

NEVADA STATE BOARD
of
DENTAL EXAMINERS



BOARD MEETING & WORKSHOP

SEPTEMBER 14, 2018

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PUBLIC BOOK

WORKSHOP

**History of Draft Proposed Regulations
NAC 631.2227 and NAC 631.2231**

**History of Draft Proposed Regulation Changes
Anesthesia
NAC 631.2227 and NAC 631.2231**

08/06/2014: First Draft of Proposed Regulations

NAC 631.2227 Inspections and evaluations: Physical facilities and equipment. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* or certificate of site approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.

6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. Except as otherwise provided in this subsection, ancillary equipment must include:

(a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;

(b) Endotracheal tubes and appropriate connectors;

(c) Oral airways;

(d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;

(e) An endotracheal tube type forcep;

(f) A sphygmomanometer and stethoscope;

(g) An electrocardioscope and defibrillator;

- (h) Adequate equipment for the establishment of an intravenous infusion; and
- (i) A pulse oximeter.

8. When administering anesthesia or sedation to pediatric patients the dentist's office must meet the following minimum standards with regard to physical facilities and equipment:

- (a) Pediatric Size Ambu Bag and Masks**
- (b) Pediatric BP Cuffs**
- (c) Laryngoscope with appropriate size blades**
- (d) Intubation tubes multiple sizes**
- (e) Aed with Peds paddles**
- (f) Braselow Tape**
- (g) Small Oral Air Ways**
- (h) Pediatric Bite Block**

➔ A dentist's office inspected or evaluated for the issuance or renewal of a ~~conscious sedation~~ **minimal or moderate sedation** permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e) and (g)

NAC 631.2231 Inspections and evaluations: Emergency drugs. ([NRS 631.190](#), [631.265](#))
Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ **deep sedation, minimal or moderate sedation permit** or certificate of site approval must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
12. Anti-convulsive.

When administering anesthesia or sedation to pediatric patients the dentist's office must meet the following minimum standards with regard to pediatric emergency drugs:

- (a) Epi Pen Jr**
- (b) Adenosine**
- (c) Aminodarone**
- (d) Magnesium Sulfate**
- (e) Procainamide**

↳ A dentist's office that is inspected or evaluated for the issuance or renewal of a **conscious sedation** *minimal or moderate sedation* permit is not required to maintain the emergency drugs described in subsections 4, 5, 9 and 11.

07/29/2015: Revised Proposed Regulations

NAC 631.2227 Inspections and evaluations: Physical facilities and equipment. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* or certificate of site approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.

6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. Except as otherwise provided in this subsection, ancillary equipment must include:

(a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;

(b) Endotracheal tubes and appropriate connectors;

(c) Oral airways;

(d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;

(e) An endotracheal tube type forcep;

(f) A sphygmomanometer and stethoscope;

(g) An electrocardioscope and defibrillator;

(h) Adequate equipment for the establishment of an intravenous infusion; and

(i) A pulse oximeter.

(j) *carnography*

8. When administering anesthesia or sedation to pediatric patients the dentist's office must meet the following minimum standards with regard to physical facilities and equipment:

- (i) Pediatric Size Ambu Bag and Masks*
- (j) Pediatric BP Cuffs*
- (k) Laryngoscope with appropriate size blades*
- (l) Intubation tubes multiple sizes*
- (m) Aed with Peds paddles*
- (n) Braselow Tape*
- (o) Small Oral Air Ways*
- (p) Pediatric Bite Block*

→ A dentist's office inspected or evaluated for the issuance or renewal of a ~~conscious sedation~~ *minimal or moderate sedation* permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e) and (g)

NAC 631.2231 Inspections and evaluations: Emergency drugs. ([NRS 631.190](#), [631.265](#))
Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, minimal or moderate sedation permit* or certificate of site approval must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
12. Anti-convulsive.

When administering anesthesia or sedation to pediatric patients the dentist's office must meet the following minimum standards with regard to pediatric emergency drugs:

- (f) Epi Pen Jr*
- (g) Adenosine*
- (h) Aminodarone*
- (i) Magnesium Sulfate*
- (j) Procainamide*

→ A dentist's office that is inspected or evaluated for the issuance or renewal of a ~~conscious sedation~~ *minimal or moderate sedation* permit is not required to maintain the emergency drugs described in subsections 4, 5, 9 and 11.

04/27/2016: Revised Proposed Regulations:

NAC 631.2227 Inspections and evaluations: Physical facilities and equipment. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~ *deep sedation, moderate sedation permit, or pediatric moderate sedation* or certificate of site for the administration of general anesthesia permit, *deep sedation, moderate sedation, or pediatric moderate sedation* approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.

6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. Except as otherwise provided in this subsection, ancillary equipment must include:

(a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;

(b) Endotracheal tubes and appropriate connectors;

(c) Oral airways;

(d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;

(e) An endotracheal tube type forcep;

(f) A sphygmomanometer and stethoscope;

(g) An electrocardioscope and defibrillator;

(h) Adequate equipment for the establishment of an intravenous infusion; and

(i) A pulse oximeter.

(j) *capnography monitor*

8. *When administering anesthesia or sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the following minimum standards with regard to physical facilities and equipment:*

- (g) Pediatric Size Ambu Bag and Masks*
- (r) Pediatric BP Cuffs*
- (s) Laryngoscope with appropriate size blades*
- (t) Intubation tubes multiple sizes*
- (u) Aed with Peds paddles*
- (v) Braselow Tape*
- (w) Small Oral Air Ways*
- (x) Pediatric Bite Block*

→ A dentist's office inspected or evaluated for the issuance or renewal of a ~~conscious sedation moderate sedation, or pediatric moderate sedation~~ permit is not required to have the ancillary equipment described in paragraphs 7 (a), (b), (e) and (g), *or (j)*.

NAC 631.2231 Inspections and evaluations: Emergency drugs. ([NRS 631.190](#), [631.265](#))
Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit-deep sedation, moderate sedation or pediatric moderate sedation permit~~ or certificate of site approval for *deep sedation, moderate sedation or pediatric moderate sedation permit* must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
12. Anti-convulsive.

2. *When administering anesthesia or sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the following minimum standards with regard to pediatric emergency drugs:*

- (k) Epi Pen Jr*
- (l) Adenosine*
- (m) Aminodarone*
- (n) Magnesium Sulfate*
- (o) Procainamide*

↳ A dentist's office that is inspected or evaluated for the issuance or renewal of a **conscious sedation moderate sedation, or pediatric moderate sedation** permit is not required to maintain the emergency drugs described in subsections 4, 5, 9 and 11.

05/18/2016-FINAL REVISED Proposed Regulations

NAC 631.2227 Inspections and evaluations *general anesthesia; deep sedation*: Physical facilities and equipment. ([NRS 631.190](#), [631.265](#)) A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit ~~conscious sedation permit~~ or *deep sedation* or certificate of site for the administration of general anesthesia permit, *deep sedation* approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.

6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. Except as otherwise provided in this subsection, ancillary equipment must include:

(a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;

(b) Endotracheal tubes and appropriate connectors;

(c) Oral airways;

(d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;

(e) An endotracheal tube type forcep;

(f) A sphygmomanometer and stethoscope;

(g) An electrocardioscope and defibrillator;

(h) Adequate equipment for the establishment of an intravenous infusion; and

(i) A pulse oximeter.

(j) *capnography monitor*

(h) A pulse oximeter.

8. When administering moderate sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the following additional standards with regard to physical facilities and equipment:

(ee) Pediatric size ambu bag and masks

(ff) Pediatric blood pressure cuffs

(gg) Laryngeal Mask Airways

(hh) An defibrillator with Peds pads or AED

(ii) Appropriate oral air ways or nasal airways

NAC 631.2231 Inspections and evaluations; *general anesthesia and deep sedation:* Emergency drugs. (NRS 631.190, 631.265) Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious sedation permit~~, *deep sedation*, or certificate of site approval for *general anesthesia or deep sedation permit* must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

1. Vasopressor;
2. Corticosteroid;
3. Bronchodilator;
4. Muscle relaxant;
5. Intravenous medication for the treatment of cardiopulmonary arrest;
6. Appropriate drug antagonist;
7. Antihistaminic;
8. Anticholinergic;
9. Antiarrhythmic;
10. Coronary artery vasodilator;
11. Anti-hypertensive; and
12. Anti-convulsive.

2. When administering general anesthesia or deep sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the additional minimum standards with regard to pediatric emergency drugs:

(p) Pediatric Auto-injector Epinephrine or appropriate dosages of epinephrine

(q) Adenosine

(r) Aminodarone

(s) Magnesium Sulfate

(t) Procainamide

NEW REGULATION

Inspections and evaluations: moderate sedation or pediatric moderate; Emergency drugs. (NRS 631.190, 631.265) Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a moderate sedation permit, ~~conscious sedation permit~~—or pediatric moderate sedation, or certificate of site approval for moderate

8. *When administering general anesthesia or deep sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the additional minimum standards with regard to physical facilities and equipment:*

- (y) Pediatric size ambu bag and masks*
- (z) Pediatric blood pressure cuffs*
- (aa) Laryngoscope with appropriate size blades*
- (bb) Intubation tubes multiple sizes*
- (cc) An electrocardioscope and defibrillator with Peds pads*
- (dd) Small oral air ways or nasal airways*

New Regulations:

Inspections and evaluations; moderate sedation; pediatric moderate sedation: Physical facilities and equipment. (NRS 631.190, 631.265) A dentist's office inspected or evaluated for the issuance or renewal of a moderate sedation, pediatric moderate sedation permit or certificate of site for the administration of moderate sedation or pediatric moderate sedation approval must meet the following minimum standards with regard to physical facilities and equipment:

1. *The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.*

2. *The operating table or dental chair must:*

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. *The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.*

4. *Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.*

5. *A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.*

6. *A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.*

7. *Except as otherwise provided in this subsection, ancillary equipment must include:*

(a) Laryngeal Mask Airways

(b) Oral airways;

(c) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets

(d) An endotracheal tube type forcep

(e) A sphygmomanometer and stethoscope;

(f) An defibrillator or AED;

(g) Adequate equipment for the establishment of an intravenous infusion; and/or IO

sedation permit or pediatric moderate sedation must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

- 1. Vasopressor;*
- 2. Corticosteroid;*
- 3. Bronchodilator;*
- 4. Appropriate drug antagonist;*
- 5. Antihistaminic;*
- 6. Anticholinergic;*
- 7. Coronary artery vasodilator;*
- 8. Anti-convulsive.*

2. When administering moderate sedation to pediatric patients as set forth in NAC 631.004, the dentist's office must meet the following additional standards with regard to pediatric emergency drugs:

- (a) Pediatric Auto-injector Epinephrine or appropriate dosages of epinephrine*

Proposed Amended Regulation Language

**Proposed Regulation Language
(NAC 631.2227 & NAC 631.2231)**

NAC 631.2227-Amend

7. Except as otherwise provided in this subsection, ancillary equipment must include:

- (a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;
- (b) Endotracheal tubes and appropriate connectors;
- (c) Oral airways;
- (d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;
- (e) An endotracheal tube type forcep;
- (f) A sphygmomanometer and stethoscope;
- (g) An electrocardioscope ~~and defibrillator~~;
- (h) Adequate equipment for the establishment of an intravenous infusion; and
- (i) A pulse oximeter; ~~and~~
- (j) A capnography monitor; *and*
- (k) A defibrillator*

8. In addition to the requirements of subsection 7, if general anesthesia, deep sedation or moderate sedation is administered at the dentist's office to a patient 12 years of age or younger, the following equipment must be available at the dentist's office:

- (a) A pediatric size ambu bag and masks;
- (b) Pediatric blood pressure cuffs;
- (c) A laryngoscope complete with an adequate selection of blades for use on pediatric patients;
- (d) Appropriately sized endotracheal tubes and appropriate connectors
- (e) An electrocardioscope; ~~and defibrillator~~;

- (f) Pediatric-pads for use with the electrocardioscope; ~~and defibrillator; and~~
- (g) Small oral and nasal airways
- (h) *A defibrillator; and*
- (i) *Pediatric –pads for use with the defibrillator*

(After Section 8) A dentist's office inspected or evaluated for the issuance or renewal of a moderate sedation permit for the administration of moderate sedation to a patient 12 years of age or younger is not required to have the ancillary equipment described in paragraphs (c), (d), (e), (f) of subsection 8.

NAC 631.2231 – Emergency Drugs

2. In addition to the requirements of subsection 1, ~~if general anesthesia, deep sedation or moderate sedation is administered at a dentist's office to a patient 12 years of age or younger~~, a dentist's office where sedation or anesthesia is administered to a patient 12 years of age or younger, the dentist's office must maintain the following emergency drugs:

(a) *For the administration of general anesthesia or deep sedation:*

- ~~(a)~~ (1) Appropriate dosages of epinephrine or pediatric epinephrine auto-injector
- ~~(b)~~ (2) Adenosine;
- ~~(c)~~ (3) Aminodarone;
- ~~(d)~~ (4) Magnesium sulfate; and
- ~~(e)~~ (5) Procainamide

(b) *For the administration of moderate sedation:*

- (1) *Appropriate dosages of epinephrine or pediatric epinephrine auto-injector*

Current Regulation Language for
NAC 631.2227
NAC 631.2231

15. Hyperventilation syndrome; and

16. Syncope.

Sec. 12. NAC 631.2227 is hereby amended to read as follows:

631.2227 A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious~~ moderate sedation permit or certificate of site approval must meet the following minimum standards with regard to physical facilities and equipment:

1. The operating theater must be large enough to accommodate the patient adequately on a table or in a dental chair and to allow an operating team consisting of at least three persons to move freely about the patient.

2. The operating table or dental chair must:

(a) Allow the patient to be placed in a position such that the operating team can maintain the airway;

(b) Allow the operating team to alter the patient's position quickly in an emergency; and

(c) Provide a firm platform for the management of cardiopulmonary resuscitation.

3. The lighting system must be adequate to allow an evaluation of the patient's skin and mucosal color. An alternate lighting system must derive its power from batteries and must be sufficiently intense to allow completion of any procedure underway at the time of a general power failure.

4. Suction equipment must be available that allows aspiration of the oral and pharyngeal cavities. An alternate suction device that will function effectively during a general power failure must be available.

5. A system for delivering oxygen must have adequate full-face masks and appropriate connectors, and be capable of delivering oxygen to the patient under positive pressure. An adequate alternate system for delivering oxygen is also required.

6. A recovery area must be provided that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area may be the operating theater. A member of the staff must be able to observe the patient at all times during the recovery.

7. Except as otherwise provided in this subsection, ancillary equipment must include:

(a) A laryngoscope complete with an adequate selection of blades and spare batteries and bulbs;

(b) Endotracheal tubes and appropriate connectors;

(c) Oral airways;

(d) A tonsillar or pharyngeal suction tip adaptable to all office suction outlets;

(e) An endotracheal tube type forcep;

(f) A sphygmomanometer and stethoscope;

(g) An electrocardioscope and defibrillator;

(h) Adequate equipment for the establishment of an intravenous infusion; ~~and~~

(i) A pulse oximeter ~~[-]~~; *and*

(j) A capnography monitor.

→ ~~[A]~~ *Except as otherwise provided in subsection 8, a* dentist's office inspected or evaluated for the issuance or renewal of a ~~conscious~~ *moderate* sedation permit is not required to have the ancillary equipment described in paragraphs (a), (b), (e), ~~and~~ (g) ~~[-]~~ *and (j).*

8. *In addition to the requirements of subsection 7, if general anesthesia, deep sedation or moderate sedation is administered at the dentist's office to a patient 12 years of age or younger, the following equipment must be available at the dentist's office:*

- (a) A pediatric size ambu bag and masks;*
- (b) Pediatric blood pressure cuffs;*
- (c) A laryngoscope complete with an adequate selection of blades for use on pediatric patients;*
- (d) Appropriately sized endotracheal tubes and appropriate connectors;*
- (e) An electrocardioscope and defibrillator;*
- (f) Pediatric pads for use with an electrocardioscope and defibrillator; and*
- (g) Small oral and nasal airways.*

Sec. 13. NAC 631.2229 is hereby amended to read as follows:

631.2229 A dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious~~ *moderate* sedation permit or certificate of site approval must meet the following minimum standards with regard to the records of patients:

1. Adequate medical history , ~~and~~ records of physical evaluation ~~+~~ *and American Society of Anesthesiologists acuity classification.*
2. Records of the administration of anesthesia must include:
 - (a) The patient's ~~blood pressure and pulse;~~ *vital signs;*
 - (b) The names of the drugs and the amounts *and times* administered;
 - (c) The length of the procedure; and
 - (d) Any complications of anesthesia.

Sec. 14. NAC 631.2231 is hereby amended to read as follows:

631.2231 **1.** Except as otherwise provided in this section, a dentist's office inspected or evaluated for the issuance or renewal of a general anesthesia permit, ~~conscious~~ **moderate** sedation permit or certificate of site approval must maintain emergency drugs of the following categories which must be immediately available for use on the patient:

- ~~{1-}~~ **(a)** Vasopressor;
- ~~{2-}~~ **(b)** Corticosteroid;
- ~~{3-}~~ **(c)** Bronchodilator;
- ~~{4-}~~ **(d)** Muscle relaxant;
- ~~{5-}~~ **(e)** Intravenous medication for the treatment of cardiopulmonary arrest;
- ~~{6-}~~ **(f)** Appropriate drug antagonist;
- ~~{7-}~~ **(g)** Antihistaminic;
- ~~{8-}~~ **(h)** Anticholinergic;
- ~~{9-}~~ **(i)** Antiarrhythmic;
- ~~{10-}~~ **(j)** Coronary artery vasodilator;
- ~~{11-}~~ **(k)** Anti-hypertensive; and
- ~~{12-}~~ **(l)** Anti-convulsive.

~~{A}~~

2. *In addition to the requirements of subsection 1, if general anesthesia, deep sedation or moderate sedation is administered at a dentist's office to a patient 12 years of age or younger, the dentist's office must maintain the following emergency drugs:*

- (a)** *Appropriate dosages of epinephrine or a pediatric epinephrine auto-injector;*
- (b)** *Adenosine;*
- (c)** *Aminodarone;*

(d) Magnesium sulfate; and

(e) Procainamide.

3. *Except as otherwise provided in subsection 2, a dentist's office that is inspected or evaluated for the issuance or renewal of a ~~conscious~~ moderate sedation permit is not required to maintain the emergency drugs described in ~~subsections 4, 5, 9~~ paragraphs (d), (e), (i) and ~~11~~ (k) of subsection 1.*

Sec. 15. NAC 631.2235 is hereby amended to read as follows:

631.2235 1. ~~{A dentist whose office}~~ *The persons performing an inspection or evaluation of a dentist and his or her office for the ~~Board determines has failed the inspection or evaluation is not entitled to have~~ issuance or renewal of a general anesthesia permit or ~~conscious~~ moderate sedation permit ~~issued~~ shall grade the dentist as passing or ~~renewed.~~ failing to meet the requirements set forth in NAC 631.2219 to 631.2231, inclusive. Within 72 hours after completing the inspection or evaluation, each evaluator shall report his or her recommendation for passing or failing to the Executive Director, setting forth the details supporting his or her conclusion.*

2. *If the dentist meets the requirements set forth in NAC 631.2219 to 631.2231, inclusive, the Board will issue the general anesthesia permit or moderate sedation permit, as applicable.*

3. *If the dentist does not meet the requirements set forth in NAC 631.2219 to 631.2231, inclusive, the Executive Director shall issue a written notice to the dentist that identifies the reasons he or she failed the inspection or evaluation.*

4. *A dentist who has received a notice of failure from the Board ~~may~~ pursuant to subsection 3:*

DRAFT MINUTES

Draft Minutes:
07/13/2018 Board Meeting



NEVADA STATE BOARD OF DENTAL EXAMINERS
 6010 S. Rainbow Boulevard, Suite A1
 Las Vegas, NV 89118



Video Conferencing was available for this meeting at the Nevada State Board of Medical Examiners Office Conference Room located at: 9600 Gateway Drive; Reno, NV 89521

PUBLIC MEETING

Friday, July 13, 2018
 9:11 a.m.

Board Meeting Agenda

Please Note: The Nevada State Board of Dental Examiners may hold board meetings via video conference or telephone conference call. The public is welcomed to attend the meeting at the Board office located at 6010 S. Rainbow Blvd, Suite A1; Las Vegas, Nevada 89118; or in the Conference room of the Nevada State Board of Medical Examiners office located at 9600 Gateway; Reno, NV 89521 (when applicable).

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

Public Comment time is available after roll call (beginning of meeting) and prior to adjournment (end of meeting). Public Comment is limited to three (3) minutes for each individual. You may provide the Board with written comment to be added to the public record.

Asterisks () denote items on which the Board may take action.
 Action by the Board on an item may be to approve, deny, amend, or table.*

1. Call to Order, roll call, and establish quorum

Dr. Blasco called the meeting to order and Mrs. Shaffer-Kugel conducted the following roll call:

- Dr. Timothy Pinther ("Dr. Pinther") ----- PRESENT
- Dr. R. Michael Sanders ("Dr. Sanders") ----- PRESENT
- Dr. Byron Blasco ("Dr. Blasco") ----- PRESENT
- Dr. Jason Champagne ("Dr. Champagne") -- EXCUSED
- Dr. Ali Shahrestani ("Dr. Shahrestani") ----- PRESENT
- Dr. Gregory Pisani ("Dr. Pisani") ----- PRESENT
- Dr. Brendan Johnson ("Dr. Johnson") ----- PRESENT
- Ms. M Sharon Gabriel ("Ms. Gabriel") ----- PRESENT
- Ms. Yvonne Bethea ("Ms. Bethea") ----- PRESENT
- Ms. Betty Pate ("Ms. Pate") ----- EXCUSED
- Ms. Nikki Harris ("Ms. Harris") ----- PRESENT

Others Present: Melanie Bernstein Chapman, Board General Counsel; Sophia Long, Deputy Attorney General/Board Co-Counsel; Debra Shaffer-Kugel, Executive Director.

Public Attendees: Dr. Jerome Cutler, L. Kristopher Rath, Esquire; Daniel Bouer, Cameraman for LVDA; Ray Gates, Esquire; Dr. Robert Talley; Jay Morgenstern; Mike Mosely, Advanced Dental CE; Dr. Richard Dragon.

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

Board President Blasco opened the floor for public comment. There were no verbal comments. There was written comment submitted regarding opposition of the approval of the course by Advanced Dental CE.

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

64
65 **MOTION:** Dr. Pisani moved that the Board go out of order to agenda item (4)(f)(1). Motion was seconded by
66 Dr. Sanders. The motion was unanimously approved by all Board members present.
67

68 ***f. Petition for Review of Application for Licensure pursuant to NRS 631.240** (For Possible Action)
69

70 (1) Jong Jin Kim, DDS
71

72 Dr. Blasco directed the Board's attention to the Board's general counsel, Melanie Bernstein-Chapman. Mrs.
73 Bernstein-Chapman stated that Dr. Jong Jin Kim was unable to attend the meeting since he was in South
74 Korea, however, that his attorney, Mr. L. Kristopher Rath was present on his behalf. Mrs. Bernstein-Chapman
75 gave a quick synopsis of the reasoning for his request for licensure and his return to the United States.
76 Additionally, she noted some typographical errors that needed amending, and noted further that the provisions
77 of the proposed stipulation agreement remained in effect. They briefly discussed Dr. Kim's previous stipulation
78 agreement with the board. Mrs. Bernstein-Chapman added that Dr. Kim's attorney submitted the attached
79 petition to come before the board for consideration of approval for licensure. Dr. Sanders expressed his
80 concerns of Dr. Kim's wife still being ill and his need to travel. Mr. Rath expressed that Dr. Kim's wife was in
81 submission and that Dr. Kim would be working as an independent contractor.
82

83 **MOTION:** Dr. Sanders moved that the Board approve agenda item (4)(f)(1) and (4)(g)(1) regarding Dr.
84 Jong Jin Kim. Motion seconded by Dr. Johnson. Motion was unanimously approved by the
85 Board members present at the meeting.
86

87 ***g. Consideration of Stipulation Agreement contingent upon approval of dental licensure**
88 **pursuant to NRS 631.240** (For Possible Action)
89

90 (1) Jong Jin Kim, DDS
91

92 *See Motion under (4)(f)(1).*
93

94 **MOTION:** Dr. Pisani moved that the Board return to agenda order. Motion seconded by Dr. Sanders.
95 Motion was unanimously approved by the Board members present at the meeting.
96
97

98 ***3. Executive Director's Report** (For Possible Action)
99

100 ***a. Minutes - NRS 631.190** (For Possible Action)
101

102 (1) 05/11/2018 – Board Meeting
103

104 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel stated that every Board
105 member present should have had the opportunity to review the proposed draft minutes and inquired if
106 there were any amendments to be made. No changes were offered or noted. Dr. Blasco called for a
107 motion.
108

109 **MOTION:** Dr. Pisani moved that the Board adopt the draft minutes of May 11, 2018. Motion was
110 seconded by Dr. Shahrestani. With no further discussion, the motion was unanimously
111 approved.
112

113 ***b. Financials - NRS 631.180/NRS 631.190** (For Possible Action)
114

115 (1) Review Balance Sheet and Statement of Revenues, Expenses and Balances for period
116 July 1, 2017 to May 31, 2018 (Informational Purposes only)
117

118 Dr. Blasco drew the Board's attention to Ms. Hummel to go over the review of the financial statements.
119 Mrs. Hummel stepped forward to review the financials with the Board. She noted that she would have the
120 fiscal end budget at the next Board meeting.
121

122 *c. Authorized Investigative Complaints - NRS 631.360 (For Possible Action)
123

124 (1) RDH Z - NRS 631.3475(4) and NAC 631.210
125

126 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
127 violations of RDH Z and recommended that the Board authorize an investigation against RDH Z.
128

129 **MOTION:** Dr. Pinther moved that the Board authorize the investigation against RDH Z. Motion was
130 seconded by Dr. Sanders. With no further discussion, the motion was unanimously
131 approved.
132

133
134 (2) Dr. V - NRS 631.3475(4) and NRS 631.349
135

136 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
137 violations of Dr. V and recommended that the Board authorize an investigation against Dr. V.
138

139 **MOTION:** Dr. Pisani moved that the Board authorize the investigation against Dr. V. Motion was
140 seconded by Ms. Gabriel. With no further discussion, the motion was unanimously
141 approved.
142

143
144 (3) Dr. W - NRS 631.3475(3) and NAC 631.155(3)
145

146 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
147 violations of Dr. W and recommended that the Board authorize an investigation against Dr. W.
148

149 **MOTION:** Dr. Pinther moved that the Board authorize the investigation against Dr. W. Motion was
150 seconded by Dr. Shahrestani. With no further discussion, the motion was unanimously
151 approved.
152

153
154 (4) Dr. X - NRS 631.3475(4) and NAC 631.230(1)(c)
155

156 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
157 violations of Dr. X and recommended that the Board authorize an investigation against Dr. X.
158

159 **MOTION:** Dr. Pisani moved that the Board authorize the investigation against Dr. X. Motion was
160 seconded by Dr. Sanders. With no further discussion, the motion was unanimously
161 approved.
162

163
164 (5) Dr. Y - NRS 631.215(2)(h)(1 and 2) and NAC 631.275
165

166 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
167 violations of Dr. Y and recommended that the Board authorize an investigation against Dr. Y.
168

169 **MOTION:** Dr. Shahrestani moved that the Board authorize the investigation against Dr. Y. Motion was
170 seconded by Dr. Pinther. With no further discussion, the motion was unanimously approved.
171

172
173 (6) Dr. Z - NRS 631.215(2)(h)(1 and 2) and NAC 631.275
174

175 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel went over the alleged
176 violations of Dr. Z and recommended that the Board authorize an investigation against Dr. Z.
177

178 **MOTION:** Dr. Pisani moved that the Board authorize the investigation against Dr. Z. Motion was
179 seconded by Dr. Pinther. With no further discussion, the motion was unanimously
180 approved.
181

182 *d. Travel – NRS 631.190 (For Possible Action)
183

- 184 (1) Approve 6 Board Members, Executive Director and General Counsel’s membership to the
185 American Association of Dental Boards (AADB)/AADA) for period July 1, 2018 through
186 June 30, 2019 (For Possible Action)
187

188 Dr. Blasco drew the Board’s attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel indicated that she was
189 seeking approval for board members to travel for the AADB/AADA meetings for the next fiscal year. She
190 called for volunteers that would like to attend the meetings. The following board members volunteered to
191 attend: Dr. Shahrestani, Dr. Sanders, Ms. Gabriel, Dr. Pinther, Dr. Pisani, and Mrs. Bethea.
192

193 **MOTION:** Dr. Pisani moved that the Board approve the 6 board members noted above, and the
194 Executive Director and General Counsel membership for the period July 1, 2018 through June 30,
195 2019. Motion was seconded by Dr. Blasco. With no further discussion, the motion was
196 unanimously approved.
197

- 198 (2) Approve travel for the Board appointed members to attend the AADB and AADA Annual
199 Meeting for September 22 & 23, 2018 – Chicago, IL (For Possible Action)
200

201 Dr. Blasco drew the Board’s attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel asked for approval of
202 travel to the September AADB/AADA annual meeting.
203

204 **MOTION:** Dr. Pisani moved that the Board approve travel for the Board appointed members, the
205 Executive Director and General Counsel to attend the September 2018 AADA/AADB meeting in
206 Chicago, IL. Motion was seconded by Ms. Gabriel. With no further discussion, the motion was
207 unanimously approved.
208

209 *e. Furniture/Equipment: (For Possible Action)
210

- 211 (1) Approval of security system for the front door (For Possible Action)
212

213 Dr. Blasco drew the Board’s attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel stated to the Board that
214 they were wanting to place a security system in the front door. She explained that the set up would be
215 similar to the Medical Board office next door, and that visitors would have to be buzzed in.
216

217 **MOTION:** Ms. Gabriel moved that the Board approve the purchase to place a security feature to
218 the main entrances of the Board office. Motion was seconded by Dr. Shahrestani. With no further
219 discussion, the motion was unanimously approved.
220

221
222
223 *4. General Counsel’s Report (For Possible Action)
224

225 *a. Legal Actions/Lawsuit(s) Update
226

- 227 (1) District Court Case(s) Update
228

229 Dr. Blasco drew the Board’s attention to Mrs. Chapman. Mrs. Chapman indicated to the Board that the
230 Board, herself, a DSO and Executive Director were subject of a petition of writ of prohibition by Dr. Adrian
231 Ruiz and was filed and set on an order shortening time and was heard yesterday, July 12th . She stated
232 that the Judge overseeing the matter took and read all arguments by all parties, ultimately fulling that the
233 petition be denied, and petition and was closed. Mrs. Chapman briefly discussed the argument of the
234 plaintiff’s petition. She noted further that there was another suit that she was made aware of, however,
235 that they had not been served and, therefore, would reserve information until such time that they are
236 served.
237

238 ***b. Consideration of Stipulation Agreements** (For Possible Action)
239

240 (1) Scott Wilson, DDS
241

242 Dr. Blasco directed the attention to the Board general counsel, Melanie Bernstein Chapman. Mr. Ray Gates was
243 present on behalf of Dr. Wilson. Mrs. Bernstein Chapman went over the provisions of the proposed Non-
244 disciplinary action plan stipulation agreement.
245

246 **MOTION:** Dr. Pinther moved that the stipulation agreement between the Nevada State Board of Dental
247 Examiners and Scott Wilson, DDS be adopted. Motion seconded by Dr. Johnson. Discussion:
248 Dr. Pisani noted that as a former DSO for the board, non-disciplinary action plans are the
249 type of plans that DSO's strive for when problems are found in investigating alleged
250 complaints. Motion was unanimously approved by the Board members present at this
251 meeting, and Dr. Pisani abstained from the vote.
252
253

254 ***c. Request the following Board Member be appointed to Review Panel to review the**
255 **investigation regarding Dr. Y in lieu of Dr. Pisani** (For Possible Action)
256

257 (1) Timothy Pinther, DDS
258

259 Dr. Blasco directed the attention to the Board's general counsel. Mrs. Bernstein Chapman stated to the Board
260 of a potential conflict to have Dr. Pisani review the case of Dr. Y, and therefore, asked that the Board consider
261 appointed another board member, such as Dr. Pinther, to the Review Panel to review the case of Dr. Y.
262

263 **MOTION:** Dr. Shahrestani moved that the Dr. Pinther be appointed to the Review Panel to review the
264 investigation regarding Dr. Y in lieu of Dr. Pisani. Motion seconded by Dr. Johnson. Dr. Pisani
265 abstained from the vote. Motion was unanimously approved by the Board members present
266 at the meeting.
267
268
269

270 ***d. Consideration of Application to Reactivate Inactive License** (For Possible Action)
271

272 (1) Jerome Cutler, DDS
273

274 Dr. Blasco directed the Board's attention to the Board's general counsel, Mrs. Bernstein Chapman. Mrs.
275 Bernstein Chapman gave stated that Dr. Jerome Cutler submitted a reactivation application, however, that Dr.
276 Cutler had actions in the State of Arizona. She noted that Dr. Cutler was present to answer any questions the
277 Board may have. Dr. Pinther inquired if Dr. Cutler had any pending discipline, to which Dr. Cutler stated he did
278 not. There was some discussion regarding the procedure that Dr. Cutler had issues with in Arizona, but Dr.
279 Cutler stated that he did not have any plans to do the procedure in question while licensed in Nevada.
280

281 **MOTION:** Dr. Pisani moved that the Board approve the reactivation of Dr. Cutler's license to active
282 status and that the stipulation agreement between the Nevada State Board of Dental
283 Examiners and Jerome Cutler, DDS be adopted. Motion seconded by Dr. Pinther. Dr.
284 Shahrestani abstained from the vote. Motion was unanimously approved by the Board
285 members present at the meeting.
286

287 ***e. Consideration of Stipulation Agreement contingent upon approval to reactivate**
288 **dental license to active status - NAC 631.170** (For Possible Action)
289

290 (1) Jerome Cutler, DDS
291

292 *See Motion under (4)(d)(1).*
293
294

295 *h. Approval of the proposal for outside legal counsel regarding the pending lawsuit filed
296 against certain members and the Board NRS 631.190 (For Possible Action)
297

298 (1) Lee Drizin, Esquire
299

300 Dr. Blasco directed the Board's attention to the Board's general counsel. Mrs. Bernstein Chapman stated that
301 because she was personally named in lawsuits against the Board, outside counsel was sought. She stated that
302 Mr. Lee Drizin agreed to as counsel for the Board should his services be needed. Mrs. Shaffer-Kugel noted to
303 the Board that Mr. Drizin had represented the board as special counsel since 2002, and that he added that he
304 was well versed with the board.
305

306 **MOTION:** Dr. Pinther moved that the Board approve Mr. Lee Drizin to act as the Board's outside legal
307 counsel for the Board and its members for any pending lawsuits against the Board and or
308 staff. Motion seconded by Dr. Sanders. Motion was unanimously approved by the Board
309 members present at the meeting.
310
311
312

313 *5. Old Business: (For Possible Action)
314

315 *a. Consideration of Application to become an approved provider to train dentists in
316 the administration of Botox, Dermal and Soft Tissue fillers (SB 101) (For Possible Action)
317

318 (1) Advanced Dental CE
319

320 Dr. Blasco directed the attention to the Board's Executive Director, Debra Shaffer-Kugel. Mrs. Shaffer-Kugel
321 stated that Mr. Mosely was present. Mrs. Shaffer-Kugel briefly reminded the Board of Advance Dental's
322 presentation from the previous board meeting. She added that they did make the changes as requested by
323 the board, and noted that the course material was from a Dr. Solomon, who was currently in the process of
324 obtaining a limited license. Mr. Mosely stepped forward to answer any questions that the Board may have. Dr.
325 Pisani inquired if the changes requested by the Board at the previous meeting were completed, to which Mrs.
326 Shaffer-Kugel stated they had made the requested changes to the course. Dr. Pisani expressed that it was not
327 the Board's position to decide whether or not the content of the course belonged to someone else or to
328 Advanced Dental CE. Mrs. Bernstein Chapman stated that she did propose an indemnification agreement
329 between Advanced Dental CE and the Board, to protect the Board should any litigation arise regarding the
330 course in question. Mrs. Shaffer-Kugel stated that the course was re-reviewed, and it included a letter of
331 understanding with LVI and they are now working with Touro University, which she noted that Touro University
332 filed a permanent facility registration with the Board office.
333

334 **MOTION:** Dr. Pisani moved that the Board approve the CE provider application contingent upon the
335 signing of the indemnification contract by the Board's general counsel and Advanced Dental
336 CE. Motion was seconded by Dr. Sanders. Dr. Johnson abstained from the vote. Motion was
337 unanimously approved by the Board members present at the meeting.
338
339
340
341

342 *6. New Business (For Possible Action)
343

344 *a. Consideration of Application for Licensure by Endorsement - NRS 622 (For Possible Action)
345

346 (1) Jay Morgenstern, DMD
347

348 Dr. Blasco directed the attention to the Board's Executive Director, Debra Shaffer-Kugel. Mrs. Shaffer-Kugel
349 stated that Dr. Jay Morgenstern submitted an application for Licensure by Endorsement; however, the
350 application was rejected due to Dr. Morgenstern not actively practicing for more than two (2) years. Mr.
351 Morgenstern was present and stepped forward to answer any questions that the Board may have. Dr.
352 Morgenstern stated that he traveled for some time and that he moved to Nevada and that he was
353 approved to volunteer at the UNLV School of Dental Medicine, but cannot practice without a license. Dr.
354 Morgenstern presented affidavits showing different volunteering hours that he completed recently in other

355 states, as well as some missions he completed recently showing that he does have recent clinical
356 practice. He added that he hoped to practice as a volunteer at UNLV and other volunteering programs.

357
358 **MOTION:** Dr. Sanders moved that the Board approve the Dr. Jay Morgenstern's application for
359 licensure by endorsement. Motion was seconded by Dr. Johnson. Motion was unanimously
360 approved by the board members present at the meeting.

361
362 ***b. Approval/Rejection of Moderate Sedation Training Program – NAC 631.2213** (For Possible Action)

- 363
364 (1) DOCS Education in Collaboration with Oregon Health & Science University School
365 of Dentistry – IV Sedation for Dentistry

366
367 Dr. Blasco directed the attention to Dr. Brendan Johnson. Dr. Johnson stated that he would like to TABLE this
368 agenda item.

369
370 **MOTION:** Dr. Pisani moved that the Board table agenda item (6)(b)(1). Motion seconded by Ms. Gabriel.
371 Motion was unanimously approved by the Board members present at the meeting.

372
373 ***c. Appoint the following licensees to the Anesthesia Subcommittee to work with the**
374 **Anesthesia Resource Group to develop the emergency scenarios and**
375 **evaluation/inspection forms based on the adopted amend to the anesthesia**
376 **regulations LCB No: R004-17** (For Possible Action)

- 377
378 (1) A. Ted Twesme, DDS
379 (2) Amanda Okundaye, DDS
380 (3) Joshua Saxe, DDS

381
382 Dr. Blasco directed the attention to the Board's Executive Director, Debra Shaffer-Kugel. Mrs. Shaffer-Kugel
383 stated that the subcommittee would work with the Anesthesia Resource Group on the anesthesia regulations.

384
385 **MOTION:** Dr. Pinther moved that the Board approve the appointment of Dr. Twesme, Dr. Okundaye,
386 and Dr. Saxe to be appointed to the Anesthesia subcommittee. Motion seconded by Dr.
387 Sanders. Motion was unanimously by the Board present at this meeting.

388
389
390 ***d. Appointment of Disciplinary Screening Officer(s) (Investigators) - NRS 631.190**
391 (For Possible Action)

- 392
393 (1) Allison Andresen, DDS, FACP

394
395 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel stated that she was
396 requesting that Dr. Allison Andresen be appointed as a DSO (investigator) for the Board. She stated that
397 Dr. Thiriot reviewed the application and he recommended approval of Dr. Andresen's application.

398
399 **MOTION:** Dr. Pinther moved that the board approve the appointment of Dr. Allison Andresen as a
400 DSO (investigator). Motion seconded by Dr. Sanders. With no further discussion, the
401 motion was unanimously approved.

402
403
404 ***e. Approval of Voluntary Surrender of License – NAC 631.160** (For Possible Action)

- 405
(1) Nursadies Hinden, RDH (4) Linda Slates, RDH
(2) Stephanie Hodson, RDH (5) Martha Stimpson, RDH
(3) Barry Lasko, DDS

1
2 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel stated that the
3 licensees listed had no pending matters with the Board and recommended approval of the voluntary
4 surrenders. She noted that once approved, the voluntary surrenders were absolute and irrevocable.

5 **MOTION:** Dr. Pisani moved that the board approve the voluntary surrenders of the five (5)
6 licensee listed on the agenda. Motion was seconded by Dr. Shahrestani. With no
7 further discussion, the motion was unanimously approved.
8

9
10
11 ***f. Approval for Anesthesia - Permanent Permit – NAC 631.2233** (For Possible Action)

12 **(1) Moderate Sedation - 13 years of age or older** (For Possible Action)

- 13 a. Kimberly W. Yang, DMD
14

15 Dr. Blasco drew the Board's attention to Dr. Johnson. Dr. Johnson stated that all was in order and
16 recommended the approval of a permanent moderate sedation permit for Dr. Yang.
17

18 **MOTION:** Dr. Pinther moved that the board approve the permanent moderate sedation permit
19 for Dr. Yang. Motion was seconded by Dr. Pisani, Dr. Johnson abstained from the
20 motion. With no further discussion, the motion was unanimously approved.
21

22
23 **(2) Moderate Sedation (Pediatric Specialty) 21 years of age or younger** (For Possible
24 Action)

- 25
26 a. Andrew J. Vaughn, DMD
27 b. Treagan N. White, DDS
28

29 Dr. Blasco drew the Board's attention to Dr. Johnson. Dr. Johnson stated that all was in order and
30 recommended the approval of a permanent moderate sedation permit – pediatric specialty for Dr.
31 Vaughn and Dr. White.
32

33 **MOTION:** Dr. Pisani moved that the board approve the permanent moderate sedation permit-
34 pediatric specialty for Dr. Vaughn and Dr. White. Motion seconded by Dr. Pinther, Dr.
35 Johnson abstained from the motion. With no further discussion, the motion was
36 unanimously approved.
37

38
39 **(3) General Anesthesia** (For Possible Action)

- 40 a. Howard J. Garel, DDS
41

42 Dr. Blasco drew the Board's attention to Dr. Johnson. Dr. Johnson stated that all was in order and
43 recommended the approval of a permanent general anesthesia permit for Dr. Garel.
44

45 **MOTION:** Dr. Sanders moved that the board approve the permanent general anesthesia permit
46 for Dr. Garel. Motion seconded by Dr. Shahrestani, Dr. Johnson abstained from the
47 motion. With no further discussion, the motion was unanimously approved.
48

49 ***g. Approval for Anesthesia - Temporary Permit – NAC 631.2254** (For Possible Action)

50
51 **(1) Moderate Sedation (Pediatric Specialty) 21 years of age or younger**

52 (For Possible Action)

- 53 a. Wesley T Archer, DMD
54 b. Travis A. Neu, DMD
55

56 Dr. Blasco drew the Board's attention to Dr. Johnson. Dr. Johnson stated that all was in order and
57 recommended the approval of a temporary moderate sedation permit – pediatric specialty for Dr.
58 Archer and Dr. Neu.
59

60 **MOTION:** Dr. Pisani moved that the board approve the temporary moderate sedation permit –
61 pediatric specialty for Dr. Archer and Dr. Neu. Motion was seconded by Ms. Gabriel,
62 Dr. Johnson abstained from the motion. With no further discussion, the motion was
63 unanimously approved.

64

(2) General Anesthesia (For Possible Action)

- a. Kristin E. Chino, DMD
- b. Shawn B. Davis, DMD
- c. Michael S. Moody, DMD
- d. Ashley T. Roberts, DMD
- e. Gregory C. Walton, DMD

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Dr. Blasco drew the Board's attention to Dr. Johnson. Dr. Johnson stated that all was in order and recommended the approval of a temporary general anesthesia permit for licensees (a) through (e).

MOTION: Dr. Pinther moved that the board approve the temporary general anesthesia permit for licensees (a) through (e). Motion seconded by Dr. Sanders, Dr. Johnson abstained from the motion. With no further discussion, the motion was unanimously approved.

***h. Approve/Reject to dissolve the Specialty Resource Group** (For Possible Action)

Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel asked that the Board dissolve the committee, as the committee had not gathered for several years.

MOTION: Dr. Pinther moved that the board approve to dissolve the Specialty Resource Group. Motion seconded by Dr. Pisani. With no further discussion, the motion was unanimously approved by the Board.

***7. Resource Group Reports** (For Possible Action)

***a. Legislative and Dental Practice** (For Possible Action)

(Chair: Dr. Pinther; Dr. Champagne; Dr. Blasco; Dr Sanders; Ms. Harris)

Dr. Pinther stated that there was no report. It was noted that Mr. McDonald was present at the court hearing on July 12, 2018..

***b. Legal and Disciplinary Action** (For Possible Action)

(Chair: Dr. Pisani; Dr. Blasco; Dr. Shahrestani; Dr. Sanders; Ms. Harris)

Dr. Pisani stated that there was no report.

***c. Examinations Liaisons** (For Possible Action)

***(1) WREB/HERB Representatives** (For Possible Action)

(Dr. Blasco; Ms. Bethea)

Dr. Blasco stated that there was no report. Ms. Bethea stated that she had no report.

***(2) ADEX Representatives** (For Possible Action)

(Timothy Pinther, DDS)

Dr. Pinther stated that there was no report, but that he would be attending the ADEX September meeting.

***d. Continuing Education** (For Possible Action)

(Chair: Dr. Blasco; Dr. Shahrestani, Dr. Pisani; Ms. Gabriel)

Dr. Blasco stated that there was no report.

***e. Committee of Dental Hygiene** (For Possible Action)

(Chair: Ms. Gabriel; Ms. Pate; Mrs. Bethea; Dr. Shahrestani)

Ms. Gabriel stated that there was no report.

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***f. Specialty** (For Possible Action)
(Chair: Dr. Pisani; Dr Johnson; Dr. Pinther)

Dr. Pisani stated that there was no report.

***g. Anesthesia** (For Possible Action)
(Chair: Dr. Johnson; Dr. Pinther; Dr. Champagne; Dr. Sanders)

Dr. Johnson stated that there was no report.

***h. Infection Control** (For Possible Action)
(Chair: Ms. Gabriel; Dr. Blasco; Dr. Champagne; Dr. Pisani; Mrs. Bethea)

Dr. Blasco stated that there was no report.

***i. Budget and Finance Committee** (For Possible Action)
(Chair: Dr. Champagne; Dr. Pinther; Dr. Blasco; Ms. Pate)

Dr. Pinther stated that there was no report, but that the committee would be scheduling a meeting soon to finalize and review the FY19 budget.

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

There was no public comment.

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

9. Announcements

Mrs. Shaffer-Kugel announced that she sent emails to all the Board members everyone regarding WREB and their contact info was sent to WREB as they are looking for examiners that are active board members.

***10. Adjournment** (For Possible Action)

MOTION: Dr. Pisani moved that the July 13, 2018 meeting of the Nevada State Board of Dental Examiners be adjourned. Motion seconded by Dr. Pinther, and without discussion, unanimously approved by the Board. Meeting adjourned at 10:15 a.m.

Minutes approved at the September 14, 2018 Board Meeting
Respectfully Submitted by:

Debra Shaffer-Kugel, Executive Director

Draft Minutes:
08/24/2018 - Budget &
Finance Committee Meeting



NEVADA STATE BOARD OF DENTAL EXAMINERS
 6010 S Rainbow Boulevard, Suite A-1
 Las Vegas, Nevada 89118
 (702) 486-7044



Video Conferencing was available for this meeting at the Nevada State Board of Medical Examiners Office Conference Room located at: 9600 Gateway Drive; Reno, NV 89521

NOTICE OF PUBLIC MEETING

Friday, August 24, 2018
 10:41 a.m.

DRAFT MINUTES
BUDGET AND FINANCE COMMITTEE

(Jason Champagne, DDS, Chair; Bryon Blasco, DMD; Timothy Pinther, DDS; and Betty Pate, RDH)

Meeting Agenda

Please Note: The Nevada State Board of Dental Examiners may hold board meetings via video conference or telephone conference call. The public was welcomed to attend the meeting at the Board office located at 6010 S. Rainbow Blvd, Suite A1; Las Vegas, Nevada 89118; or in the Conference room of the Nevada State Board of Medical Examiners office located at 9600 Gateway; Reno, NV 89521 (when applicable).

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

Public Comment time is available after roll call (beginning of meeting) and prior to adjournment (end of meeting). Public Comment is limited to three (3) minutes for each individual. The Chair may allow additional time to be given a speaker as time allows and in his/her sole discretion. You may provide the Board with written comment to be added to the public record.

Asterisks () denote items on which the Board may take action.
 Action by the Board on an item may be to approve, deny, amend, or table.*

1. Call to Order, roll call, and establish quorum

Dr. Jason Champagne called the committee meeting to order and Mrs. Shaffer-Kugel conducted the following roll call:

Dr. Jason Champagne (“Dr. Champagne”) ----- Present (via teleconference)
 Dr. Byron Blasco (“Dr. Blasco”) -----Present (via teleconference)
 Dr. Timothy Pinther (“Dr. Pinther”) -----Present (via teleconference)
 Ms. Betty Pate (“Ms. Pate”) -----Present

Others Present: Melanie B. Chapman, Board General Counsel; Debra Shaffer-Kugel, Executive Director; Stacie Hummel, NSBDE Accountant.

Public Attendees: No public attendees present.

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

There was no public comment.

Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)
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*3. Review, Discussion and Recommendations to the Board regarding FY2019 Draft/Proposed Budget - NRS 631.190 (For Possible Action)

Dr. Champagne directed the attention to Mrs. Stacie Hummel to go over the proposed budget. Mrs. Shaffer-Kugel stated that they should have received the proposed budgets and hoped they had a chance to review them. Mrs. Hummel reviewed the income section of the proposed budget and discussed in brief detail her annotations. She discussed licensure fees in some detail. Mrs. Hummel noted that the Board held a Continuing Education (CE) course and that the income derived from the course will be used to host a free CE course within the year. Mrs. Shaffer-Kugel noted to the Board that different subjects for courses they may consider hosting, be it one course, or multiple smaller courses.

Mrs. Hummel went on to review the expense section. She noted further, that the costs for travel had increased in the past year, and therefore, was proposing an increase in the budget to accommodate the increase in travel expenses. She added that security features were installed in the office. Mrs. Hummel stated that while Inlumon has not completed their work on the new licensing system software, they do anticipate beginning to pay maintenance fees in April 2019. Lastly, she stated that they did increase the cost to have security present at board meetings and hearings.

Mrs. Hummel directed the Board's attention to Mrs. Shaffer-Kugel to discuss the expenses for legal costs. Mrs. Shaffer-Kugel stated that the Board has seen an increase in the number of complaints received. She stated further, that with the passing of AB474, there will most likely be an increase in authorized investigations for potential violations. She discussed the grounds that require the board to investigate, especially if other agencies notify the Board of potential violations with information that supports the allegations.

Mrs. Shaffer-Kugel noted that there were 2 lawsuits filed against the Board, select board staff, and board agents, which the Board appointed Mr. Lee Drizin to represent them in the matters. There was brief discussion on the fees associated and thus, budgeted for. She added that should the fees go beyond the contracted amount, an amendment would have to be filed to approve the increase in fees. Mrs. Bernstein Chapman briefly discussed the possibility of the Board recouping any or all expenses to defend the board in the cases. It was noted that the board may have to consider increasing licensure fees in the near future, especially if they nearly exhaust their reserves in defending the Board, board staff, and its agents.

Mrs. Hummel stated that there were no proposed changes to staff expenses. Mrs. Hummel noted an increase to the Anesthesia evaluation committee as they will be doing some calibration meetings and that they are proposing to do a video of the calibration for future use with new evaluators, so that they can be calibrated via video.

Mrs. Hummel stated to the Board that there were significant increases in the budget for complaints this year. She added that increases were for DSO fees, review panel fees, travel costs, legal fees, investigation fees, AG office fees, etc. She went over, in detail, the costs for investigations. Lastly, she noted that they increased the budget significantly in the complaints category.

Mrs. Hummel noted that ultimately by end of the fiscal year, they will see more expenses than income. Additionally, that they are expecting to utilize all of the revenue and some of the reserves to cover all anticipated expenses. Ms. Pate inquired if t only way to balance the budget was to either raise the fees for licensure or to cut costs? Mrs. Hummel answered affirmatively. Mrs. Shaffer-Kugel stated that the budget figures are what they anticipate the budget to be, however, that they do not know for certain what the actual costs, expenses, and revenue will be until they near the end of the fiscal year.

Dr. Champagne stated that with the proposed expenses they could make licensees aware of the budgetary challenges and how it could affect the possibility of increased licensing fees should the budget proposed come to fruition. Additionally, that the board will have to do what they need to, to curtail the expenses.

MOTION: Dr. Blasco moved that the committee approve the proposed FYE 2019 budget to be presented to the Board at the next scheduled meeting on September 14, 2018. Motion seconded by Dr. Pinther; with no discussion, the motion was unanimously approved by the committee members present at the meeting.

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

There was no public comment.

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

MOTION: Dr. Pinther moved that the August 24, 2018 committee meeting of the Nevada State Board of Dental Examiners be adjourned. Motion seconded by Dr. Blasco, and without discussion, unanimously approved by the Board. Meeting adjourned at 11:09 a.m.

Minutes approved at the September 14, 2018 Board Meeting
Respectfully Submitted by:

Debra Shaffer-Kugel, Executive Director

Draft Minutes:
10/24/2017 - Board Teleconference



NEVADA STATE BOARD OF DENTAL EXAMINERS
 6010 S Rainbow Boulevard, Suite A-1
 Las Vegas, Nevada 89118
 (702) 486-7044



Telephone Conferencing site for this meeting was at the Nevada State Board of Dental Examiners Office
 Conference Room: 6010 S Rainbow Blvd, Suite A1, Las Vegas, Nevada 89118

Telephone Conference

PUBLIC MEETING

Tuesday, October 24, 2017

6:05 p.m.

Board Meeting **DRAFT** Minutes

Please Note: The Nevada State Board of Dental Examiners may hold board meetings via telephone conference call. The public is welcomed to attend the telephone conference meeting at the Board office located at 6010 S. Rainbow Blvd, Suite A1; Las Vegas, Nevada 89118.

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

Public Comment time is available after roll call (beginning of meeting) and prior to adjournment (end of meeting). Public Comment is limited to three (3) minutes for each individual. You may provide the Board with written comment to be added to the record.

Asterisks () denote items on which the Board may take action.
 Action by the Board on an item may be to approve, deny, amend, or table.*

1. Call to Order, roll call, and establish quorum

Dr. Blasco called the meeting to order and Mrs. Shaffer-Kugel conducted the following roll call:

Dr. Timothy Pinther (“Dr. Pinther”) -----PRESENT	Dr. Ali Shahrestani (“Dr. Shahrestani”) -----PRESENT
Dr. Byron Blasco (“Dr. Blasco”) -----PRESENT	Dr. R. Michael Sanders (“Dr. Sanders”) -----PRESENT
Dr. Jason Champagne (“Dr. Champagne”) --PRESENT	Ms. Theresa Guillen (“Ms. Guillen”) -----PRESENT
Dr. Gregory Pisani (“Dr. Pisani”) -----PRESENT	Ms. M Sharon Gabriel (“Ms. Gabriel”) -----PRESENT
Dr. Brendan Johnson (“Dr. Johnson”) -----PRESENT	

Others Present: Melanie Bernstein Chapman, Board General Counsel; Sophia Long, Deputy Attorney General Co-Counsel; Debra Shaffer-Kugel, Executive Director.

Public Attendees – via telephone conference call: Leslie Kotler, DDS; Ray Gates, Esquire, Counsel for Dr. Kotler.

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

No Public comment.

Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)
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62 *3. New Business (For Possible Action)
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64 (a) Petition to make application for licensure pursuant to Paragraph 5(A)(3) of the Disciplinary
65 Stipulation Agreement (For Possible Action)
66

67 (1) Leslie M. Kotler, DMD
68

69 Dr. Blasco drew the Board's attention to Mrs. Shaffer-Kugel. Mrs. Shaffer-Kugel stated that in the board books,
70 they were provided with a copy of the stipulation agreement that Dr. Kotler entered into with the Board. She noted
71 that one of the provisions of the stipulation agreement was that upon the completion of Dr. Kotler's prison term,
72 he may petition the Board to apply for a dental license. She further noted that Dr. Kotler was originally licensed by
73 credential. Per a Board member's inquiry, Dr. Kotler noted for the record that he had taken and successfully passed
74 the California State clinical exam and the NERB exam. Upon Dr. Kotler's response, Mrs. Shaffer-Kugel stated that
75 the Board's statutes only recognizes the WREB and ADEX exams, thus requiring that Dr. Kotler complete one of
76 the clinical exams stated; unless, however, Dr. Kotler feels he meets the eligibility requirements under the new
77 application for Licensure by Endorsement.
78

79 Mr. Gates stated gave a brief history of the events that led to Dr. Kotler's unfortunate events, and how he has
80 worked to serve his time and pay restitution. Mr. Gates added that Dr. Kotler was recently granted back his
81 license from the California State Dental Board.
82

83 Mrs. Bernstein Chapman, General Counsel for the Board, noted to Dr. Kotler and Mr. Gates that a voluntary
84 surrender of license in the State of Nevada was irrevocable and absolute and that the Board could not reinstate Dr.
85 Kotler's license. She noted further to Dr. Kotler and Mr. Gates that the options were to apply for a new license by
86 either Licensure by Endorsement, or Licensure by Examination. Mrs. Bernstein inquired if Dr. Kotler has any
87 disciplinary action in the State of California, to which he responded that as a provision to reinstate his license, he
88 agreed to four (4) years of probation. Mrs. Shaffer-Kugel stated to the Board that Dr. Kotler, per his stipulation
89 agreement with the Board, was petitioning for approval to apply for a new license.
90

91 MOTION: Dr. Pisani moved that the Board approve Dr. Leslie Kotler's petition to make application for
92 licensure in the State of Nevada, seconded by Dr. Johnson. Without further discussion, the
93 majority vote ruled in favor of the motion, with one abstention from Dr. Shahrestani.
94

95 4. Public Comment: (Public Comment is limited to three (3) minutes for each individual)
96

97 No public comment.
98

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

101 *5. Adjournment (For Possible Action)
102

103 Dr. Blasco called for a motion to adjourn the meeting of October 24, 2017 at 6:27 p.m.
104

105 MOTION: Dr. Pisani made the motion to adjourn, seconded by Dr. Sanders. The motion was unanimously
106 approved by the Board.
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109 Meeting Adjourned at 6:27 p.m.
110

111 Respectfully submitted by:
112

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114 _____
115 Debra Shaffer-Kugel, Executive Director
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FINANCIALS

Financials:
Budget Sheet
(July 2017 - June 2018)

Nevada State Board of Dental Examiners

Balance Sheet

As of June 30, 2018

Jun 30, 18

ASSETS

Current Assets

Checking/Savings

10000 · Wells Fargo-Operating 642,347.20

10015 · Wells Fargo - Saving 1,031,256.59

10010 · Wells Fargo-Reserves 1,053,988.32

Total Checking/Savings 2,727,592.11

Accounts Receivable

11001 · Allowance for Bad Debts -26,358.30

11000 · Accounts Receivable 88,223.58

Total Accounts Receivable 61,865.28

Other Current Assets

11200 · Prepaid Expenses 18,429.55

11210 · Prepaid Insurance 797.26

18000 · Deferred Outflows-Pension 239,676.00

Total Other Current Assets 258,902.81

Total Current Assets 3,048,360.20

TOTAL ASSETS 3,048,360.20

LIABILITIES & FUND BALANCE

Liabilities

Current Liabilities

Accounts Payable

20000 · Accounts Payable 23,420.12

Total Accounts Payable 23,420.12

Other Current Liabilities

22125 · DDS Deferred Revenue 659,836.36

22136 · RDH Deferred Revenue 407,250.00

20500 · Fines Payable-State of Nevada 600.00

23750 · Accrued Vacation/Sick Leave 79,809.79

23800 · Pension Plan Payable (PERS) 3,017.65

23820 · Employee HSA/Ins Payable 5.75

Total Other Current Liabilities 1,150,519.55

Total Current Liabilities 1,173,939.67

Long Term Liabilities

20601 · Pension Liability 647,372.00

21001 · Deferred Inflows-Pension 48,282.00

Total Long Term Liabilities 695,654.00

Total Liabilities 1,869,593.67

Fund Balance 1,178,766.53

TOTAL LIABILITIES & FUND BALANCE 3,048,360.20

Nevada State Board of Dental Examiners
Statement of Revenues, Expenses and Fund Balance
July 2017 through June 2018

Ordinary Income/Expense	Jul '17 - Jun 18	Budget	\$ Over Budget
Income			
40000 · Dentist Licenses & Fees			
40100 · DDS Active License Fee	551,340.82	586,500.00	(35,159.18)
40102 · DDS Inactive License Fee	32,528.22	32,100.00	428.22
40135 · DDS Activate/Inactive/Suspend	28,975.00	12,750.00	16,225.00
40136 · DDS Activate Revoked License	1,400.00	1,000.00	400.00
40140 · Specialty License App	3,775.00	3,500.00	275.00
40145 · Limited License App	2,775.00	2,400.00	375.00
40115 · Limited License Renewal Fee	13,900.00	12,100.00	1,800.00
40116 · LL-S Renewal Fee	2,048.59	2,400.00	(351.41)
40150 · Restricted License App	0.00	1,000.00	(1,000.00)
40180 · Anesthesia Site Permit App	6,250.00	20,000.00	(13,750.00)
40182 · CS/GA/Site Permit Renewals	39,811.27	38,700.00	1,111.27
40183 · GA/CS/DS or Site Permit ReInp	17,350.00	16,750.00	600.00
40175 · Conscious Sedation Permit Appl	12,500.00	9,500.00	3,000.00
40170 · General Anesthesia Permit Appl	12,500.00	9,000.00	3,500.00
40186 · Pediatric Anesthesia Permit	0.00	3,000.00	(3,000.00)
40184 · Infection Control Inspection	19,250.00	22,500.00	(3,250.00)
40212 · DDS ADEX License Application	34,200.00	40,800.00	(6,600.00)
40205 · DDS Credential Appl Fee-Spcly	19,200.00	27,000.00	(7,800.00)
40211 · DDS WREB License Application	113,400.00	108,000.00	5,400.00
40214 · DDS License by Endorsement	24,000.00	30,000.00	(6,000.00)
Total 40000 · Dentist Licenses & Fees	935,203.90	979,000.00	(43,796.10)
50000 · Dental Hygiene Licenses & Fees			
40105 · RDH Active License Fee	218,000.68	203,500.00	14,500.68
40106 · RDH Inactive License Fee	8,298.91	8,100.00	198.91
40130 · RDH Activate/Inactive/Suspend	5,300.00	5,375.00	(75.00)
40126 · RDH Reinstate Revoked License	0.00	500.00	(500.00)
40110 · RDH LA/N2O Permit Fee	5,225.00	4,650.00	575.00
40224 · RDH ADEX License Application	3,900.00	6,600.00	(2,700.00)
40222 · RDH WREB License Application	45,900.00	57,000.00	(11,100.00)
40226 · RDH License by Endorsement	8,700.00	6,000.00	2,700.00
Total 50000 · Dental Hygiene Licenses & Fees	295,324.59	291,725.00	3,599.59
50750 · Other Licenses & Fees			
43650 · Reimbursed Investigation Costs	20,103.20	94,650.00	(74,546.80)
40229 · CE Course Income	38,600.00	0.00	38,600.00
40220 · License Verification Fee	7,525.00	6,600.00	925.00
40227 · CEU Provider Fee	10,150.00	9,500.00	650.00
40225 · Duplicate License Fee	900.00	1,900.00	(1,000.00)
40555 · Fines	50.00	500.00	(450.00)
40185 · Lists/Labels Printed	7,718.00	6,500.00	1,218.00
40600 · Miscellaneous Income	296.75	1,000.00	(703.25)
Total 50750 · Other Licenses & Fees	85,342.95	120,650.00	(35,307.05)

Nevada State Board of Dental Examiners
Statement of Revenues, Expenses and Fund Balance
July 2017 through June 2018

	<u>Jul '17 - Jun 18</u>	<u>Budget</u>	<u>\$ Over Budget</u>
Total Income	1,315,871.44	1,391,375.00	(75,503.56)
Expense			
60500 · Bank Charges			
60500-1 · Bank Service Fees	4.80	300.00	(295.20)
60500-2 · Merchant Fees	18,566.70	18,500.00	66.70
Total 60500 · Bank Charges	<u>18,571.50</u>	<u>18,800.00</u>	<u>(228.50)</u>
68001 · CE Class Expenses	20,088.14	0.00	20,088.14
68000 · Conferences & Seminars	20,094.51	13,200.00	6,894.51
63000 · Dues & Subscriptions	6,977.55	7,000.00	(22.45)
65100 · Furniture & Equipment	20,221.66	21,200.00	(978.34)
65500 · Finance Charges	0.00	100.00	(100.00)
66500 · Insurance			
66500-1 · Liability	9,772.72	11,000.00	(1,227.28)
66500-2 · Workers Compensation	4,041.21	4,725.00	(683.79)
Total 66500 · Insurance	<u>13,813.93</u>	<u>15,725.00</u>	<u>(1,911.07)</u>
66520 · Internet/Web/Domain			
66520-1 · Licensing Software	0.00	12,600.00	(12,600.00)
66520-2 · E-mail, Website Services	4,221.92	3,750.00	471.92
66520-3 · Internet Services	3,110.74	3,184.00	(73.26)
66520-4 · Jurisprudence Exam Website	198.00	198.00	0.00
Total 66520 · Internet/Web/Domain	<u>7,530.66</u>	<u>19,732.00</u>	<u>(12,201.34)</u>
73500 · Information Technology			
73500-1 · Computer Repair/Upgrade	810.00	2,300.00	(1,490.00)
Total 73500 · Information Technology	<u>810.00</u>	<u>2,300.00</u>	<u>(1,490.00)</u>
66600 · Office Supplies	10,689.28	10,000.00	689.28
66650 · Office Expense			
68710 · Miscellaneous Expenses	4,786.42	4,950.00	(163.58)
68700 · Repairs & Maintenance			
68700-1 · Janitorial	6,000.00	6,000.00	0.00
68700-2 · Copier Maintenance	2,192.00	4,600.00	(2,408.00)
68700-3 · Copier Maintenance (7435P)	968.18	1,875.00	(906.82)
Total 68700 · Repairs & Maintenance	<u>9,160.18</u>	<u>12,475.00</u>	<u>(3,314.82)</u>
68725 · Security	986.40	1,450.00	(463.60)
68715 · Shredding Services	638.50	1,650.00	(1,011.50)
68720 · Utilities	4,227.68	4,550.00	(322.32)
Total 66650 · Office Expense	<u>19,799.18</u>	<u>25,075.00</u>	<u>(5,275.82)</u>
67000 · Printing	7,688.80	9,000.00	(1,311.20)
67500 · Postage & Delivery	11,719.21	13,500.00	(1,780.79)
68500 · Rent/Lease Expense			
68500-1 · Equipment Lease	1,516.72	1,516.00	0.72
68500-2 · Office	70,779.94	71,300.00	(520.06)
68500-4 · Storage Warehouse	2,054.38	1,150.00	904.38
Total 68500 · Rent/Lease Expense	<u>74,351.04</u>	<u>73,966.00</u>	<u>385.04</u>
75000 · Telephone	1,977.15	1,080.00	897.15

Nevada State Board of Dental Examiners
Statement of Revenues, Expenses and Fund Balance
July 2017 through June 2018

	<u>Jul '17 - Jun 18</u>	<u>Budget</u>	<u>\$ Over Budget</u>
75100 · Travel (Staff)	1,833.93	2,500.00	(666.07)
73550 · Per Diem (Staff)	236.51	750.00	(513.49)
73600 · Professional Fee			
73600-1 · Accounting/Bookkeeping	17,985.00	25,500.00	(7,515.00)
73600-4 · Legislative Services	33,000.00	36,000.00	(3,000.00)
73600-2 · Legal-General	12,484.30	9,600.00	2,884.30
Total 73600 · Professional Fee	63,469.30	71,100.00	(7,630.70)
73700 · Verification Services	15,423.99	15,000.00	423.99
72000 · Employee Wages & Benefits			
72100 · Executive Director	129,677.92	131,869.00	(2,191.08)
72300 · Credentialing & Licensing Coord	58,753.22	60,099.00	(1,345.78)
72132 · Site Inspection Coordinator	41,218.64	40,338.00	880.64
72200 · Technology/Finance Liaison	52,339.76	51,800.00	539.76
72130 · Public Info & CE Coordinator	33,025.06	34,225.00	(1,199.94)
72140 · Administrative Assistant (P/T)	0.00	16,660.00	(16,660.00)
72160 · Legal Counsel	113,358.41	116,606.00	(3,247.59)
72165 · Legal Assistant	47,368.90	54,346.00	(6,977.10)
72010 · Payroll Service Fees	2,201.50	1,750.00	451.50
72005 · Payroll Tax Expense	8,524.85	8,785.00	(260.15)
72600 · Retirement Fund Expense (PERS)	128,947.57	130,700.00	(1,752.43)
65525 · Health Insurance	69,340.00	82,641.00	(13,301.00)
Total 72000 · Employee Wages & Benefits	684,755.83	729,819.00	(45,063.17)
72400 · Board of Directors Expense			
72400-1 · Director Stipends	12,130.00	13,950.00	(1,820.00)
72400-2 · Committee Mtgs-Stipends	0.00	750.00	(750.00)
72400-3 · Director Travel Expenses	2,851.57	4,500.00	(1,648.43)
72400-9 · Refreshments - Board Meetings	1,088.91	1,250.00	(161.09)
Total 72400 · Board of Directors Expense	16,070.48	20,450.00	(4,379.52)
60001 · Anesthesia Eval Committee			
60001-1 · Evaluator's Fee	11,671.56	12,000.00	(328.44)
60001-4 · Travel/Misc. Expense	3,494.68	3,500.00	(5.32)
Total 60001 · Anesthesia Eval Committee	15,166.24	15,500.00	(333.76)
73650 · Investigations/Complaints			
72550 · DSO Coordinator	3,650.00	3,600.00	50.00
73650-1 · DSO Consulting Fee	26,970.83	31,000.00	(4,029.17)
73650-2 · DSO Travel/Postage Expense	1,635.23	1,500.00	135.23
73651-1 · DSO Review Panel Fee	2,375.00	14,400.00	(12,025.00)
73651-2 · DSO Review Panel Travel Expense	448.72	3,000.00	(2,551.28)
73650-3 · Legal Fees-Investigations	1,609.01	0.00	1,609.01
73650-5 · BOD Hearing Stipend	0.00	800.00	(800.00)
73650-4 · Staff Travel	0.00	500.00	(500.00)
73650-8 · DSO Calibration Expense	192.66	1,500.00	(1,307.34)
73650-7 · Miscellaneous Investigation Exp	8,384.81	15,900.00	(7,515.19)
Total 73650 · Investigations/Complaints	45,266.26	72,200.00	(26,933.74)

Nevada State Board of Dental Examiners
Statement of Revenues, Expenses and Fund Balance
July 2017 through June 2018

	<u>Jul '17 - Jun 18</u>	<u>Budget</u>	<u>\$ Over Budget</u>
60002 · Infection Control Inspection			
60002-1 · Initial Inspection Expense	8,598.88	11,000.00	(2,401.12)
60002-2 · Reinspection Expense	671.10	1,000.00	(328.90)
60002-3 · Random Inspection Expense	1,096.46	500.00	596.46
60002-4 · Travel/Misc. Expense	1,138.72	2,500.00	(1,361.28)
Total 60002 · Infection Control Inspection	<u>11,505.16</u>	<u>15,000.00</u>	<u>(3,494.84)</u>
Total Expense	<u>1,088,060.31</u>	<u>1,172,997.00</u>	<u>(84,936.69)</u>
Net Ordinary Income	227,811.13	218,378.00	9,433.13
Other Income/Expense			
Other Income			
40800 · Interest Income	611.67	800.00	(188.33)
Total Other Income	<u>611.67</u>	<u>800.00</u>	<u>(188.33)</u>
Other Expense			
75501 · Bad Debt Expense	400.00	400.00	0.00
Total Other Expense	<u>400.00</u>	<u>400.00</u>	<u>0.00</u>
Net Other Income	<u>211.67</u>	<u>400.00</u>	<u>(188.33)</u>
Net Income Over Expenses	<u><u>228,022.80</u></u>	<u><u>218,778.00</u></u>	<u><u>9,244.80</u></u>

Financials:
Proposed Budget FY2019

**Nevada State Board of Dental Examiners
Proposed Budget
FYE 6-30-19**

	Actual	Proposed	% Change	Notes
	FYE 6-30-18	FYE 6-30-19		
Ordinary Income/Expense				
Income				
40000 - Dentist Licenses & Fees				
40100 - DDS Active License Fee	561,340.82	586,500.00	6%	
40102 - DDS Inactive License Fee	32,528.22	33,500.00	3%	
40135 - DDS Activate/Inactive/Suspend	28,975.00	22,000.00	-24%	
40136 - DDS Activate Revoked License	1,400.00	1,500.00	7%	
40140 - Specialty License App	3,775.00	3,500.00	-7%	
40145 - Limited License App	2,775.00	2,400.00	-14%	
40115 - Limited License Renewal Fee	13,900.00	14,000.00	1%	
40116 - LL-S Renewal Fee	2,048.59	1,700.00	-17%	
40150 - Restricted License App	0.00	450.00	100%	
40180 - Anesthesia Site Permit App	6,250.00	6,500.00	4%	
40182 - CS/GA/Site Permit Renewals	39,811.27	43,200.00	9%	
40183 - GA/CS/DS or Site Permit Reinp	17,350.00	17,500.00	1%	
40175 - Conscious Sedation Permit Appl	12,500.00	12,500.00	0%	
40170 - General Anesthesia Permit Appl	12,500.00	12,500.00	0%	
40186 - Pediatric Anesthesia Permit	0.00	3,000.00	100%	
40184 - Infection Control Inspection	19,250.00	19,500.00	1%	
40212 - DDS ADEX License Application	34,200.00	36,000.00	5%	
40205 - DDS Credential Appl Fee-Spcty	19,200.00	20,400.00	6%	
40211 - DDS WREB License Application	113,400.00	102,200.00	-10%	Increase in applications through endorsement
40214 - DDS License by Endorsement	24,000.00	26,400.00	10%	First year
Total 40000 - Dentist Licenses & Fees	935,203.90	965,250.00	3%	
50000 - Dental Hygiene Licenses & Fees				
40105 - RDH Active License Fee	218,000.68	218,000.00	0%	\$196,650 1 yr deferral at 6/30/18
40106 - RDH Inactive License Fee	8,298.91	8,300.00	0%	\$8,975 1 yr deferral at 6/30/18
40130 - RDH Activate/Inactive/Suspend	5,300.00	5,300.00	0%	
40110 - RDH LA/N2O Permit Fee	5,225.00	5,600.00	7%	
40224 - RDH ADEX License Application	3,900.00	3,600.00	-8%	
40222 - RDH WREB License Application	45,900.00	42,600.00	-7%	
40228 - RDH License by Endorsement	8,700.00	10,500.00	21%	
Total 50000 - Dental Hygiene Licenses & Fees	295,324.59	293,900.00	0%	
50750 - Other Licenses & Fees				
40229 - CE Course Income	38,600.00	0.00	-100%	Planning free CE course for licensees
40220 - License Verification Fee	7,525.00	7,600.00	1%	
40227 - CEU Provider Fee	10,150.00	10,250.00	1%	
40225 - Duplicate License Fee	900.00	900.00	0%	
40555 - Fines	50.00	50.00	0%	
40185 - Lists/Labels Printed	7,718.00	7,750.00	0%	
40800 - Miscellaneous Income	296.75	300.00	1%	
43650 - Reimbursed Investigation Costs	20,103.20	25,000.00	24%	
Total 50750 - Other Licenses & Fees	85,342.95	51,850.00	-39%	
Total Income	1,315,871.44	1,311,000.00	0%	
Expense				
68001 - CE Class Expenses	20,088.14	50,000.00	149%	Free CE course for licensees
60500 - Bank Charges				
60500-1 - Bank Service Fees	4.80	120.00	2400%	Monthly fixed fee per bank
60500-2 - Merchant Fees	18,566.70	33,500.00	80%	DDS renewal year increase
Total 60500 - Bank Charges	18,571.50	33,620.00	81%	
68000 - Conferences & Seminars	20,094.51	22,000.00	9%	AADB and staff conferences
63000 - Dues & Subscriptions	6,977.55	9,345.00	34%	AADB \$5035, AADA \$375, Adobe \$540, Lexis/Nexis Law Library \$3395
65100 - Furniture & Equipment	20,221.66	5,140.00	-75%	Scanner \$350, Laptop \$1100, Small Table \$150, Security Locks for Doors \$3540
66500 - Insurance				
66500-1 - Liability	9,772.72	7,400.00	-24%	Liability \$6300, Employee Bond \$1100
66500-2 - Workers Compensation	4,041.21	4,100.00	1%	Based upon payroll
Total 66500 - Insurance	13,813.93	11,500.00	-17%	
66520 - Internet/Web/Domain				
66520-1 - Licensing Software	0.00	11,300.00	100%	Start date 4/2019
66520-2 - E-mail, Website Services	4,221.92	4,644.00	10%	Fixed
66520-3 - Internet Services	3,110.74	3,422.00	10%	Fixed
66520-4 - Jurisprudence Exam Website	198.00	198.00	0%	Fixed
Total 66520 - Internet/Web/Domain	7,530.66	19,564.00	160%	
73500 - Information Technology				
73500-1 - Computer Repair/Upgrade	810.00	2,600.00	221%	Setup laptops, computer repairs, Polycom Warranty (\$600)
Total 73500 - Information Technology	810.00	2,600.00	221%	
68800 - Office Supplies	10,689.28	14,000.00	31%	
68850 - Office Expense				
68710 - Miscellaneous Expenses	4,788.42	5,000.00	4%	
68700 - Repairs & Maintenance	0.00	6,000.00	100%	Carpet cleaning, paint offices, repair walls
68700-1 - Janitorial	6,000.00	6,000.00	0%	
68700-2 - Copier Maintenance	2,192.00	2,600.00	19%	Additional copying needs
68700-3 - Copier Maintenance (7435P)	968.18	0.00	-100%	Out of service
Total 68700 - Repairs & Maintenance	9,160.18	14,600.00	59%	
68725 - Security	986.40	4,340.00	340%	Alarmco \$840, Security Guard \$3500 (10 Mtgs/Hearings)

**Nevada State Board of Dental Examiners
Proposed Budget
FYE 6-30-19**

	Actual	Proposed	% Change	Notes
	FYE 6-30-18	FYE 6-30-19		
68715 · Shredding Services	638.50	650.00	2%	Fixed/Variable based upon destruction schedule
68720 · Utilities	4,227.68	4,300.00	2%	Variable
Total 68650 · Office Expense	19,799.18	26,890.00	46%	
67000 · Printing	7,688.80	7,000.00	-9%	Business Cards, stationary, renewal post cards, letterhead
67500 · Postage & Delivery	11,719.21	12,000.00	2%	
68500 · Rent/Lease Expense				
68500-1 · Equipment Lease	1,516.72	1,517.00	0%	Fixed
68500-2 · Office	70,779.94	72,725.00	3%	Fixed-Increase 5/19
68500-4 · Storage Warehouse	2,054.38	2,475.00	20%	Fixed
Total 68500 · Rent/Lease Expense	74,351.04	76,717.00	3%	
75000 · Telephone				
75000-1 · Telephone-Office	1,977.15	2,175.00	10%	Century Link \$373, Dept IT long distance \$1802
Total 75000 · Telephone	1,977.15	2,175.00	10%	
75100 · Travel (Staff)	1,833.93	2,500.00	36%	Conferences, meetings/hearings, CE
73550 · Per Diem (Staff)	236.51	500.00	111%	Conferences, meetings/hearings, CE
73600 · Professional Fee				
73600-1 · Accounting/Bookkeeping	17,985.00	22,000.00	22%	H&A contract \$18,750 max, Auditor \$7,500
73600-4 · Legislative Services	33,000.00	27,000.00	-18%	Start date 10/1/18. No contract for 7/18-9/18
73600-2 · Legal-General	12,484.30	87,500.00	601%	Drizin \$70,000, AG \$15000., court filings \$500, LCB reviews \$2000
Total 73600 · Professional Fee	63,469.30	136,500.00	115%	
73700 · Verification Services	15,423.99	15,500.00	0%	
72000 · Employee Wages & Benefits				
72100 · Executive Director				
72101 · Executive Director-Wages	124,893.92	124,895.00	0%	
72102 · Exec Dir-Accrued/Used Sickleave	4,784.00	4,784.00	0%	
72103 · Exec Dir-Accrued/Used Vacation	0.00	478.00	100%	
Total 72100 · Executive Director	129,677.92	130,157.00	0%	
72300 · Credentialing & Licensing Coord				
72301 · Licensing Specialist-Wages	55,556.96	55,556.00	0%	
72302 · Licensing Specialist-OT	0.00	0.00	0%	
72303 · Lic Spec-Accrued/Used Sickleave	1,899.23	1,900.00	0%	
72304 · Lic Spec-Accrued/Used Vacation	1,297.03	1,298.00	0%	
Total 72300 · Credentialing & Licensing Coord	58,753.22	58,754.00	0%	
72132 · Site Inspection Coordinator				
72133 · Admin Assiat I-Wages	39,705.92	39,706.00	0%	
72136 · Admin Assiat I-OT	0.00	0.00	0%	
72137 · Admin I-Accrued/Used Sickleave	984.92	985.00	0%	
72138 · Admin I-Accrued/Used Vacation	527.80	528.00	0%	
Total 72132 · Site Inspection Coordinator	41,218.64	41,219.00	0%	
72200 · Technology/Finance Liaison				
72201 · Admin Assiat II-Wages	48,422.96	48,423.00	0%	
72203 · Admin II-Accrued/Used Sickleave	2,661.12	2,662.00	0%	
72204 · Admin II-Accrued/Used Vacation	1,255.68	1,256.00	0%	
Total 72200 · Technology/Finance Liaison	52,339.76	52,341.00	0%	
72130 · Public Info & CE Coordinator				
72131 · Administrative-Wages	31,575.92	31,576.00	0%	
72134 · Administrative-OT	134.42	135.00	0%	
72135 · Admin-Accrued/Used Sickleave	776.88	807.00	4%	
72139 · Admin-Accrued/Used Vacation	537.84	568.00	6%	
Total 72130 · Public Info & CE Coordinator	33,025.06	33,086.00	0%	From accruals only
72160 · Legal Counsel				
72161 · Legal Counsel-Wages	108,312.58	115,500.00	7%	Prior period was partial year. This is not an increase
72162 · Legal-Accrued/Used Sickleave	4,478.49	5,750.00	28%	Prior period was partial year. This is not an increase
72163 · Legal-Accrued/Used Vacation	567.34	2,875.00	407%	Prior period was partial year. This is not an increase
Total 72160 · Legal Counsel	113,358.41	124,125.00	9%	
72165 · Legal Assistant				
72166 · Legal Asst - Wages	46,525.58	50,500.00	9%	Prior period was partial year. This is not an increase
72166 · Legal Asst-Accr/Used Sickleave	385.60	601.00	56%	Prior period was partial year. This is not an increase
72167 · Legal Asst-Accr/Used Vacation	457.72	1,130.00	147%	Prior period was partial year. This is not an increase
Total 72165 · Legal Assistant	47,368.90	52,231.00	10%	
72010 · Payroll Service Fees	2,201.50	1,800.00	-18%	Prior period included report amendments for 3rd Qtr.
72005 · Payroll Tax Expense	8,524.85	8,964.00	5%	Based upon wages
72600 · Retirement Fund Expense (PERS)	128,947.57	129,540.00	0%	Based upon wages, adjusted annually from State actuary report
65525 · Health Insurance	69,340.00	73,160.00	6%	Fixed
Total 72000 · Employee Wages & Benefits	684,755.83	705,377.00	3%	
72400 · Board of Directors Expense				
72400-1 · Director Stipends	12,130.00	13,420.00	11%	6 Board meetings, 4 teleconference meetings
72400-2 · Committee Mtgs-Stipends	0.00	600.00	100%	2 Committees, 2 meetings each \$50 per member
73650-5 · BOD Hearing Stipend	0.00	4,950.00	100%	11 Board members, 3 hearings, \$150 each
72400-3 · Director Travel Expenses	2,851.57	4,000.00	40%	Board meetings & hearings
72400-9 · Refreshments - Board Meetings	1,088.91	1,250.00	15%	
Total 72400 · Board of Directors Expense	16,070.48	24,220.00	51%	
80001 · Anesthesia Eval Committee				
80001-1 · Evaluator's Fee	11,671.56	12,000.00	3%	
80001-5 · Calibration Expense	0.00	14,500.00	100%	2 calibration sessions (\$5,000 ea), calibration video expense (\$4500)

**Nevada State Board of Dental Examiners
Proposed Budget
FYE 6-30-19**

	Actual		Proposed		Notes
	FYE 6-30-18	FYE 6-30-19	FYE 6-30-18	FYE 6-30-19	
60001-4 · Travel/Misc. Expense	3,494.68	3,600.00		3%	
Total 60001 · Anesthesia Eval Committee	15,186.24	30,100.00		98%	
73650 · Investigations/Complaints					
72550 · DSO Coordinator	3,650.00	3,600.00		-1%	
73650-1 · DSO Consulting Fee	26,970.83	46,000.00		71% Large influx in complaints	
73650-2 · DSO Travel/Postage Expense	1,635.23	2,800.00		71% Large influx in complaints	
73651-1 · DSO Review Panel Fee	2,375.00	12,000.00		405% First full year-9 meetings	
73651-2 · DSO Review Panel Travel/Meal Expense	448.72	3,500.00		680% First full year-9 meetings	
73650-3 · Legal Fees-Investigations	1,609.01	5,000.00		211% AG's Office	
73650-8 · DSO Calibration Expense	192.66	200.00		4%	
73650-7 · Miscellaneous Investigation Exp	8,384.81	34,000.00		305% Large influx in complaints	
Total 73650 · Investigations/Complaints	45,266.26	107,100.00		137%	
60002 · Infection Control Inspection					
60002-1 · Initial Inspection Expense	8,598.88	9,500.00		10%	
60002-2 · Reinspection Expense	671.10	740.00		10%	
60002-3 · Random Inspection Expense	1,096.46	1,205.00		10%	
60002-4 · Travel/Misc. Expense	1,138.72	1,255.00		10%	
Total 60002 · Infection Control Inspection	11,505.16	12,700.00		10%	
Total Expense	1,088,060.31	1,329,048.00		22%	
Net Ordinary Income	227,811.13	(18,048.00)		-108%	
Other Income/Expense					
Other Income					
40800 · Interest Income	611.67	625.00		2%	
Total Other Income	611.67	625.00		2%	
Other Expense					
75501 · Bad Debt Expense	400.00	0.00		-100%	
Total Other Expense	400.00	0.00		-100%	
Net Other Income	211.67	625.00		195%	
Net Income Over Expenses	228,022.80	(17,423.00)		-108%	

Agenda Item: (6)(a)(1)

**Approval to amend PHE
program**

- Deborah Osborn, RDH



Cellular: [REDACTED]
FAX: (775) 851-6013

Deborah Osborn, BSDH, RDH
Registered Dental Hygienist

NEVADA REGISTERED DENTAL HYGIENIST: LIC#101046 NPI: 1346530045 CALIFORNIA HAP LIC#367

September 1, 2018

Nevada State Board of Dental Examiners
6010 S. Rainbow Blvd., Bldg. A, Ste. 1
Las Vegas, NV 89118



Dear NSBDE:

As a Portable Dental Hygiene Practice, my approved Program "Keeping The Smiles" is being requested more often by patients and their families to bring services into their private homes. They are at many times being referred by a Geriatric Specialty Care MD or other healthcare provider, who assume their patients can obtain preventive oral care no matter where they reside as patients with compromised access to health care.

My Program and Protocols for provision of care would not change from currently established methods no matter the location. I am requesting approval to modify the existing Program to include seeing patients with compromised health in their private homes so they may for instance be able to age in place or receive customized services to address a variety of compromising health issues.

Respectfully yours,

Deborah K. Osborn, RDH
Keeping The Smiles
1615 Ghattis Way
Reno, NV. 89521

**PHE Dental Hygien Program
Proposal:**

- His Heart

Proposal By: Angela Cameron, RDH



His Heart

*A Community Based Dental Hygiene Program
Proposal*

Angela Meadow Cameron, RDH
September 4, 2018

His Heart

Policies and Procedures

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1. His Heart Program Mission, Policies, and Parameters

Objective: Provide Dental Hygiene Services and Dental Referrals to Low Income or Underserved Populations in Northern Nevada

Author: Angela Meadow Cameron, RDH
His Heart Executive Director
Program Administrator

Reviewed By: Kristina V. Jeannes
His Heart Secretary

Mission

We aim to provide free, dental hygiene services and dental referrals to low income, underserved populations in Northern Nevada. Oral healthcare needs would be met through dental screenings, oral hygiene instruction, problem prevention education, prophylaxis, fluoride varnish application, and sealants if indicated through evidence-based clinical Best Practices. Our target populations are homeless or at risk youth and adults, and senior residents of assisted living facilities. Services would be provided at day centers, housing program locations, shelters, community health facilities, assisted living facilities, and general dental offices.

Policies

All His Heart volunteers and employees must follow Nevada Statutes, Rules and Regulation that govern the practice of dentistry and dental hygiene as listed in NRS 631 and NAC 631 and 459 and hold an active license. They must also follow CDC guidelines for infection control in the dental office, and abide by HIPAA

regulations. Liability Insurance must be maintained during the duration of the His Heart program.

Parameters

Services will be provided at day centers, housing program locations, shelters, community health facilities, assisted living facilities, and dental offices of licensed Nevada dentists who are volunteering their services and office space. Generally, the program will operate from 8:00am to 1:00pm every other Friday, or as staff availability and community needs dictate. We would anticipate seeing 4-10 patients per month.

His Heart can be reached by email at HisHeartNonProfit@gmail.com, by mail at P.O. Box 18523 Reno, NV 89511, or by phone at (775) 240-0726.

No mobile dental equipment has been purchased at this time, as first we seek NSBDE approval of the program, then fundraising efforts and acquisition of equipment would then seem appropriate. One dental hygienist who has their Public Health Dental Hygiene Endorsement and one assistant will initially provide regular services with a mobile setup, inspected for OSHA compliance by and independent company like Compliance Alliance. Additionally, we hope to partner with a volunteer dentist opening their office for services bimonthly. Dr Gerald Hansen and Dr Megan Cercek have shown interest in partnering with His Heart to see patients upon Nevada State Board of Dental Examiners approval of the program. As to not ask too much of these dentists, upon board approval we will seek the partnership of additional dentists to help meet the dental needs of the at-risk populations His Heart aims to reach.

This is a volunteer run program to start, so no compensation will be provided for services rendered except necessary reimbursement of expenses. If His Heart does employ staff in the future, employees will be paid by the hour, and time sheets will be turned in by the program administrator to a payroll service to handle compensation. If that time comes, then His Heart will expand their board, and

vote on the details of a modest compensation with an emphasis still on volunteerism for the greater good of the underserved community.

Before treatment, patients will produce a signed medical history form and consent for His Heart staff to render treatment within their scope of their practicing clinicians. Minors should have a legal guardian or parent complete forms, but in the case of at-risk minor that is homeless or part of a sex trafficking rehabilitation program and no legal guardian is present, then the recipient seeking care **and** an adult who is affiliated with a program His Heart partners with (like Eddy House or Awaken), will sign the consent for treatment whenever possible.

Services Offered

Oral health education and problem prevention strategies (including the risks of sugar, tobacco, biofilm, oral piercings), home care instructions (including brushing, flossing, and fluoride), discuss the benefits of dental treatments like prophylaxis, sealants, and fluoride varnish and then provide those services when appropriate. Explain post operative instructions for all services rendered. Oral screenings to assess oral health needs (including oral cancer exam and periodontal assessment), and referrals for follow up dental care and X-rays at a partnering dental office location.

Referral Program

Upon screening and an evidence based assessment, referrals to a partnering dental office or public dental health clinic will be provided for the treatment and continuing care when: patient experiences regular dental pain, abcess present, rampant caries in multiple quadrants of the mouth, deep caries in one quadrant of the mouth, heavy calculus buildup or deep pocketing requiring local anesthetic versus topical anesthetic to maintain comfort, abnormality found during oral cancer screening, or when regular recall is due. Patient will initial that they have received a referral, explained the reason and its urgency in their chart for documentation.

Referral Network includes: Community Health Alliance, Compassion Community Clinic, and local dental offices.

Clinical Duties and Infection Control

- Inventory and order program supplies
- Monitor program budget and expenses
- Maintain equipment following manufacturers recommendations, seeking repairs as needed
- Set up treatment materials and daily paperwork
- Provide oral health education
- Utilize electronic health records when possible, and maintain paper charts when not available
- Utilize Personal Protective Equipment as outlined by OSHA
- Take X-rays if volunteering in a dental office under the supervision and partnership of a dentist in His Heart's partnership program
- Assess oral health status and provide oral prophylaxis, using topical anesthetic as needed for patient comfort (referring when topical is not sufficient)
- Assess recall needs and explain reasoning to patient, giving a referral for continued care
- Assess teeth suitable for fluoride varnish
- Assess teeth suitable for sealant placement
- Provide post operative instructions for treatment rendered
- Sterilize equipment and instruments for the next treatment day. Instruments will be transported in a heavy gauge plastic "dirty" instrument container and sterilized at Dr Megan Cercek or Dr John Childs dental offices, where regular monitoring occurs of the sterilization process.
- Maintain compliance with HIPPA and OSHA requirements
- Adhere to CDC guidelines for infection control in the dental office, including the use of plastic barriers, Cavi-cide wipes, etc.

Xray Protocol

No X-rays will be administered with the mobile His Heart program, so no mobile X-ray equipment will be purchased as part of this initiative. X-rays will be obtained through a licensed dental office under the Doctors prescription of advised care. His Heart licensed staff may take X-rays if volunteering with partnering

Dentist when they periodically open their office for Pro Bono care of the underserved.

Prophylaxis Protocol:

Intra and Extra Oral Exam, Prophylaxis, Post Operative Instruction

1. Introduce yourself and ask if patient has any concerns
2. Review medical history and assess special needs. If patient requires premedication and did not take it prior to appointment, they will be given a referral for the next available date to receive treatment at a dental office versus with His Hands mobile hygiene service where premed can be given or prescribed by the authority of a dentist. If their medical health is in question, then refer to a medical provider and forgo treatment today. If Blood Pressure is >180 systolic and/or >120 diastolic, then recheck in 5 minutes. If still elevated to this level, do not perform dental treatment and refer to nearest Emergency Room. If blood pressure is above 140/90, continue treatment but monitor during appointment. Recommend consulting a physician to address their elevated blood pressure condition.
3. Put on Personal Protective Equipment and give patient safety glasses
4. Place bib around patient and recline if possible in treatment chair
5. Do Extra and Intra Oral exams to check for abnormalities
6. Assess gingival health, complete periodontal charting, and explore dentition to devise a dental hygiene treatment plan. This may include prophylaxis, sealants, fluoride varnish, and a dental partner referral. Discuss benefits of these treatments.
7. Identify treatment urgency= 0- no obvious problems, 1- early dental problems, 2- significant dental issues
8. Strategize preventive dental care plan after assessing plaque, bleeding, amount of calculus, time since last dental visit, diet, and oral habits.
9. Discuss findings and educate patient in an encouraging way, to invite positive changes and trust. (Likely this will happen during the prophylaxis).
10. Remove plaque, calculus, biofilm, stain, and food debris with sterilized instruments.

11. Coronal polish with prophy paste, rinse, floss, rinse.
12. Demonstrate proper brushing and flossing techniques if indicated. Tailor individual needs to include other adjuncts, diet recommendations, etc. using evidence-based clinical Best Practices.
13. Apply sealants and or fluoride varnish if needed.
14. Discuss the need for regular recalls and the importance of referrals if indicated. Document by having patient initial receiving the referral and the reason why it was indicated.

Sealant Protocol

*Do not seal if tooth cannot be isolated, or caries present and cavitation >1mm

1. Provide orange safety glasses to patient
2. Polish teeth to be sealed with dry prophy angle with pointed brush tip, rinse
3. Isolate teeth to be sealed, dry excess saliva, and etch 30 seconds (variable depending on etch used)
4. Rinse thoroughly, isolate, dry off with air
5. Apply sealant, lightly covering all pits and grooves, cure 20 seconds
6. Check for adequate coverage, and reapply if needed and cure another 20 seconds.
7. Remove isolation, check for excess flash.
8. Give post-operative instructions not to eat anything very hard or sticky for the first day.

Fluoride Varnish Protocol

1. After prophylaxis or sealant placement (whichever was last), dry teeth
2. Paint thin layer of fluoride varnish on all teeth without large areas of decay
3. Give post-operative instructions not to have anything hot or very crunchy (not abrasive) food/drink for 4 hours, and avoid to also avoid brushing and flossing for 4 hours. Explain the “waxy/coated” feeling will go away after brushing, but discuss again the benefits of fluoride applications (not more than quarterly).

Equipment

His Heart has no equipment presently, but plans to fundraise to purchase equipment upon NSBDE program approval. A ProQuest chair from DNTLworks, and Sterisil straw, Dexis dental records program, an AED unit, emergency kit, disposable exam packs, and stainless dental hygiene instruments will be the first priority to acquire.

Emergency Protocol (As Determined by 2015 AHA Update for CPR and ECC)

Emergency equipment:

Emergency Kit: Epinephrine, Diphenhydramine, inhaler, Nitroglycerin, aspirin, glucose, Ammonia inhalant.

Additional items: Blood pressure cuff and stethoscope, CPR barrier, eye wash station, AED unit.

1. Determine responsiveness
2. Check breathing and pulse simultaneously. If no pulse or irregular breathing, activate emergency response system
3. Have assistant call 911, bring emergency kit and AED to the scene
4. Start CPR, but attach/activate AED as soon as it arrives
5. Maintain CPR until rescue personnel take over, only pausing if shock is being delivered as directed by AED.
6. Document

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**VOLUNTARY SURRENDER
of LICENSE**



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VOLUNTARY SURRENDER OF LICENSE

STATE OF MISSOURI

COUNTY OF PHELPS

I, DUSTIN KIM, hereby surrender my Nevada
Dental /Dental Hygiene (circle one) license number 6655 on 19th day of
July, 2018.

By signing this document, I understand, pursuant to Nevada Administrative Code (NAC) 631.160, the surrender of this license is absolute and irrevocable. Additionally, I understand that the voluntary surrender of this license does not preclude the Board from hearing a complaint for disciplinary action filed against this licensee.

Licensee Signature

7-19-18
Date

Nancy A. Eitleman
Notary Signature

NANCY A. EITLEMAN
Notary Public – Notary Seal
STATE OF MISSOURI
Phelps County
My Commission Expires Feb. 25, 2020
Commission #12507982

Notary Seal

Licensee Current Mailing Address:

Home Phone _____ Cell Phone: