

1 NEVADA STATE BOARD OF DENTAL EXAMINERS  
2 6010 S Rainbow Boulevard, Suite A-1  
3 Las Vegas, Nevada 89118  
4 (702) 486-7044  
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7 Video Conferencing available for this meeting at the Nevada State Board of Medical Examiners located at  
8 1105 Terminal Way, Suite 301, Reno, NV 89502  
9

10 NOTICE OF PUBLIC MEETING

11 Friday, March 18, 2016  
12 9:06 a.m.  
13  
14

15 COMMITTEE ON DENTAL HYGIENE

16 (Theresa Guillen, RDH (Chair); Leslea Villigan, RDH; Maria Gabriel, RDH; and Ali Shahrestani, DMD)  
17

18 MINUTES  
19

20 Please Note: The Nevada State Board of Dental Examiners may 1) address agenda items out of sequence to  
21 accommodate persons appearing before the Board or to aid the efficiency or effectiveness of the meeting; 2)  
22 combine items for consideration by the public body; 3) pull or remove items from the agenda at any time. The  
23 Board may convene in closed session to consider the character, alleged misconduct, professional competence or  
24 physical or mental health of a person. See NRS 241.030. Prior to the commencement and conclusion of a contested  
25 case or a quasi judicial proceeding that may affect the due process rights of an individual the board may refuse to  
26 consider public comment. See NRS 233B.126.  
27

28 At the discretion of the Chair, public comment is welcomed by the Board, but will be heard only when that item is  
29 reached and will be limited to five minutes per person. A public comment time will also be available as the last  
30 item on the agenda. The Chair may allow additional time to be given a speaker as time allows and in his/her sole  
31 discretion. Once all items on the agenda are completed the meeting will adjourn.  
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33 *Asterisks (\*) denote items on which the Board may take action.*  
34 *Action by the Board on an item may be to approve, deny, amend, or table.*  
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36  
37 1. Call to Order, roll call, and establish quorum  
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39 Ms. Guillen called the meeting to order and Mrs. Shaffer-Kugel conducted the following roll call:  
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41 Ms. Theresa Guillen -----PRESENT  
42 Mrs. Leslea Villigan -----PRESENT  
43 Ms. Sharon Gabriel -----PRESENT  
44 Dr. Ali Shahrestani -----PRESENT  
45

46 Other attendees: John Hunt, Board Legal Counsel; Debra Shaffer-Kugel, Executive Director.  
47

48 Public Attendees: Richard Dragon, NDA; Syd McKenzie, NDHA, CUSP; Lori Benven, NNDS; Mark Funke, NDA;  
49 Caryn Solie, RDH, NDHA; David Whit, NDA; Chris Ferrari, NDA; Mark Handelin, DDS; Robert Talley, DDS, NDA;  
50 Annette Lincicome, NDHA; Shari Peterson, CSN, NDHA; Brad Wilbur, DDS, NDA; Marc Muncy, DDS, Southern  
51 Regional Testing Agency.  
52

53 2. Public Comment: (Public Comment is limited to three (3) minutes for each individual)  
54

55 Dr. Talley asked that the Board seek legal opinion from the Board attorney regarding the legality of dental  
56 hygienists' being permitted to conduct the duties that dental hygienists' are requesting to change.

57 Ms. Syd McKenzie spoke in favor of the changes as presented in the meetings' public documents book. She read a  
58 statement into the record. Ms. McKenzie commended the committee for their continued efforts to protect the  
59 safety of the public.  
60

61 **Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has**  
62 **been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)**

63  
64 **\*3. Review, Discussion and Recommendations of Proposed Regulation Changes to R119-15 regarding the**  
65 **language in NAC 631.210--NRS 631.190 (For Possible Action)**  
66

67 \*(1) Discussion and Recommendations to add the word and duty of implementation to New subsection 1(d)  
68 (For Possible Action)  
69

70 Mr. Hunt stated that during the previous board meeting, there was a comment regarding changing the  
71 language to include the term "implementation," however in reviewing the statute, it states that a Dental  
72 Hygienist cannot 'implement' any treatment prior to a Dentist examining a patient; therefore, in order for the  
73 Board to make such a regulatory change would, first, require a statutory change. It was noted that a statutory  
74 change, (a policy change) would need to be sought through the associations as the legislature are the ones  
75 who have to power to change policies. Mr. Hunt noted further that a regulation does not supersede a statute.  
76 Mrs. Shaffer-Kugel read into the record NRS 631.310 and NRS 631.313. Mr. Hunt added that until such time  
77 the legislature changes the policy, the Board cannot change, add or amend the regulation with the requested  
78 change(s). Mrs. Peterson expressed her concerns in regards to radiographs and dentists' currently requiring  
79 dental hygienists' to take them prior to patients being seen by the dentist. Mr. Hunt noted that the  
80 regulations changes were to make the assessment aspects permissible to for a dental hygienist to do prior to  
81 the implementation of treatment. Mrs. Villigan commented that the request stems from the situation  
82 occurring in dental practices not complying with the regulations. Ms. Guillen stated her opinion that the  
83 Board could not make the change to add the term "implement." Mr. Hunt commented that the courts would  
84 rule that such a change to the regulation change violates the statute. He advised the committee members that  
85 they had the option to make no recommendations, recommend making no changes, or that they could approve  
86 to recommend the additional language.  
87

88 MOTION: Board member Guillen made the motion to not include the terms "and implement" and "the," and  
89 to recommend the language as written to the board. Motion was seconded by Board member Villigan.  
90 Discussion: Mrs. Villigan stated that she understood that the Board cannot include language in an attempt to  
91 supersede a statute, and that she hoped to see the statute changed in the future. All were in favor of the  
92 motion; Dr. Shahrestani abstained.  
93

94 \*(2) Discussion and Recommendations to change subsection 2 and add local anesthesia and nitrous oxide  
95 under authorization without requiring supervision by the dentist (For Possible Action)  
96

97 Board member Guillen stated that for section (2) the request was to restore the language to read as it was  
98 originally presented to the Board for adoption, she stated that the documents provided in the committee  
99 members' books states it clearly. Mr. Hunt clarified that the language will indicate that a task can be done  
100 without requiring supervision, therefore only requiring authorization from a dentist. Mrs. Shaffer-Kugel  
101 clarified for the record that dental hygienists' with a Public Health Endorsement cannot administer local  
102 anesthesia or nitrous oxide without the supervision of a dentist; she proceeded to read NAC 631.210.  
103

104 Mr. Hunt noted that currently the statutory structure a dentist is supposed to be supervising the  
105 administration of nitrous oxide and local anesthetic. Ultimately, that the responsibility lies with the dentist.  
106 Mrs. Villigan concurred with Mr. Hunt, that the new language maintains the control with the dentist.  
107

108 MOTION: Board member Villigan made the motion to approve the language as proposed. Motion was  
109 seconded by Ms. Gabriel. All were in favor the motion; Dr. Shahrestani abstained.  
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111  
112  
113

114 4. Public Comment: (Public Comment is limited to three (3) minutes for each individual)

115  
116 Mrs. Shari Peterson stated that regardless if the is in print or not, the reality is that this is already going on in  
117 dental practices and Dental Hygienists' do not want to be coerced into going outside their scope in order to  
118 continue being employed. She stated further that she did not understand the hypocrisy and ignore the fact that the  
119 very things they wanted to see implemented and changed are not coming to fruition and that the illegal practices  
120 were going to continuing occurring with or without the language change. She added that dental hygienists' are  
121 being told they must do radiographs prior to the dentist examining the patient. She concluded that even if the  
122 language stays in the dental practice act, the board would be aiding and abetting the dentist in coercing dental  
123 hygienists and dental assistants to go outside their scope in order to remain employed.

124  
125 Dr. Dragon commented that the NDA's concerns were that the ability for a dental hygienist to assess and diagnose  
126 on their own is risky, as it can lead to misdiagnosis or over-diagnosis. Further that the restorative treatments and  
127 plans can only be determined by the dentist. Lastly, that a dentist must see a prior to asses if a restroravtive plan  
128 needs to be implemented.

129  
130 Mr. David White stated that the NDA was one hundred percent (100%) in alliance with the statute and  
131 regulations. He added that if any dentist is in violation of the rules that they would like to work with the dental  
132 hygienists to see if they can come to common ground. He completed his comment by stating that under no certain  
133 situation do they condone any dentist in violation.

134  
135 Ms. Solie commented that it was brought to the attention of the committee that the common practice may not be  
136 in compliance of the regulations. She asked that dental hygienists' provide notification to the Board of those in  
137 violation and so that dentists' can be held ultimately responsibility. She added that the regulation states "MAY  
138 authorize," meaning that the dentist still has the control to decide if they want to implement to allow for their  
139 dental hygienists to take radiographs and assess a patient prior to having the dentist exam them.

140  
141 Dr. Mark Funke stated that occurrences do arise and that in his office over the years he recalled an occasion where  
142 the ambulance was called after a dental hygienist administered local anesthesia and they went running to him, the  
143 dentist, to take charge of the emergency situation. He added that if a dental hygienist needs help in administering  
144 anesthesia, radiographs, or in removing calculus, they go to the dentist. He emblematically enquired if there was a  
145 benefit to the patient with the proposed changes; if with these proposed changes would there be new continuing  
146 education requirements; and whether or not these proposed changes would entail insurance companies to change  
147 insurance policies.

148  
149 Mr. Hunt stated that the comments just given will be heard and will go before the board for consideration. He  
150 noted that the paramount duty of the board was to protect the public. He added that the current policies were  
151 established to protect the public, not to necessarily benefit the dentist or dental hygienist.

152  
153 Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has been  
154 specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

155 5. Announcements: No announcements were made.

156  
157 \*6. Adjournment (For Possible Action)

158  
159 MOTION: Board member Villigan made the motion to adjourn. Motion was seconded by Board member  
160 Shahrestani. All were in favor of the motion.

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162  
163 Meeting Adjourned at 9:53 am.

164  
165 Respectfully submitted by:

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167 

168 Debra Shaffer-Kugel, Executive Director  
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