

South Carolina

Dentistry News

LLR An online newsletter published by the South Carolina Board of Dentistry.

Mission Statement

To protect the public health, safety and welfare in the State of South Carolina by the licensure and regulation of dentists, dental hygienists and dental technicians.

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Board Member News 2014

The Board welcomes Dr. Samuel M. Hazel to a seat on the Board for Congressional District Six and Dr. Paul S. Coombs, Jr. for Congressional District Five. The Board has 11 members and is comprised of eight dentists, two registered dental hygienists and one public member. The next Board seat up for election in 2014 will be for Congressional District Seven.

FAQ on How to File a Complaint

Board staff is frequently asked how to file a complaint. The Board has a form and affidavit on its website to use to file a complaint. All complaints must be in written form and sent to the Board office electronically or in the mail. No complaint matters should be addressed in any form - written or verbal - to Board members. All complaints are investigated by the Office of Investigations (OIE) at LLR and then presented to the Board. Complaint information and final orders can be found at www.llr.state.sc.us/pol/dentistry.

Board Approved X-ray Courses are Developed or Sponsored by:

- American Dental Association (ADA)-accredited schools and their constituents;
- Dental Assisting National Board, Inc. (DANB); and
- South Carolina Dental Association (SCDA).

Successful completion of a course from any of these structured programs meets the requirements of the SC Dental Practice Act. Again please be aware, the Board no longer issues radiography certificates. For information and application for the SCDA course, contact the SCDA at (803) 750-2277 or visit its website at www.scda.org.

The Board website is www.llr.state.sc.us/pol/dentistry

Please make note of this site and visit it regularly for updated information on applications and forms for licensure; fees; FAQ; Board Final Orders; complaint process and complaint forms; laws/policies; Board news; publications; Board information such as minutes, members, agendas, and important dates; renewal information; on-line verification of license; and on-line services. There is a wealth of information for you and the public. The site has recently been redesigned with a new look!

General Information

- . The Board uses this newsletter in many ways, including: to inform licensees and registrants about new rules, regulations and legislation affecting and concerning dentists, dental hygienists and technicians in South Carolina; to share information about Board rulings, decisions and orders; to update licensees and registrants on reoccurring issues that come before the Board pertaining to the everyday practice of dentistry; and to share frequently asked questions and answers.
- . The Board Newsletter references statutes and regulations for your information.
- . The Board is a dedicated coalition of dentists, dental hygienists and a public member whose first charge is the public safety of the citizens of South Carolina. The Board members are active in the daily practice of dentistry, except for the public member. All seven of the congressional districts are represented on the Board. In addition, some members are chosen at-large.
- . The Board welcomes and invites communication from licensees and other members of the public. Board meetings are open to the public, and meeting dates and agendas are available on the Board's website.
- . Minutes of Board meetings are also available on the Board's website.

Current Topics of Interest from Dr. Doug Alterman, Board Vice President

Renewal: The next renewal for licensees will be announced in October for the December 31, 2014, deadline without penalty and the March 1, 2015, deadline with late fees applying. The notice will be emailed and mailed through the US Post Office. It is a professional responsibility to keep contact information current.

Prescription Writing: Dentists are sometimes asked to write prescriptions that are outside the scope of practice. Licensees and registrants are reminded of the statute in the SC Dental Practice Act regarding prescription writing. Dentists are only allowed to prescribe within the scope of dentistry to a registered patient within their dental practice. Please refer to the Section 40-15-70 (2- c) and 40-15-360 of the SC Dental Practice Act.

Record Keeping: Inadequate and incomplete record keeping is a common theme in complaint matters. These records allow the Board, through the complaint process and investigation, to fairly and openly evaluate a complaint. They are also the licensee's best defense when a complaint is filed. Please refer to Section 40-15-83 and Regulation 39-11 for Ethics 1-B. Mobile facilities also have record requirements.

Infection Control: Infection control practices have recently come under scrutiny following revelations in Oklahoma. Dentists and dental hygienists are reminded to review and examine these practices. Proper guidelines and standards can be found published by the American Dental Association (ADA). Please also read Board Regulation 39-10.

Botox and Other Injectables: Botox and fillers have become popular in recent years. The Board has a policy on the limitations of use and delivery of these products and injectables by licensees. The policy can be found on the Board's website under Laws/Policies www.llr.state.sc.us/pol/dentistry. The policy states in general that these are limited to the perioral area, must be for a dental purpose, must be performed by a licensed general dentist, and must be performed only where a bona fide dentist-patient relationship has been established. Please read the full policy. The Board is always open to reviewing policies to remain current.

Social Coupon Use: Social coupon use is another issue. The Code of Ethics in Regulation 39-11, 1-H of the S. C. Code of Regulations states "Dentists shall not accept or tender 'rebates' or 'split fees.'" This includes social coupon website applications. A violation of the Principles of Ethics as promulgated in the Code of Regulations is grounds for misconduct. The ADA also has a statement regarding this.

Proposed Dental Sedation Act - Senate Bill 1036

The Dental Sedation Act, S. 1036, was introduced this March by Senator Raymond E. Cleary, III. The Dental Sedation Act is the result of a joint effort of the Board's Sedation Committee and the South Carolina Dental Association (SCDA). The Board's Committee was lead by former President Dr. Charles Wade, along with former President David Jones, Dr. Douglas Alterman, current Vice President, and Dr. Felicia Goins. This Committee worked alongside members of the South Carolina Dental Association's Legislative Committee, chaired by Dr. Gee Rabon. Dr. Jim Mercer, Dr. David Moss, Dr. Tom McDonald, Dr. Sean Boynes, Dr. George Bumgardner, Dr. Thomas Edmonds, Dr. Lynn Wallace, Dr. Rob Neiders and Dr. Robert Ellis, III were on the Committee. The Board formally voted to support the Dental Sedation Act in January 2014.

The Dental Sedation Act is a step forward towards better patient safety and care in dentistry. The Dental Sedation Act requires dentists who offer sedation in their dental offices to hold a permit and submit to biennial inspections. Dental sedation permits will be issued upon demonstration of necessary equipment as outlined in the bill, along with applicable life support training. The Dental Sedation Act also mandates continuing education and training requirements for office staff involved in sedation procedures. The requirements will be tailored toward the level of anesthesia offered by the dentist in his or her office. Additionally, if the dentist is administering anesthesia, the dentist must have appropriate training as outlined in the bill. The full text of the bill may be found at http://www.scstatehouse.gov/sess120_2013-2014/prever/1036_20140402.htm.

As of April 4, 2014, the Dental Sedation Act is on its second reading in the Senate, and is poised to crossover to the House after a third and final reading. If signed into law by the Governor, the Dental Sedation Act will not go into effect until January 2015. Additionally, the Board will publish regulations to provide further clarity. The Board wishes to thank Senator Cleary and the members of the Association for their hard work with this critical piece of legislation, which will provide our patients in South Carolina with safe sedation practices.

If you have questions, please put these in writing to the Board at PO Box 11329 in Columbia, SC 29211-1329 or contact the SCDA at 803-750-2277.

Application by Credentials

To All Applicants Applying by Credentials: Please note that under South Carolina law, in SC Code Ann. § 40-15-275(A)(5), an applicant applying by credentials must not be the subject of ANY final or pending disciplinary action in the military or any state or territory in which the applicant has held any other professional license. This applies to applicants for dentistry of any type or for dental hygienist who have or have had licensure in another state(s). If there has been any final or pending disciplinary action and depending on the discipline, a possible alternative way to licensure is by retaking the clinical examinations recognized by our state. Please be aware examination scores are valid for five years.

Board Policies

The Board of Dentistry has the authority and jurisdiction over licensure and the practice of dentistry in South Carolina directed by its statutes and regulations. The Board also has policies to support the laws on its website. You may find it useful to refer to these policies when you have questions on different topics. Some of the policies include: lasers, anesthesia certification, economic relationships, patient dental records, application review process, CE/CPR compliance and Botox. Future newsletters will address some of these topics and others.

2014 SUMMARY OF PROCEDURES that can be delegated to Dental Hygienists and Dental Assistants

Please note that this summary is provided for information only. Unless otherwise specifically stated, the information contained herein is made available to the public for informational purposes only. No legal liability or responsibility is assumed for the accuracy, completeness, or usefulness of the information presented. Please refer to the Dental Practice Act statutes and regulations as well as legal counsel of your own choosing for further guidance.

I. PRIVATE DENTAL OFFICE under DIRECT SUPERVISION

“Direct Supervision” means that a dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and before the dismissal of the patient, evaluates the performance of the auxiliary. This requirement does not mandate that a dentist be present at all times, but he or she must be on the premises actually involved in supervision and control. **40-15-85(1)**.

“Authorized” means the supervising dentist in a private office setting has personally approved the procedures to be performed and is responsible for the care provided to the patient. **40-15-102(A)**.

Procedure	Dental Hygienist	Expanded Duty Dental Assistant	Dental Assistant
Assist in basic supportive chairside procedures	√	√	√
Chart existing restorations, clinically missing teeth, and appliances within the oral cavity	√	√	√
Apply topical drugs as prescribed by the Board	√	√	√
Place and remove rubber dam	√	√	√
Place and remove matrix	√	√	√
Place and remove orthodontic ligatures	√	√	√
Take and record vital signs (blood pressure, pulse, etc.)	√	√	√
Expose radiographs upon completion of Board-approved radiation safety course	√	√	√
Place and remove periodontal packs	√	√	√
Remove sutures	√	√	√
Take impressions for study models	√	√	
Place and remove socket dressing	√	√	
Place gingival retraction cord	√	√	
Place temporary restorations	√	√	
Cement temporary crowns or bridges	√	√	
Remove excess cement from restorations and/or appliances	√	√	
Polish restorations and supragingival tooth structure	√	√	
Application of pit and fissure sealant	√	√	
Monitor nitrous oxide conscious sedation upon certification by the Board	√	√	
Administration of local infiltration anesthesia upon certification by the Board	√		
Complete prophylaxis to include scaling, root planning, performing clinical examination	√		
Oral hygiene and instruction	√	√	√
The procedures listed below are authorized / not authorized in accordance with Board policies:			
Dental hygienists and dental assistants are <u>not</u> authorized to establish an IV line. They are <u>not</u> authorized to draw sedative drugs into a syringe, <u>nor</u> are they authorized to deliver drugs into an established IV line. Board policy adopted 10/31/08.			
Perform isolation and clean-up procedures related to laser bleaching of teeth in dental office. Board			

policy adopted 6/24/01.	√	√	√
Licensed dental hygienists are authorized to place subgingival therapeutic chemicals (i.e., Actisite, Perio chip, Atridox, etc.) at the direction and under the direct supervision of a practicing licensed dentist upon completion of a minimum one-hour training session as recommended by the manufacturer. Dental assistants and expanded duty dental assistants are <u>not</u> authorized to place subgingival therapeutic chemicals. Board policy adopted 10/31/08.	√		
Dental hygienists and dental assistants are <u>not</u> authorized to perform Botox injections. Board policy adopted 4/01/09.			
Intra-oral camera (does not include scanner for final impressions)	√		

Dental Assistant - No formal academic dental training is required for dental assistants. **Reg. 39-12.**

Expanded Duty Dental Assistant – Is a dental assistant who is a graduate of an ADA accredited dental assisting program, or one who has completed two years of continuous full-time employment as a chairside dental assistant. **Reg. 39-13.**

Dental Hygienist – Is one who engages in those clinical procedures primarily concerned with the performance of preventive dental services not constituting the practice of dentistry, including removing all hard and soft deposits and stains from the surfaces of human teeth, root planning, performing clinical examination of teeth and surrounding tissues, and charting of oral conditions for diagnosis by a dentist, and performing such other procedures as may be delegated by regulations of the Board. **40-15-80(A)** The regulations mentioned are **Reg. 39-14, 39-12 and 39-13.**

Oral prophylaxis - Means the removal of any and all hard and soft deposits, accretions, toxins, and stain from any natural or restored surfaces of teeth or prosthetic devices by scaling and polishing as a preventive measure for the control of local irritational factors. **40-15-85(3).**

Monitor Nitrous Oxide Conscious Sedation - Means carrying out orders of the dentist, including initiation of flow of nitrous oxide component. Auxiliary may then maintain that flow or decrease the level of nitrous oxide when oxygenating patient, without specific direction of dentist. The dentist must determine need and level of nitrous oxide sedation regarding a particular patient. **Board Policy adopted 6/24/01.**

II. PRIVATE DENTAL OFFICE under GENERAL SUPERVISION with authorization by supervising dentist.

In a private dental office setting, a dental hygienist may only perform the following functions under general supervision: (1) oral prophylaxis and assessment; (2) fluoride treatment; (3) oral hygiene instruction and education; (4) exposure and process of radiographs as directed by standard office protocol. **40-15-102(B).**

A dentist in a private office setting may authorize general supervision 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.) An appointed patient must be examined by the authorizing dentist at a minimum of 12 month intervals; and (3.) An appointed patient must be notified in advance of the appointment that he/she will be treated by the dental hygienist under general supervision without authorizing dentist being present or being examined by the authorizing dentist. **40-15-102(C).**

General Supervision means that a licensed dentist or the S.C. Department of Health and Environmental Control's public health dentist has authorized the procedures to be performed but does not require that a dentist be present when the procedures are performed. **40-15-85(2).**

Authorized means the supervising dentist in a private office setting has personally approved the procedures to be performed and is responsible for the care provided to the patient. **40-15-102(A).**

Procedure	Dental Hygienist	Expanded Duty Dental Assistant	Dental Assistant
Oral prophylaxis and assessment	√		
Fluoride treatment	√		
Exposure and process of radiographs as directed by standard office protocol	√		
Oral hygiene instruction and education, perform oral screenings, and provide nutrition and dietary counseling without prior authorization	√		
Intra-oral camera (does not include scanner for final impressions)	√		

III. SCHOOL SETTINGS under GENERAL SUPERVISION and written permission of student's parent/guardian [unless the dentist or dental hygienist is working in a public health setting with DHEC]

In school settings, licensed dental hygienists may apply topical fluoride and may perform the application of sealants and oral prophylaxis under general supervision, with written permission of the student's parent or guardian. **40-15-80(B).**

A dentist authorizing treatment by a dental hygienist in school settings or nursing home settings is subject to the general supervision restrictions provided for in this section unless the dentist or dental hygienist is working in a public health setting with the Department of Health and Environmental Control, as provided for in Section 40-15-110. **40-15-102(D)**.

Procedure	Dental Hygienist	Expanded Duty Dental Assistant	Dental Assistant
Apply topical fluoride	√		
Perform application of sealants	√		
Oral prophylaxis	√		

IV. HOSPITALS, NURSING HOMES, LONG TERM CARE FACILITIES
under GENERAL SUPERVISION and provided medical emergency care is available within the facility
[unless the dentist or dental hygienist is working in a public health setting with DHEC]

In hospitals, nursing homes, long term care facilities, rural and community clinics, health facilities operated by federal, state, county, or local governments, hospices, education institutions accredited by the Commission on Dental Accreditation that give instruction in dental hygiene, and in bona fide charitable institutions, licensed dental hygienists may apply topical fluoride and perform the application of sealants and oral prophylaxis under general supervision. Treatment may not occur in these settings unless medical emergency care is available within the facility. **40-15-80(C)**.

A dentist authorizing treatment by a dental hygienist in school settings or nursing home settings is subject to the general supervision restrictions provided for in this section unless the dentist or dental hygienist is working in a public health setting with the Department of Health and Environmental Control, as provided for in Section 40-15-110 - Exemptions. **40-15-102(D)**.

General Supervision means that a licensed dentist or the S.C. Department of Health and Environmental Control's public health dentist has authorized the procedures to be performed but does not require that a dentist be present when the procedures are performed. **40-15-85(2)**.

Procedure	Dental Hygienist	Expanded Duty Dental Assistant	Dental Assistant
Apply topical fluoride	√		
Perform application of sealants	√		
Oral prophylaxis	√		

V. PUBLIC HEALTH SETTINGS WORKING WITH DHEC
Examination of patient is not required.
Services are to be performed under the direction of DHEC State Dental Coordinator or the Department's designee
but do not require the coordinator be present when the services are performed.

Public Health Setting – Is defined as a hospital, nursing home, long term care facility, rural or community health clinic, health facility operated by federal, state, county, or local governments, hospice, an education institution, a bona fide charitable institution, or a mobile delivery program operated in one of these settings under the direction of the Department of Health and Environmental Control. Mobile delivery programs are defined as those that are not confined to a single building and can be transported from place to place. **40-15-110(E)**.

Public Health Dental Program Services – Includes oral screenings using a DHEC-approved screening system, oral prophylaxis, application of topical fluoride including varnish, and the application of dental sealants. **40-15-110(A)(10)**.

Procedure	Dental Hygienist	Expanded Duty Dental Assistant	Dental Assistant
Oral prophylaxis and assessment	√		
Application of topical fluoride including varnish	√	√	√
Application of dental sealants	√		
Oral screenings using DHEC - approved screening system	√	√	√
Assist in the delivery of public health dental program services as defined in 40-15-110(E): oral screenings using DHEC - approved screening system, oral prophylaxis, application of topical fluoride including varnish, and application of dental sealants 40-15-110(G)	√	√	√
Perform other duties authorized by regulations of the State Board of Dentistry	√	√	√

Closing a Dental Practice

The Board has gotten calls recently about closing a dental practice. Closing a business is stressful, and the Board suggests accepting as much help as possible. Hiring a lawyer, an accountant or CPA for accounts payable and receivable, and a practice transition broker may ease the process. A surviving spouse who is closing a practice will likely need a death certificate, marriage license, and the dentist's social security number and state license number. Some pointers to remember are:

- . Inform employees of the pending closure, and when possible give 90 days notice.
- . Remember to contact the landlord immediately to negotiate the termination of the lease, if you do not own the building. You or your estate could be responsible for the remainder of the lease, depending on the lease.
- . Contact all your active and inactive patients within the last five years, well in advance of closing, and invite them to come in and pick up a copy of their records, or offer to transfer them to another dental office. A newspaper announcement can suffice as notice. Keep all original records with the dentist or his/her estate.
- . Inform all patients with ongoing treatment that their cases will be either concluded by you or you will refer them to a dentist who is capable of completing their treatment. Without proper referrals, patients can claim patient abandonment.
- . Keep business - related documents. You might check with ADA to get a list of items to be kept and length of time to keep them.
- . Notify the DEA, the state licensing Board, and other associations/societies of closing.
- . Contact others as appropriate such as IRS for any payments due, insurance companies to end policies or collect any payments due for services, and an insurance company for any liability needs or malpractice that might arise after closing.

The Board thanks eHow and eHow Contributor Grace Keh for the use of this article and the ADA for information.

Actions by Final Order of the Board for Spring Newsletter

All Final Public Orders issued by the Board are posted in full on the Board's website www.llr.state.sc.us/pol/dentistry

Below are the Board orders since the Summer Newsletter 2013.

Joseph L. Brown, DDS
Carl J. Lockwood, DMD
Carl J. Lockwood, DMD

Order to Release Licensee from Probation on License
Reinstatement on Probationary Status until Disciplinary Status Resolved (see second Order)
Final Order with One (1) Year Suspension stayed with a Two (2) year Probation, a Public Reprimand, a \$1,500 Fine, and Required Coursework in Peridontals and Fixed Prosthodontist (see web site)

Aaron P. Sarathy, DMD
Jeffery J. Simmons, DMD
Edward R. Strauss, DMD

Final Order with Public Reprimand and Fine of \$5,000
Final Order with Public Reprimand and Fine of \$2,500
Final Order with Public Reprimand and Fine of \$5,000

Online Services

The following services are available online 24 hours a day, seven days per week at www.llr.state.sc.us/pol/dentistry:

- Online Renewals (when applicable)
- Change of Address
- License Verification Request
- Check Status of Application
- Licensee Lookup
- Online Jurisprudence Examination

Board Meetings Remaining in 2014

July 11, 2014
October 17, 2014

Specialty Exam Date Remaining in 2014

July 18, 2014

Local Infiltration Anesthesia Exams Remaining in 2014

May 15, 2014
August 21, 2014
November 20, 2014