr. Steve Holcomb

No report.

CRDTS Steering Committee – Dr. Logan Nalley

No report.

<u>IP Committee Report – Dr. Richard Bennett</u>

No report.

EDDA Review Committee – Dr. Greg Goggans

No report.

Executive Director's Report – Ms. Tanja Battle

Ms. Battle stated that at the Board's November meeting it discussed changing the volunteer application to be more streamlined. She reported that there are some issues in the rules that will not allow for some of the streamlining as previously discussed and would like to work with the Rules Committee on those issues.

Ms. Battle reported that the board office did disseminate a copy of the survey out to all licensed dentists, as mandated by O.C.G.A. § 43-11-74(q) regarding General Supervision of Hygienists-Practice Settings. Ms. Battle stated that responses to the survey can be faxed or emailed back to the address on the form. Dr. Goggans asked all of the associations present to remind its members to send this form to the Board office.

Ms. Battle stated that the board office has been receiving many questions from hygienists regarding liability insurance as that is now a requirement. She stated they are asking whether they have to carry individually or does it have to be under the dentist or practice. Dr. Godfrey responded that would be for the market to provide and not for the board to dictate.

Dr. Logan Nalley made a motion and Dr. Bert Yeargan seconded and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. § 43-1-19(h)(2), §43-11-47(h) and §43-1-2(k) to deliberate and receive information on applications, investigative reports, and the Assistant Attorney General's report. Voting in favor of the motion were those present who included Ms. Becky Bynum, Dr. Tom Godfrey, Dr. Greg Goggans, Ms. Wendy Johnson, Dr. Logan Nalley, Dr. Antwan Treadway and Dr. Bert Yeargan.

Executive Session

Applications

- A.S.A.D.
- A.M.A.
- J.K.W.
- D.Q.T.T.
- L.M.H.
- M.S.D.
- B.T.S.
- L.Y.M.
- H.O.G.
- N.K.R.
- M.A.W.

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

Correspondences

- B.G.
- J.I.G.

Investigative Committee Report

Report presented:

- DENT170090
- DENT170137
- DENT170143
- DENT180094
- DENT09023
- DENT160391
- DENT180011
- DENT180013
- DENT180022
- DENT180025
- DENT180036
- DENT180037
- DENT180041
- DENT180052
- DENT180059
- DENT160334
- DENT110146

<u>Executive Director's Report – Ms. Tanja Battle</u>

No report.

Licensure Overview Committee Appointments/Discussion Cases

- L.M.F.
- T.L.W.
- A.M.W.

Attorney General's Report – Mr. Bryon Thernes

Mr. Thernes discussed the following case:

• J.J./H.S.A.

Mr. Thernes presented the following order for acceptance:

• C.E.M.

Legal Services – Ms. Kimberly Emm

No report.

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

Open Session

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

Applications

		A 1 1
• A.S.A.D.	Dental Exam Applicant	Approved application
• A.M.A.	Dental Exam Applicant	Approved application
• J.K.W.	Dental Exam Applicant	Approved application
• D.Q.T.T.	Dental Exam Applicant	Approved application
• L.M.H.	Dental Exam Applicant	Approved application
• M.S.D.	Dental Exam Applicant	Approved application
• B.T.S.	Dental Hygiene Exam Applicant	Schedule to meet with the Licensure Overview Committee
• L.Y.M.	Dental Exam Applicant	Approved application
• H.O.G.	Dental Credentials Applicant	Schedule to meet with the Licensure Overview Committee
• N.K.R.	Dental Hygiene Credentials	Approved Application
• M.A.W.	Dental Credentials Applicant	Approve pending receipt of additional information
• E.C.J.	Dental Hygiene Reinstatement	Approved application
• H.M.C.	Dental Hygiene Reinstatement	Approved application
• T.B.T.	Dental Hygiene Reinstatement	Refer to Legal Services
• R.L.	Dentist Reinstatement	Approved application
• D.P.H.	Dentist Reinstatement	Approved application
• C.W.T.	Initial Conscious Sedation	Approved for provisional permit
• W.E.D.	Initial Enteral/Inhalation	Table pending receipt of additional information
• R.L.R.	Initial Conscious Sedation	Evaluation approved pending receipt of additional information
• A.Y.K.	Inactive Status Applicant	Approved application
• C.S.R.	Inactive Status Applicant	Approved application
• K.M.E.	Inactive Status Applicant	Approved application
• M.W.C.	Inactive Status Applicant	Approved application
• M.A.S.	Inactive Status Applicant	Approved application
• P.S.B.	Inactive Status Applicant	Approved application
• R.E.T.	Inactive Status Applicant	Approved application

• J.N.J.

Dental Credentials Applicant

Approved application

Correspondences

- B.G.
- J.I.G.

Req regarding credentials licensure Denied request Request regarding renewal Schedule to me

Schedule to meet with the Licensure Overview Committee

Investigative Committee Report

Report presented:

Complaint Number	Allegations	Recommendation
DENT170090	Quality of Care/Substandard Practice	Close - No Action
DENT170137	Quality of Care/Substandard Practice	Close - No Action
DENT170143	Quality of Care/Substandard Practice	Close - No Action
DENT180094	Unprofessional Conduct	Investigator McNeal to obtain statement from dentist
DENT09023	Quality of Care/Substandard Practice	Accept CO Draft presented by AG
DENT160391	Quality of Care/Substandard Practice	Proceed as originally referred
DENT180011	Quality of Care/Substandard Practice	Close No Action
DENT180013	Malpractice	Close No Action
DENT180022	Quality of Care/Substandard Practice	Close No Action
DENT180025	Quality of Care/Substandard Practice	Close No Action
DENT180036	Malpractice	Close No Action
DENT180037	Quality of Care/Substandard Practice	Send for Endo Peer Review
DENT180041	Quality of Care/Substandard Practice	Close No Action
DENT180052	Quality of Care/Substandard Practice	Close No Action
DENT180059	Quality of Care/Substandard Practice	Close No Action
DENT160334	Malpractice	Accept MIT Results & Close No Action
DENT110146	Quality of Care/Substandard Practice	Accept MIT Results; Case already closed

Executive Director's Report – Ms. Tanja Battle

No report.

Licensure Overview Committee Appointments/Discussion Cases

• L.M.F.	Dental Exam Applicant	Approved application
• T.L.W.	DH Exam Applicant	Approved application
• A.M.W.	DH Renewal	Approve pending receipt of additional information

<u> Attorney General's Report – Mr. Bryon Thernes</u>

Mr. Thernes discussed the following case:

• J.J./H.S.A. Update provided

Mr. Thernes presented the following order for acceptance:

• C.E.M. Public consent order to be accepted and signed with express permission upon receipt of the original

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

Discussion was held by Dr. Godfrey in regards to the recommendation for W.E.D. Dr. Godfrey stated the application was satisfactory because the applicant filled out and submitted all pages germane to his application. Dr. Treadway stated the last page should have been submitted as a blank page nonetheless. Dr. Godfrey asked the Board if there was a motion to approve the application as is or require the applicant to send in the blank page. Dr. Yeargan made a motion directing the Board staff to write the applicant and require that he submit the blank page. The permit will be issued, upon receipt, by the Board office. Dr. Nalley seconded and the Board voted in favor of the motion.

Miscellaneous

Dr. Yeargan made a motion to change the time for the December 4, 2017 conference call from 12:00 p.m. to 1:15 p.m. Ms. Bynum seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Jeffrey N. James: Dr. Nalley made a motion to grant the waiver based on the fact that he is a Medical Doctor, singularly qualified to fulfil a desperately needed role in the State Health System. Ms. Johnson seconded and the Board voted unanimously in favor of the motion.

Ms. Bynum requested the Board make a referral to the Rules Committee to add a requirement for hygienists to take additional medical emergency training through continuing education. Dr. Godfrey responded by asking Ms. Bynum to put her request in writing.

With no further business, the Board meeting adjourned at 12:40 p.m.

The next scheduled meeting of the Georgia Board of Dentistry will be held on Friday, January 12, 2018, at 10:00 a.m. at the Department of Community Health's office located at 2 Peachtree Street, N.W., 5th Floor, Atlanta, GA 30303.

Minutes recorded by Brandi Howell, Business Support Analyst I Minutes edited by Tanja D. Battle, Executive Director