The following Board members were present:
Dr. Tom Godfrey, President
Dr. Greg Goggans, Vice-President
Ms. Becky Bynum (departed @ 11:30 a.m.)
Dr. Richard Bennett
Dr. Tracy Gay
Dr. Steve Holcomb
Ms. Wendy Johnson
Dr. Logan Nalley
Dr. Antwan Treadway
Dr. Bert Yeargan

Staff present:
Tanja Battle, Executive Director
Bryon Thernes, Assistant Attorney General
Ryan McNeil, Chief Investigator
Anil Foreman, Attorney
Brandi Howell, Business Support Analyst I

Visitors:
Jay Morgan, PDS
Ryan Loke, PDS
John Watson, ADSO
Valerie Dangler-Ferro, GDHA
Kendra McKune, GDHA
Charles Craig, GDHA
Carol Levebvre, DCG
Heather Breeden, GDA
James E. Barron, GDS
Jesse Wethington, GSO
Fu-Ting Chang

Dr. Godfrey established that a quorum was present and called the meeting to order at 10:14 a.m.

Open Session

Introduction of Visitors
Dr. Godfrey welcomed the visitors. The Board recognized Dr. Bert Yeargan in appreciation of the job he did as Board President from July 1, 2016 – June 30, 2017.

Approval of Minutes
Dr. Nalley made a motion to approve the Public Session minutes for the June 2, 2017 meeting. Dr. Bennett seconded and the Board voted unanimously in favor of the motion.

Dr. Nalley made a motion to approve the Executive Session minutes for the June 2, 2017 meeting. Dr. Treadway seconded and the Board voted unanimously in favor of the motion.

Licenses to Ratify
Dr. Bennett made a motion to ratify the list of licenses issued. Ms. Bynum seconded and the Board voted unanimously in favor of the motion.

Correspondence from Christopher Lea
The Board viewed this correspondence for informational purposes only.
Correspondence from Jonathan Balloch
The Board viewed this correspondence for informational purposes only.

Correspondence from Dr. William B. Gardner
The Board considered this correspondence requesting to know if the Board has specific recommendations for premedication of patients with joint replacements for dental procedures where bleeding is involved. Dr. Holcomb made a motion to direct staff to respond to Dr. Gardner by stating the Board recommends he follow the latest ADA guidelines regarding such. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Variance from Tony Tran
Dr. Nalley made a motion to deny the rule variance petition. Dr. Bennett seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Jacob W. Gowans
Dr. Nalley made a motion to deny the rule waiver petition. Dr. Bennett seconded and the Board voted unanimously in favor of the motion.

General – Dr. Tom Godfrey
No report.

CE Audit Committee Report – Dr. Richard Bennett
Dr. Bennett reminded everyone that 2017 is a renewal year. He stated it was important to know what is required for the renewal of one’s dental or hygiene license.

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

Credentials Committee Report – Dr. Greg Goggans
No report.

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

Examination Committee Report – Dr. Bert Yeargan
Dr. Holcomb updated the Board on the CDCA’s Buffalo Model ADEX Examination.

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 reported that the Rules Committee met earlier that morning and recommended moving several rules forward to the Board.
Dr. Holcomb made a motion to post Rules 150-5-.03 Supervision of Dental Hygienists, 150-7-.04 Dental Provisional Licensure by Credentials, 150-7-.05 Dental Hygiene Provisional Licensure by Credentials, 150-8-.01 Unprofessional Conduct. Defined, 150-8-.02 Fee-Splitting, 150-14-.02 Fabrication of Dental Appliances, Caps, Coverings, Prostheses and Cosmetic Coverings Is Practice of Dentistry, 150-9-.01 General Duties of Dental Assistants, and 150-9-.02 Expanded Duties of Dental Assistants. Dr. Treadway seconded and the Board voted unanimously in favor of the motion.

**Rule 150-5-.03 Supervision of Dental Hygienists.**

(1) Definitions.

(a) “Authorizing dentist” shall mean a dentist licensed to practice in Georgia who permits a dental hygienist to practice under general supervision.

(b) “Dental hygiene duties” and “dental hygiene services” shall mean those tasks which a dental hygienist may lawfully perform under O.C.G.A. §43-11-74 and this Rule.

(c) “Dental hygienist” means an individual licensed to practice dental hygiene in Georgia. Any reference to a dental hygienist in this rule means a Georgia licensed dental hygienist.

(d) “Dental screening” means a visual assessment of the oral cavity without the use of x-rays, laboratory tests, or diagnostic models to determine if it appears that a more thorough clinical examination and diagnosis should be conducted by a licensed dentist.

(e) “Dentist” shall mean an individual licensed to practice dentistry in Georgia.

(f) “Direct supervision” means that a licensed dentist is in the dental office or treatment facility, personally diagnoses the condition to be treated, personally authorizes the procedure and remains in the dental office or treatment facility while the procedure is being performed by the dental hygienist, and before dismissal of the patient, examines the patient.

(g) “General supervision” means that a licensed dentist has authorized the delegable duties of a dental hygienist but does not require that a licensed dentist be present when such duties are performed.

(2) Direct supervision as it pertains to procedures delegated to a dental hygienist 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 hygienist and, before dismissal of the patient, examines the patient.

(3) No dentist shall be required to authorize a dental hygienist to perform dental hygiene duties under general supervision, and no part of this Rule shall be construed as to establish independent dental hygiene practice.

(3) A dental hygienist shall perform his or her duties only under the direct supervision of a duly licensed dentist who is licensed to practice in the State of Georgia, except where otherwise provided in O.C.G.A. §43-11-74 and this rule.

(a) (4) The requirement of direct supervision shall not apply to:

(a) The educational training of dental hygiene students at an institution approved by the Board and the Commission on Dental Accreditation of the American Dental Association, or its successor agency.

(b) The performance of dental hygiene services duties at approved dental facilities of the Department of Public Health, county boards of health, or the Department of Corrections, or the performance of dental hygiene duties by personnel of the Department of Public Health or county boards of health at approved off-site locations. A supervising dentist shall assume responsibility for authorizing services that may be performed by dental hygienists as defined in subsections (5)(a) through (g) of this rule, at such locations, either in person, through video conferencing or by written standing orders or Department of Public Health, county boards of health, or the Department of Corrections protocols.

(c) Approved dental facilities of the Department of Public Health, county boards of health and Department of Corrections shall submit to the Board of Dentistry for approval written protocol which identifies how duties are delegated to dental hygienists. Changes to such approved protocol must be resubmitted to the Board of Dentistry for review and approval.
(d) The requirement of direct supervision shall not apply to the performance of dental hygienists providing dental screenings in settings which include: schools, hospitals and clinics, state, county, local, and federal public health programs; federally qualified health centers; volunteer community health settings; senior centers; family violence shelters, as defined in O.C.G.A. §19-13-20; and free health clinics defined in O.C.G.A. §51-1-29.4. Other health fair settings must be pre-approved by the board.

1. School settings.
   (i) School settings shall include only schools that are Title I schools under the federal Elementary and Secondary Education Act, schools in which at least 65% of the student population is eligible for free or reduced price lunch under federal guidelines, Head Start programs, and Georgia’s Pre-K Program.
   (ii) In school settings, a dental hygienist may apply topical fluoride and perform the application of sealants and oral prophylaxis under general supervision, with written permission of the student’s parent or guardian. A dental hygienist may also, without prior written permission of the student’s parent or guardian, provide oral hygiene instruction and counseling.
   (iii) A dental hygienist and the authorizing dentist shall maintain the confidentiality of any records related to services provided to a student under subparagraph (4)(c) in compliance with laws including without limitation the federal Family Education Rights and Privacy Act of 1974, 20 U.S.C. Section 1232g.

2. Other facilities including hospitals; nursing homes; long-term care facilities; rural health clinics; federally qualified health centers, health facilities operated by federal, state, county or local governments; hospices; family violence shelters as defined in O.C.G.A. §19-13-20; and free health clinics defined in O.C.G.A. §51-1-29.4.
   (i) In the above-referenced facilities, a dental hygienist may apply topical fluoride and perform the application of sealants and oral prophylaxis under general supervision.

3. A dental hygienist performing duties under subparagraphs (4)(c)(1.) or (4)(c)(2.) shall:
   (i) Not perform any dental hygiene services on a patient that has dental pain or clearly visible evidence of widespread dental disease. The dental hygienist shall immediately refer such patient to the authorizing dentist for clinical examination and treatment. The license dental hygienist shall notate such patient’s file, and the patient shall not be eligible to receive dental hygiene services under subparagraphs (4)(c)(1.) or (4)(c)(2) until a dentist provides written authorization that such services may be performed on the patient.
   (ii) Prior to providing any dental hygiene services, obtain, study, and comprehend the school’s or facility’s protocols and procedures regarding medical emergencies and implement and comply with such protocols and procedures if a medical emergency arises during the provision of dental hygiene services; and
   (iii) Provide to each patient receiving such services written notice containing:
      (I) The name and license number of the dental hygienist and the authorizing dentist;
      (II) Any dental hygiene issues that the dental hygienist identified during the performance of dental hygiene duties. If dental hygiene services are not performed on a patient under subparagraph (4)(c)(3.).(i), the written notice shall include a statement that the patient is not eligible to receive dental hygiene services until a clinical examination is performed by a dentist, and a dentist provides written authorization that such services may be performed;
      (III) A statement advising each patient who receives dental hygiene services to seek a more thorough clinical examination by a dentist within 90 days, unless the authorizing dentist performed a clinical examination of the patient.
   (iv) Make all reasonable efforts to provide such written notice as required in subparagraph (4)(c)(iii) to parents or legal guardians of minors or incapacitated adults who receive dental hygiene services and to the long-term care facility or nursing home for residents of such facilities who receive dental hygiene services, as applicable.
   (v) Not charge a fee for a dental screening provided under subparagraph (4)(c), except where provided by an employee of the Department of Public Health or county boards of health. However, these fees must be paid directly to the Department of Public Health or that county board of health and not to the dental hygienist who performed the screening.
(vi) Not require a school or facility receiving dental hygiene services under subparagraphs (4)(c)(1.) and (4)(c)(2.) to purchase any equipment.

(5) General Supervision in a Private Office Setting.

(a) A dental hygienist may perform only the following functions under general supervision:
1. Application of sealants and oral prophylaxis and assessment;
2. Fluoride treatment;
3. Oral hygiene instruction and education; and
4. Exposure and processing of radiographs if provided for by specific standing orders of the authorizing dentist, including any protocols regarding urgent dental issues that arise.

(b) A dentist in a private dental office setting may authorize general supervision of a dental hygienist only upon meeting the following criteria:
1. A new patient of record must be clinically examined by the authorizing dentist during the initial visit;
2. A patient must be examined by the authorizing dentist at a minimum of twelve-month intervals; and
3. A patient must be notified in advance of the appointment that the patient will be treated by the dental hygienist under general supervision without the authorizing dentist being present or being examined by the authorizing dentist.

(6) A dental hygienist performing dental hygiene services under general supervision shall have at least two (2) years of experience in the practice of dental hygiene, shall be in compliance with the continuing education requirements under O.C.G.A. §43-11-73.1 and the cardiopulmonary resuscitation certification requirements under O.C.G.A. §43-11-73, shall be licensed in good standing, and shall maintain coverage under a professional liability occurrence or claims insurance policy with a policy limit with a minimum of $1,000,000.

(7) It shall be in the sole discretion of the authorizing dentist as to whether to require an initial examination of the patient prior to the performance by a dental hygienist of dental hygiene services under general supervision.

(8) A dentist may only authorize up to four dental hygienists total to provide dental hygiene services in any setting or number of settings at any one time. A dentist authorizing one or more dental hygienists to provide dental hygiene services under (4)(c)(1.) and (4)(c)(2.) shall practice dentistry and treat patients in a physical and operational dental office located in this State within 50 miles of the setting in which the dental hygiene services are to be provided under general supervision.

(9) Dental hygiene services provided by dental hygienists in mobile dental vans shall always be provided under direct supervision.

(10) In addition to routine duties and the procedures of any of the operations or procedures authorized in O.C.G.A. §43-11-74, the following activities may be performed by a dental hygienist working under the direct supervision of a dentist:
(a) All the duties that are usually performed by a dental assistant pursuant to Title 43, Chapter 11, Article 4 of the Official Code of Georgia Annotated and Chapter 150-9 of the Rules of the Georgia Board of Dentistry, under the limitations and stipulations set forth in Title 43, Chapter 11, Article 3 of the Official Code of Georgia Annotated and Chapter 150-5 of the Rules of the Georgia Board of Dentistry.
(b) Take and mount oral x-rays;
(c) Apply medications and/or solutions approved by the Board and prescribed by the dentist that can be applied by methods approved by the Board, be that by irrigation, tray, or insertion of bioresorbable materials;
(d) Remove calcareous deposits, secretions, and stains from the surfaces of teeth. Ultrasonic technologies are authorized for use by dental hygienists;
(e) Utilize techniques and materials necessary for the application of sealant(s) to pits of and fissures of teeth;
(f) Perform root planing and curettage with hand instruments; and
(g) Perform periodontal probing.
Nothing in these rules shall be construed as authorizing dental hygienists to utilize other techniques in the course of the performance of their duties, otherwise authorized by these rules. Only dentists licensed by the Georgia Board of Dentistry shall be authorized to perform procedures involving laser technology which alters tissue, creates thermal effect, or is intended to cut, coagulate, photocoolagulate, vaporize, or ablate essentially any soft or hard tissues of the body. Additionally, only dentists licensed by the Board shall be authorized to perform procedures utilizing air abrasive technology, which is normally intended for cavity preparation or enamel removal. This is to be distinguished from "micro etching" and "air polishing" technologies which are intended for stain removal and roughening the surfaces of enamel to enhance bonding, similar to acid etching, (i.e., Micro etching and air polishing are technologies authorized for use by dental hygienists).

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. Neither clinical practice through training programs nor during periods of residency do not qualifies as full-time clinical practice. 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.
(d) “Active Dental License” is defined as an unencumbered 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) 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.
(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.

(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 (e)(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.

(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).

(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.

(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.

(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) 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.

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.

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.

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.

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.

Rule 150-7-.05 Dental Hygiene 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 dental hygiene in the State of Georgia granted to individuals licensed to practice dental hygiene in another state who have not met all of the requirements for a regular dental hygiene license by examination but who have met equivalent requirements for the practice of dental hygiene as set forth in O.C.G.A. § 43-11-71.1 and by board rule.
(c) “Full Time Clinical Practice” means a minimum of 1,000 hours for each twelve (12) month period immediately preceding the date of the application in the hands-on treatment of patients.
(4)(d) “Active Dental Hygiene License” is defined as an unencumbered license to practice dental hygiene held by an individual without restrictions.

(5)(e) “Full Time Clinical Faculty” means a minimum of 1,000 hours per year in the teaching of clinical dental hygiene skills at an ADA-accredited dental hygiene school/program.

(6)(2) Only those applicants licensed and currently engaged in full-time clinical practice as defined in subsection (3)(1)(e) 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.

(7) The board may, in its discretion, grant a provisional license by credentials to dental hygienists licensed in another state.

(8)(3) In addition to the requirements set forth in O.C.G.A. § 43-11-71.1, an applicant for a provisional license by credentials must also meet the following requirements:

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

(b) Must have received a dental hygiene degree from a dental hygiene college or 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, if any.

(c) Applicants must have been in full time clinical practice, as defined in sub-section (3)(1)(e) of this rule; full-time clinical faculty as defined in sub-section (5)(1)(e) of this rule; or a combination of both for each of the two 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) The applicant must meet all requirements for licensure set forth in Board Rules 150-5.02, 150-5.03, 150-5.04, and 150-5.05.

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

(g) Within the first two (2) years of being granted a provisional license by credentials, an applicant must establish full-time dental hygiene clinical practice which is defined in subsection (3) of this rule or the license will be automatically revoked.

(h)(f) All applicants must show passage of all sections with a score of 75 or higher, or its equivalent score, on a clinical examination administered by the board or testing agency designated and approved by the board and a jurisprudence examination on the laws and rules governing the practice of dental hygiene in the State of Georgia. Such examinations shall be administered in the English language.

(i) After a fourth (4th) attempt of one or more sections of any clinical examination, no further attempts will be recognized by the board for licensure by credentials in Georgia.

(9)(4) Active duty military dental hygienists on federal installations are exempt from the state of practice requirement as contained in subsection (6)(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)(5) Contract employees on Georgia federal installations are exempt from the state of practice requirement as contained in subsection (6)(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.

(11)(6) These exempt applicants. An active duty military dental hygienist 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.

(12) For the first five biennial renewal periods, the holder of a dental hygiene 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 (3) of this rule.

(13)(7) 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 dental hygienist licensed by the Board,
or to discipline a dental hygienist holding a provisional license by credentials in accordance with the provisions of O.C.G.A. §43-11-72.

(8) 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.

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. A dentist must send a patient a copy of his/her request upon 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.

(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 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 services.

(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) Termination of 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) "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;

(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;

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
A means for the patient to obtain a copy of his or 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;
(s) Failing to notify the Board of a change in physical or electronic address within sixty (60) business days.

Rule 150-8-.02 Fee Splitting.

(1) A dentist shall not give rebates with a referral source or split fees with a referral source.
(2) “Fee splitting” includes but is not limited to the following:
(a) Any coupons, rebates, paid referrals or other consideration provided in exchange for a referral for service on a per-patient basis provided from or to licensed dentists, excepting the purchase of a practice by one dentist actively licensed in Georgia to another dentist actively licensed in Georgia.
(b) Any coupons, rebates, paid referrals or other consideration provided in exchange for a referral on a per-patient basis provided to a licensed dentist from an unlicensed party based on an agreement, written or otherwise.
(c) The sharing of fees for professional services between licensed dentists or between licensed dentists and unlicensed third-parties, where the treating practitioner or the treating practitioner’s office shares the fees associated with treatment of a specific patient with a third-party that did not provide the treatment that generated the fee to the patient in exchange for a referral, recommendation, or coupon provided to that patient.
(d) The sharing of fees for professional services between a licensed dentist and any unlicensed party.
(3) “Fee splitting” does not include:
(a) The payment of a commission from a dentist actively licensed in Georgia who owns a practice to any employee, associate, independent contractor or agent who is also a dentist or dental hygienist actively licensed in Georgia and working for the practice. Such exclusion applies where the dentist owns the practice through a sole proprietorship, partnership, limited liability company, or by majority ownership in a professional corporation.
(b) The sharing of professional fees between dentists practicing in a partnership or within the same practice group, where the remuneration is not based on the number of referrals within the practice or referrals required by the partnership agreement;
(c) The division of fees between dentists where a dentist actively licensed in Georgia employs another dentist actively licensed in Georgia as an agent, associate, employee, or independent contractor, if not otherwise provided in 150-8-.02(3)(a);
(d) The giving of a gift from a dentist to a patient in exchange for a referral, where the dentist provides gifts of equivalent value to all other patients for the same number of referrals or value of referrals, and such gift does not exceed one hundred ($100) dollars in value.
(e) The payment of a fee to a former partner, associate, or employee based on a retirement plan or separation agreement;
(f) The payment of fees owed to an unlicensed party because of the unlicensed party’s possession of the ownership interest of a deceased or disabled dentist in a partnership, where the interest is transferred to another licensed dentist within six months after the date of death or disability of the unlicensed party’s predecessor-in-interest.
(4) Any substantiated violations of this rule for conduct committed subsequent to June 1, 2018 may subject the dentist to disciplinary action.

Rule 150-14-.02 Fabrication of Dental Appliances, Caps, Coverings, Prostheses and Cosmetic Coverings is Practice of Dentistry.

(1) The fabrication of any dental appliance, cap, covering, prosthesis or cosmetic covering, as defined by this chapter, is included in the practice of dentistry as defined by O.C.G.A. §43-11-17.
(2) No person shall fabricate any dental appliance, cap, covering, prosthesis or cosmetic covering, as defined by this chapter, unless he or she is licensed to practice dentistry or working under the prescription of a licensed dentist. Nothing in this chapter shall prohibit a physician licensed pursuant to Article 2, Chapter 34, Title 43 of the Official Code of Georgia from performing any act within the scope of his or her license.

(3) The onsite fabrication of a tooth whitening appliance, i.e. bleach tray, and/or the administration of tooth whitening material where the concentration of $\text{H}_2\text{O}_2$ exceeds 10% is considered to be the practice of dentistry and can only be performed by direct supervision of a licensed dentist. This provision shall not prohibit the sale of tooth whitening materials with concentrations of $\text{H}_2\text{O}_2$ at or below 10% for at home use.

(4) This rule shall not apply to any structure that is used solely for theatrical purposes as defined by this chapter.

**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) Fabrivate 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.

(l) 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 prophylaxis on a patient with primary dentition. For the purpose of this rule, “primary dentition” shall be defined as the dentition of any person under the age of eighteen (18). A dental assistant may only being providing rubber cup prophly 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 prophylaxis by a dentist licensed to practice in Georgia.

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 recognized 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/has] 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 post-operative 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 light-cure with a fiber-optic light source (not to include the use of a laser device).
(l) 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 digital for fabrication orthodontic appliances and models.

A motion was made by Dr. Holcomb, seconded by Dr. Nalley, and the Board voted that the formulation and adoption of these 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 O.C.G.A §§ 43-11-7, 43-11-9. 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. Nalley made a motion to post Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising. Dr. Holcomb seconded and the Board voted unanimously in favor of the motion.
Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising.

(1) For purposes of O.C.G.A. § 43-11-47(a)(15), “advertising” shall include any information communicated in a manner designed to attract public attention to the practice of the licensee, including the use of a trade name or corporate name.

(2) A dentist may provide information regarding himself or herself, the dentist personally, his or her the dentist’s practice, and fixed fees associated with routine dental services in a dignified manner in newspapers, magazines, yellow page directories, consumer directories, or comparable written publications, or broadcast advertising, or Internet advertising. The dentist shall have ultimate responsibility for all advertisements approved or placed by the dentist or his or her the dentist’s agents, employees, or associates, or contractors. The dentist shall retain a copy, recording, or specification of the advertisement for at least one year following the last appearance or use of the advertisement, and shall provide a copy, recording, or specification to the Board within ten (10) days of any request by the Board.

(3) Advertising may include, but is not limited to, the following information:
   (a) The dentist’s title or degree;
   (b) A designation of specialty dental practice, where the dentist has undergone the educational and certification requirements for such specialty; if said specialty is recognized by the Georgia Board of Dentistry pursuant to Rule 150-11-.01 and the dentist has completed the educational requirements stated in the American Dental Association’s specialty practice guidelines in existence at the time the advertisement is made;
   (c) Office and telephone answering hours, office location, office telephone number, and residence address and telephone number;
   (d) Fees for a specific, routine service. For purposes of this Rule, a dental service may be characterized as a “routine dental service” if it is performed frequently in the dentist’s practice, is usually provided at a specific fee to substantially all patients receiving the service, and is provided with little or no variance in technique or materials. The following requirements shall be met when a dentist advertises a routine dental service:
      1. If a range of fees is advertised (including use of words such as “from,” “as low as,” “starting at”), the minimum and maximum fees shall be fully disclosed;
      2. Consultation, treatment planning, or treatment for any routine dental service advertised for a specific fee must be made available for a minimum of sixty (60) days following the date of the last publication or broadcast of that fee, unless another date is specified in the advertisement;
      3. When a routine dental service is advertised as “free,” “no charge,” or like terms, such service must be made available at no cost for a minimum of sixty (60) days following the date of last publication or broadcast of that fee, unless another date is specified in the advertisement;
      4. When a patient accepts the treatment planned for a routine dental service which was advertised by the dentist for a specific fee during the previous sixty (60) days (or other period specified in the advertisement), any subsequent dental service that is reasonably and foreseeably related to the advertised routine service must be provided without additional charge, unless the advertisement for the routine dental service includes the following statement: “ADDITIONAL CHARGES MAY BE INCURRED FOR RELATED SERVICES WHICH MAY BE REQUIRED IN INDIVIDUAL CASES.”
   (4) A dentist may use or participate in the use of professional cards, appointment slips or cards, letterhead, office signs, or similar professional notices, provided they are not false, misleading, or deceptive.
   (5) Advertising shall not reveal a patient’s personally identifiable facts, data or information obtained in a professional capacity, without the patient’s written consent.

(6) The following statements in advertising shall be deemed to be misleading to the public for purposes of this Rule:
   (a) Statements claiming or implying the superiority of a method of treatment, material, drug or appliance, or ownership;
   (b) Statements that assert or allude that a certain dentist is a specialist or specializes in any branch of dentistry, where such dentist has not undergone the educational and certification requirements for such specialty; unless that specialty is recognized by the Georgia Board of Dentistry pursuant to Rule 150-11-
and the dentist has completed the educational requirements for that specialty as stated in the American Dental Association’s specialty practice guidelines in existence at the time the advertisement is made; (c) Statements that assert or allude that a dentist has received certification by a particular Board, credentialing organization, professional association, or other certifying body when s/he has not; (e)(d) Statements that assert or allude that a certain dentist practices at a location, if the dentist does not regularly provide dental treatment to patients at said location; (d) Statements offering or announcing “quality dentistry,” “quality work,” “staff of skilled dentists,” “skilled employees,” or other like terms, and statements indicating that uncertified persons perform functions requiring a license under O.C.G.A. § 43-11-1, et seq.; (e) Statements indicating the availability of superior facilities at a certain office, including statements that an office is “scientifically equipped” or has the “latest modern equipment,” statements making reference to a “modern office,” “modern methods,” “modern devices,” or any similar expressions; (f) (e) Statements that a dental operation or treatment can be performed without causing any pain; and (g) (f) Use of a trade name or corporate name that is confusingly similar to a trade name or corporate name already in use by a dental practice in this state; (g) Statements that contain other representations or implications that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

A motion was made by Ms. Johnson, seconded by Dr. Gay, and the Board voted that the formulation and adoption of this amendment does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed amendment cannot be reduced by a less expensive alternative that fully accomplishes the objectives of O.C.G.A §§ 43-11-7, 43-11-9. The formulation and adoption of this amendment will impact every licensee in the same manner, and each licensee is independently licensed, owned and operated and dominant in the field of dentistry.

**Education Committee Report – Dr. Tom Godfrey**
No report.

**Long Range Planning Committee Report – Dr. Steve Holcomb**
No report.

**CRDTS Steering Committee – Dr. Logan Nalley**
Dr. Nalley made a motion to reschedule the August 25, 2017 Investigative Committee meeting as the next CRDTS Annual Meeting is scheduled on the same day. Ms. Bynum seconded and the Board voted unanimously in favor of the motion.

**IP Committee Report – Dr. Richard Bennett**
No report.

**EDDA Review Committee – Dr. Greg Goggans**
No report.

**Executive Director’s Report – Ms. Tanja Battle**
Addiction Program Criteria: Ms. Battle reported this matter was considered at the previous meeting and the Board voted to amend the document to add language stating “The monitoring physician should be subject to the approval of the Board”. Dr. Holcomb made a motion to approve the following information presented as policy:
Evaluation/Assessment Program Criteria

- Providers performing evaluations/assessments should have demonstrable expertise in the recognition of the unique characteristics of health professionals with addictive illness.

- The evaluation of addictive illness requires that the licensee agree to the release of any and all records regarding diagnosis, indicated treatment, prognosis and continuing care recommendations of such licensee.

- Upon completion of the evaluation, release of all applicable evaluation results should be made available to the State Board of Dentistry.

Treatment Program Criteria

- The treatment provider(s) should have demonstrable expertise in the recognition of the unique characteristics of health professionals with addictive illness. Providers should have the ability and resources to offer the level of care indicated in each particular case.

- Admission for treatment of addictive illness requires that the licensee agree to the release of any and all records to the Board of Dentistry regarding diagnosis, prognosis, and continuing care recommendations.

- When the treatment for addictive illness requires any level of care (residential, hospital inpatient, or outpatient care), it should be for an appropriate period of time as determined by the treatment professionals.

- Upon completion of treatment, release of all applicable treatment documents should be made to the Board of Dentistry.

- A licensee who refuses to enter recommended treatment or leaves treatment prior to its successful conclusion will be subject to Board notification.

Addictive Continuing Care Criteria

Continuing care of the program participant is crucial to the successful recovery, safe return to practice, and ultimately the completion of participation. After the initial phases of intervention, evaluation and primary treatment have been completed, the licensee must enter into Continuing Care.

- All participants should be required to sign a written contract.

- In the event of relocation or other credible reason, the continuing care contract should allow transfer to another approved continuing care provider.

- The provider should have the expertise and ability to individualize continuing care and make appropriate referrals.

- The provider should be able to make determinations about a licensee’s suitability to work based on the licensee’s safety to practice, stability in recovery, and health related readiness to resume professional duties.

- The provider should report to the Board on the status of program participants on a regular basis.
• The provider should be willing to appear personally before the Board as an advocate with the participant as changes in license status are requested.

• The provider must require random specimen collection for forensic testing. Use of a certified laboratory ensures the availability of a Toxicologist and Medical Review Officer (MRO) for screening samples and confirming sample results.

• All forensic specimens require chain-of-custody handling.

• Drug panels should include the participant’s drug of choice as well as other substances of abuse including alcohol. Screens should be performed at an appropriate frequency based on individual case specifics.

• The recovering participant should have a personal primary care physician (PCP) who knows that the participant is in a recovery program. The monitoring physician should be subject to the approval of the Board.

• Regular attendance at mutual help program meetings such as AA, NA or other equivalent programs is required after completion of 90 in 90.

• All participants are required to attend at least twice monthly meetings of a professional peer support group.

• A therapist, psychiatrist or psychologist should be utilized as clinically indicated.

• Consent for release of information should be executed, maintained and shared between the various healthcare providers and the Board as appropriate.

• Any relapse with chemical use should be immediately be reported to the Board of Dentistry.

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

CE Zoom and CE Broker: Ms. Battle stated that the Board is approaching a renewal cycle. She reminded everyone that, for years, audits were done in conjunction with the renewal. After the Board transitioned from the Secretary of State’s office to the Department of Community Health, the Board conducted a post renewal audit rather than an audit at the time of renewal. Ms. Battle asked if the Board wanted to conduct another post renewal audit. The Board responded affirmatively.

Ms. Battled inquired if Mr. Thernes had information on what other Boards did regarding using a CE monitoring service. He stated that the Georgia Board of Physical Therapy has adopted a rule addressing vendors to maintain online recording and reporting system. He stated that the Physical Therapy Board went to a 100% audit and designated a particular continuing education tracking site to be used by the licensee. He added that if the Board wants to accept a certain vendor, it can elect to say they are an approved provider. Discussion held. Dr. Godfrey requested a copy of the Physical Therapy Board rule discussed be placed on the August agenda for the Board to review.

**Attorney General’s Report – Mr. Bryon Thernes**

No report.
**Miscellaneous**
The Board recommended tabling discussion of peer reviewers for the Investigative Committee pending legal advice from Mr. Thernes in Executive Session.

Dr. Logan Nalley made a motion and Dr. Steve Holcomb 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), §43-1-2(k), and § 50-14-3(b)(2) to deliberate and receive information on applications, investigative reports, the Assistant Attorney General’s report, and discuss personnel matters. Voting in favor of the motion were those present who included Dr. Richard Bennett, Ms. Becky Bynum, Dr. Tracy Gay, Dr. Tom Godfrey, Dr. Greg Goggans, Dr. Steve Holcomb, Ms. Wendy Johnson, Dr. Logan Nalley, Dr. Antwan Treadway, and Dr. Bert Yeargan.

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<td>• P.M.H.</td>
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• R.J.H.
• D.P.H.
• D.T.K.
• Y.C.T.

Correspondences
• N.M.

Investigative Committee Report
Report presented:
• DENT150392
• DENT170254
• DENT170176

Miscellaneous
The Board discussed staffing matters.

Attorney General’s Report – Mr. Bryon Thernes
• Legal advice regarding Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising.
• Legal advice regarding O.C.G.A. § 24-7-702.

Mr. Thernes presented the following consent orders for acceptance:
• A.B.
• J.C.

Legal Services – Ms. Anil Foreman
• DENT150237

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

| Open Session |

Dr. Nalley made a motion to appoint Dr. Hari Digumarthi as consultant for the Investigative Committee. Dr. Bennett seconded and the Board voted unanimously in favor of the motion.

Discussion was held regarding Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising, which the Board voted to post earlier in the meeting. After reconsidering the rule, Dr. Holcomb made a motion to repost Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising as amended. Dr. Nalley seconded and the Board voted unanimously in favor of the motion.

Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising.
(1) For purposes of O.C.G.A. § 43-11-47(a)(15), “advertising” shall include any information communicated in a manner designed to attract public attention to the practice of the licensee, including the use of a trade name or corporate name.
(2) A dentist may provide information regarding himself or herself the dentist personally, his or her the dentist’s practice, and fixed fees associated with routine dental services in a dignified manner in newspapers, magazines, yellow page directories, consumer directories, or comparable written publications, or broadcast advertising, or Internet advertising. The dentist shall have ultimate responsibility for all advertisements approved or placed by the dentist or his or her the dentist’s agents,
employees, or associates, or contractors. The dentist shall retain a copy, recording, or specification of the advertisement for at least one year following the last appearance or use of the advertisement, and shall provide a copy, recording, or specification to the Board within ten (10) days of any request by the Board.

(3) Advertising may include, but is not limited to, the following information:

(a) The dentist’s title or degree;
(b) A designation of specialty dental practice, where the dentist has undergone the educational and certification requirements for such specialty, unless the specialty is recognized by the Georgia Board of Dentistry pursuant to Rule 150-11-01 and the dentist has completed the educational requirements stated in the American Dental Association’s specialty practice guidelines in existence at the time the advertisement is made;
(c) Office and telephone answering hours, office location, office telephone number, and residence address and telephone number;
(d) Fees for a specific, routine service. For purposes of this Rule, a dental service may be characterized as a “routine dental service” if it is performed frequently in the dentist’s practice, is usually provided at a specific fee to substantially all patients receiving the service, and is provided with little or no variance in technique or materials. The following requirements shall be met when a dentist advertises a routine dental service:
1. If a range of fees is advertised (including use of words such as “from,” “as low as,” “starting at”), the minimum and maximum fees shall be fully disclosed;
2. Consultation, treatment planning, or treatment for any routine dental service advertised for a specific fee must be made available for a minimum of sixty (60) days following the date of the last publication or broadcast of that fee, unless another date is specified in the advertisement;
3. When a routine dental service is advertised as “free,” “no charge,” or like terms, such service must be made available at no cost for a minimum of sixty (60) days following the date of last publication or broadcast of that fee, unless another date is specified in the advertisement;
4. When a patient accepts the treatment planned for a routine dental service which was advertised by the dentist for a specific fee during the previous sixty (60) days (or other period specified in the advertisement), any subsequent dental service that is reasonably and foreseeably related to the advertised routine service must be provided without additional charge, unless the advertisement for the routine dental service includes the following statement: “ADDITIONAL CHARGES MAY BE INCURRED FOR RELATED SERVICES WHICH MAY BE REQUIRED IN INDIVIDUAL CASES.”

(4) A dentist may use or participate in the use of professional cards, appointment slips or cards, letterhead, office signs, or similar professional notices, provided they are not false, misleading, or deceptive.

(5) Advertising shall not reveal a patient’s personally identifiable facts, data or information obtained in a professional capacity, without the patient’s written consent.

(6) The following statements in advertising shall be deemed to be misleading to the public for purposes of this Rule:

(a) Statements claiming or implying the superiority of a method of treatment, material, drug or appliance;
(b) Statements that assert or allude that a certain dentist is a specialist or specializes in any branch of dentistry, where such dentist has not undergone the educational and certification requirements for such specialty unless that specialty is recognized by the Georgia Board of Dentistry pursuant to Rule 150-11-01 and the dentist has completed the educational requirements for that specialty as stated in the American Dental Association’s specialty practice guidelines in existence at the time the advertisement is made;
(c) Statements that assert or allude that a dentist has received certification by a particular Board, credentialing organization, professional association, or other certifying body when s/he has not;
(d) Statements that assert or allude that a certain dentist practices at a location, if the dentist does not regularly provide dental treatment to patients at said location;
(e) Statements offering or announcing “quality dentistry,” “quality work,” “staff of skilled dentists,” “skilled employees,” or other like terms, and statements indicating that uncertified persons perform functions requiring a license under O.C.G.A. § 43-11-1, et seq.;
(e) Statements indicating the availability of superior facilities at a certain office, including statements that an office is “scientifically equipped” or has the “latest modern equipment,” statements making reference to a “modern office,” “modern methods,” “modern devices,” or any similar expressions;

(e) Statements that assert or imply that a dentist has an ownership interest in a dental practice, facility, or clinic, when that dentist does not in fact have such an ownership interest. The listing of a dentist’s full name in any sign, card, announcement, advertisement, or method used to state or imply that dentistry may or will be done by anyone at any place in this state, in compliance with O.C.G.A. §43-1-18, shall not in and of itself be construed as implying ownership in a dental practice, facility, or clinic for the purposes of this rule;

(f) Statements that a dental operation or treatment can be performed without causing any pain; and

(g) Use of a trade name or corporate name that is confusingly similar to a trade name or corporate name already in use by a dental practice in this state. Statements that contain other representations or implications that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

A motion was made by Dr. Bennett, seconded by Dr. Nalley, and the Board voted that the formulation and adoption of this amendment does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed amendment cannot be reduced by a less expensive alternative that fully accomplishes the objectives of O.C.G.A §§ 43-11-7, 43-11-9. The formulation and adoption of this amendment 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. Nalley made a motion to approve all recommendations based on deliberations made in Executive Session as follows:

**Appearance**
- F.T.C. Denied Exam Applicant Overturn denial and approve for licensure

**Licensure Overview Committee Appointments/Discussion Cases:**
- C.M.G. Dental Exam Applicant Approved application
- K.G.T. Dental Exam Applicant Approved application
- D.A.R. Dental Hygiene Exam Applicant Approved application
- H.P.W. Dental Hygiene Exam Applicant Approved application
- D.D.B. Dental Credentials Applicant Approved application
- C.W.H. Request to terminate probation Approved request

**Applications**
- D.S.H. Dental Exam Applicant Approved application
- A.R.A. Dental Exam Applicant Approved application
- G.L. Dental Exam Applicant Approved application
- S.J.S. Dental Exam Applicant Approved application
- S.R.K. Dental Exam Applicant Approved application
- J.R.T. Dental Exam Applicant Approved application
- A.T.D. Dental Exam Applicant Approved application
- S.V.A. Dental Exam Applicant Approved application
- D.R.S. Dental Hygiene Exam Applicant Approved application
- A.D.I. Dental Exam Applicant Approved application
- D.E.H. Dental Exam Applicant Schedule to meet with the Licensure Overview Committee
- B.A.B. Dental Exam Applicant Approved application
A.A.D.  Dental Credentials Applicant  Denied application
A.W.T.  Dental Credentials Applicant  Approved application
D.K.  Dental Credentials Applicant  Approved application
M.A.C.  Dental Credentials Applicant  Approved application
R.C.K.  Dental Hygiene Reinstatement  Approved application
C.F.S.  Dental Hygiene Reinstatement  Approved application
L.A.G.  Dental Hygiene Reinstatement  Approved application
D.C.W.  Dental Faculty Applicant  Approved application
J.L.G.  Dental Faculty Applicant  Approved pending receipt of additional information
R.S.J.  Dental Faculty Applicant  Approved application
P.M.H.  General Anesthesia Applicant  Approved for provisional permit
R.J.H.  General Anesthesia Applicant  Approved for provisional permit
D.P.H.  Conscious Sedation Applicant  Approved for provisional permit
D.T.K.  Conscious Sedation Applicant  Approved request for extension of provisional permit
Y.C.T.  Conscious Sedation Applicant  Approved evaluation

Correspondences
- N.M.  Request for exception for licensure by credentials or examination  Denied request

Investigative Committee Report
Report presented:

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<th>Complaint Number</th>
<th>Allegations</th>
<th>Recommendation</th>
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<tr>
<td>DENT150392</td>
<td>Morbidity and mortality</td>
<td>Refer to the Department of Law for revocation</td>
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<td>DENT170254</td>
<td>Other</td>
<td>Close with no action</td>
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<tr>
<td>DENT170176</td>
<td>Quality of care/substandard practice</td>
<td>Close with no action</td>
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Miscellaneous
The Board discussed staffing matters. The Board voted in support of a salary increase for position number 00204311.

Attorney General’s Report – Mr. Bryon Thernes
- Legal advice regarding Rule 150-10-.01 Fraudulent, Misleading or Deceptive Advertising.
- Legal advice regarding O.C.G.A. § 24-7-702.

Mr. Thernes presented the following consent orders for acceptance:
- A.B.  Public Consent Order accepted
- J.C.  Public Consent Order to be accepted and signed with express permission upon receipt of the original

Legal Services – Ms. Anil Foreman
DENT150237  Refer to IC to review records request

Dr. Holcomb seconded and the Board voted unanimously in favor of the motion.
In regards to F.T.C., Dr. Nalley made a motion to overturn the denial and approve the application. Dr. Gay seconded, and the Board voted in favor of the motion, with the exception of Dr. Holcomb and Dr. Bennett, who opposed the motion.

With no further business, the Board meeting adjourned at 1:08 p.m.

The next scheduled meeting of the Georgia Board of Dentistry will be held on Friday, August 11, 2017, at 10:00 a.m. at the Department of Community Health’s office located at 2 Peachtree Street, N.W., 36th Floor, Atlanta, GA 30303.

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