

NEVADA STATE BOARD of DENTAL EXAMINERS



REGULATION WORKSHOP

TUESDAY, DECEMBER 15, 2020

6:00 P.M.

PUBLIC COMMENT BOOK

Public Comment:

Nevada Dental Hygienists' Association

Letter dated December 13, 2020



December 13, 2020

The Nevada Dental Hygienists' Association supports the administration of vaccinations by all licensed dental practitioners as well as the implementation of dental therapists as adopted by the Nevada Legislature in 2019. We have a few comments to add to the public record as well as some follow up questions.

1. We would like to request, again, that the Committee on Dental Hygiene and Dental Therapy be a fully functioning committee and be utilized when such significant changes are being discussed. The board did appoint a dental hygiene and dental therapy subcommittee to specifically address dental therapy implementation. The first meeting was scheduled on November and was cancelled. As of 30 days later, no notice has been given as to plans of rescheduling.
2. The NDHA would like to encourage the board to examine problematic language within dental therapy statute and determine a plan of action for a bill draft request in the to resolve conflicts and address emerging and existing dental therapy educational programs and dental therapy examinations in the US.
3. The NDHA does not support the outrageously high licensure fee for dental therapists. It is our understanding that the dental therapy practitioner must also hold a dental hygiene license. This provider in intended to serve the public and vulnerable populations. An extremely high licensure fee, one that is up to 16 times higher than other states, may serve as a deterrent for providers to want to move and practice in Nevada.
4. Many other portions of the NAC will need to be addressed to add dental therapy where appropriate.

5. For the immunization language, the NDHA has submitted suggested language changes in an attached document. There is a bill draft request in from Assemblyman O'Neal that has been carefully drafted and reviewed by numerous professional dental entities in our state. This language promotes public health outreach and safety and the attached language edits align with the bill draft that has been submitted.

SB366 Bill Language that was adopted:

[Bill Text: NV SB366 | 2019 | 80th Legislature | Enrolled | LegiScan](#)

Questions:

1. For IMMUNIZATIONS: Pursuant NRS 233B.062-233B.063, doesn't a temporary regulation require statutory authority in order to be enacted? If so, can you direct us to the statutory location the immunization regulation is following?

2. For DENTAL THERAPY:

- a. How does the board plan to handle conflicting language in NAC 631.173 for continuing education requirements, 18 per year or 40 biennially?
- b. Will dental therapists be required to have and maintain dual-licensure? Will dental therapists be required to also hold a special public health endorsement? Will dental therapists be required to complete 20 CE credits for dental therapy and additional credits for dental hygiene licensure or will there be some cross over permitted?
- c. Under the scope for practice for Dental therapists: Authorization to perform certain services: This section states "dental hygiene care plan" several times when discussing a dental therapists treatment plan. Would it be more appropriate to use the term "Dental Therapy Care Plan". This may be important to differentiate the difference between a dental hygiene care plan and the dental therapy care plan/treatment plan. As the dental therapy care plan/treatment plan can include additional treatment respective to a dental therapists' scope of practice and practice agreement.
- d. Can you clarify where local anesthesia language is in the dental therapy regulation draft? The language that was adopted by the legislature was NRS 631.3453 that allows the dental hygienist and the dental therapist to be *authorized* to administer local anesthesia.
- e. Will dental therapists be included in qualifying for CE credit for volunteers, as other licensed dental Practicioners are allowed?

f. Under NAC 631.173 Continuing Education, the American Association of Dental Hygiene is listed. We are not familiar with that organization. Can you clarify who that group is and where we can find information?

3. FOR PUBLIC HEALTH ENDORSEMENT: Under NRS 631.145: It appears as mandatory liability insurance is being required for the public health endorsed dental hygienists. Many other licensing boards have been unable to require liability/malpractice insurance. It also does not appear as any other licensed dental providers are required to have liability insurance. Can you please provide guidance on why this requirement is proposed as it does not appear to be a best practice for regulation or statute language? Can you please demonstrate where other language exists in any Nevada law?

9. How should typo's be addressed:

4) NAC 631.1785 3.(c) Fourth line in the paragraph - "dentist9s)" should be "dentist(s)"

NAC 631.____ Dental therapists:....

2. (s) "apthus" should be "aphthous"

NAC 631.210 Dental hygienists:....

3.(f) "apthus" should be "aphthous"

Public comment for the end of meeting:

1. While we understand that the minimum requirement of notice of public meetings is only 3 days, we are asking the board to consider giving as much notice as possible when significant regulatory and/or statutory language is discussed to ensure all participants have time to exercise due diligence in reading materials and preparing questions and comments.

Respectfully submitted,

The Nevada Dental Hygienists Association, Legislative Committee

Antonio Ventura, Annette Lincicome, Lancette VanGuilder

Supporting Documents:**Examples of dental hygiene and dental therapy licensure fees****National Dental Hygiene Licensing Fees-Renewals (only those geographically close are listed below)**

Nevada	\$300/2 years
Oregon	\$155/2 years
Idaho	\$175/2 years
California	\$160/2 years
Utah	\$37/2 years
Arizona	\$300/ 3 years

http://www.adha.org/resources-docs/7512_CE_Requirements_by_State.pdf

National Dental Therapy Licensing Fees- Initial and Renewal

Minnesota: \$253.25 for examination packet (licensure by exam, background check and initial fee of \$120)

Alaska: Dental Therapy is not listed as a profession that is licensed by the dental board

Maine: \$50 application fee, \$50 license fee- renews every 2 years with dental hygiene license (\$140)

Public Comment:

Nevada Dental Hygienists' Association

***Proposed Amendments to Regulations regarding
Immunizations by Licensed Dental Practitioners***

IMMUNIZATIONS BY LICESNED DENTAL PRACTITIONERS

NRS 631.XXX “Licensed Dental Practitioner” defined. Licensed Dental practitioner means a dentist, dental hygienist, dental hygienist with a public health endorsement, or dental therapist who is licensed pursuant to Chapter 631 of NRS. ~~A dental hygienist who holds an active license pursuant to this chapter must work under the direct and immediate supervision of a licensed Nevada dentist. A dental therapist who holds an active license pursuant to this chapter must work under a written agreement with an authorized dentist.~~

NRS 631.XXX “Model Standing Orders” defined. Model standing orders means prewritten orders and specific instructions for administration and frequency of a given medication (vaccines) to a person in clearly defined circumstances by the Board and/or Department of Health and Human Services and/or Board of Health. [Using Standing Orders for Administering Vaccines: What You Should Know \(immunize.org\)](http://immunize.org)

NRS 631.0092-XXX “Vaccines for Children” (VFC) defined. Vaccines for children means a federal program that provides vaccine serums at no cost to providers for clients 0 to 18 years of age.

NRS 631.0093XXX “Immunization” defined. As used in NRS 639.297 to 639.2978, inclusive, unless the context otherwise requires, “immunization” means the act of inducing antibody formation through the introduction of a drug into the human body.

NRS 631.0094 “Vaccine Information Statement” (VIS) defined. Vaccine Information Statement (VIS) means vaccine information statement developed and maintained by the Centers for Disease Control and Prevention. Current versions can be found at: <https://www.cdc.gov/vaccines/hcp/vis/current-vis.html>

NRS 631.0095 XXX “Immunization Information System” defined. Immunization Information System means the informational collection system administered by the State Board of Health and outlined in NRS 439.265.

NRS 631.0096 XXX “VAERS” defined. The National Childhood Vaccine Injury Act requires an immunizing health care provider (including dental practitioners) to report adverse vaccine events to Vaccine Adverse Event Reporting System (VAERS).

NRS 631.2561—XXX

Authorization; administration of vaccines

1. A person licensed to practice dentistry as outlined in Chapter 631 shall be deemed to be practicing dentistry while participating in the prescription and administration of vaccines.
2. A dental practitioner may administer immunizations by an intranasal, intramuscular or subcutaneous injection ~~to a patient of record.~~
3. A dental practitioner may administer immunizations by an intranasal, intramuscular or subcutaneous injection only if:
 - (a) The dental practitioner has completed a course of training approved by the Board;
 - (b) The vaccines are administered in accordance with the “Model Standing Orders” approved by the Department of Health and Human Services
 - (c) Written policies and procedures for handling and disposal of used or contaminated equipment and supplies are maintained
 - (d) The dental practitioner has immediate access to emergency response equipment, including but not limited to oxygen administration equipment, epinephrine, and other allergic reaction response equipment;
 - (e) The dental practitioner or designated staff has given the appropriate Vaccine Information Statement (VIS) to the patient or legal representative with each dose of vaccine covered by these forms. The dental practitioner must ensure that the patient or legal representative is available and has read, or has had read to them, the information provided and has had their questions answered prior to the dental practitioner administering the vaccine. The VIS given to the patient must be the most current statement.

4. The dental practitioner or designated staff must document in the patient record:
 - (a) The date and site of the administration of the vaccine;
 - (b) The brand name, or national drug code (NDC) number, or other acceptable standardized vaccine code set, dose, manufacturer, lot number, and expiration date of the vaccine;
 - (c) The name or identifiable initials of the administering dental practitioner;
 - (d) The address of the office where the vaccine(s) was administered unless automatically embedded in the electronic report provided to the Immunization Information System according to NRS 439.265;
 - (e) The date of publication of the VIS; and
 - (f) The date the VIS was provided and the date when the VIS was published.
5. If providing state or federal vaccines, the vaccine eligibility code must be reported to the Immunization Information System.
6. A dental practitioner who administers any vaccine must report, the elements of Section (3), and Section (4) of this rule if applicable, to the Immunization Information System within 14 days of administration.
7. The dental practitioner must report adverse events to the state epidemiologist or county health department in compliance with NRS 441A within 10 business days and to the primary care provider as identified by the patient.
8. A dental practitioner who administers any vaccine will follow storage and handling guidance from the vaccine manufacturer and the Centers for Disease Control and Prevention (CDC).
9. Any dental practitioner administering immunizations by an intranasal, intramuscular or subcutaneous injection under this section shall comply with guidelines established by the federal Advisory Committee on Immunization Practices (ACIP) relating to vaccines and immunizations, which includes, but is not limited to, vaccine storage and handling, vaccine administration and documentation, and vaccine contraindications and precautions.
10. Non-compliance with all sections within NRS 631.2561 may be viewed as unprofessional conduct which is subject to disciplinary action by the Nevada State Board of Dental Examiners.

NRS 631.2562—XXX Training and ~~certification~~ Endorsement to administer immunizations.

1. Before a ~~licensed dental practitioner dentist or dental hygienist with a public health endorsement may administer an immunization, or before a dental hygienist acting under the direct and immediate supervision of a dentist may administer an immunization, or before a dental therapist acting under a written agreement with an authorized dentist may administer an immunization~~ dental, the dental practitioner must be trained and board ~~endorsed~~ ~~certified~~ to administer immunizations by completing a course approved by the Nevada State Board of Dental Examiners that includes:

- (a) Education and practical training, including, without limitation, written study materials regarding techniques for administering immunizations;
- (b) Evaluation of the knowledge and technique of the dental practitioner in administering immunizations;
- (c) Instruction consistent with the current training guidelines of the Centers for Disease Control and Prevention; and
- (d) Except as otherwise provided in subsection 2, instruction and practical training concerning:
 - (1) The standards for pediatric, adolescent and adult immunization practices recommended and approved by the United States Public Health Service Advisory Committee on Immunization Practices;
 - (2) Basic immunology, and vaccine and immunization protection;
 - (3) Diseases that are preventable through vaccination and immunization;
 - (4) Recommended immunization schedules;
 - (5) Vaccine and immunization storage and management;
 - (6) Informed consent;

- (7) Physiology and techniques for administration of immunizations;
- (8) Preimmunization and postimmunization assessment and counseling;
- (9) Information on reporting adverse vaccine events to VAERS and in accordance with NRS 441A
- (10) Immunization reporting and records management; and
- (11) Identification, response, documentation and reporting of adverse events.

2. In lieu of complying with the requirements of paragraph (e) of subsection 1, a **licensed** dental practitioner who administers immunizations consisting exclusively of live attenuated influenza vaccine through the nasal passages of a person may complete a program of instruction which is **accredited-approved** by the Nevada State Board of Dental Examiners and includes instruction relating to:

- (a) The epidemiology of influenza;
- (b) The pathophysiology, clinical presentation, diagnosis, prevention and treatment of influenza;
- (c) The administration, storage and handling of influenza vaccines; and
- (d) The counseling of patients who will be immunized with the vaccine.

NRS 631.2563—XXX ~~Certification in basic cardiac life support~~; continuing education.

~~A dentist or dental hygienist with a public health endorsement who administers immunizations, or a dental hygienist acting under the direct and immediate supervision of a dentist who administers immunizations, or a dental therapist acting under a written agreement with an authorized dentist to administer immunizations,~~ licensed dental practitioner who administers immunizations shall:

- ~~1.—Maintain certification in basic cardiac life support from the American Heart Association; and~~
2. On or before June 30 of each **Bi Annual Renewal Cycle year**, complete:
 - (a) At least 2 hours of continuing education in a course or courses that address the life cycle of diseases, drugs and administration of immunizations; or
 - (b) A course provided by the Centers for Disease Control and Prevention regarding epidemiology and prevention of diseases which are preventable through immunization; or
 - (c) A training course offered by Immunize Nevada or its successor organization; or
 - (d) Any other course or teaching entity approved by the Board.
 - (e) Any course pursuant to NAC 631.173 (4)**

NRS 631.2564XXX Reporting of certain information concerning immunizations.

~~A dentist or dental hygienist with a public health endorsement who administers immunizations, or a dental hygienist acting under the direct and immediate supervision of a dentist who administers immunizations, or a dental therapist acting under a written agreement with an authorized dentist to administer immunizations,~~ licensed dental practitioner shall report the information required for inclusion in the Immunization Information System established by the Department of Health and Human Services pursuant to NRS 439.265 and the regulations adopted pursuant thereto.

NRS 631.2565 XXX Written consent and medical history of patient required before administration of immunizations.

1. Written consent of the patient must be obtained before the administration of immunizations by an intranasal, intramuscular or subcutaneous injection. If the patient is a minor, the consent must be obtained from his or her parent or legal guardian.

2. A medical history must be reviewed before the administration of immunizations by an intranasal, intramuscular or subcutaneous injection. A patient should be asked to describe any current medical conditions or treatments, including, without limitation, medications, drug allergies, impending or past operations and pregnancy, and prior adverse reactions to immunizations to give information that may be helpful to the person administering immunizations by an intranasal, intramuscular or subcutaneous injection. The dental practitioner is not

required to make a complete medical examination of the patient and draw medical diagnostic conclusions. If a dental practitioner suspects a medical problem and calls in a physician for an examination and evaluation, he or she may then rely upon that conclusion and diagnosis. Questions asked of and answers received from the patient must be permanently recorded and signed by the patient before the administration of immunizations by an intranasal, intramuscular or subcutaneous injection, and this record must be a permanent part of the patient's record of treatment.

NRS 631.2567 ~~XXX~~ Maintenance of records.

1. Each record required to be made pursuant to NRS 631.009 to NRS 631.0095 and NRS 631.2561 to NRS 631.2568, inclusive, must be kept for at least 2 years by the dental practitioner administering the immunization and the office who possessed the drugs administered. Such records must be available for inspection and copying by the Board or its representative, or any other authorized federal, state or local law enforcement or regulatory agency.
2. Records required pursuant to this section may be maintained in an alternative data retention system, including, without limitation, a computer data processing system or direct imaging system, if:
 - (a) The records maintained in the alternative system contain all the information required for a written record; and
 - (b) The data processing system is capable of producing a printed copy of the record upon the request of the Board, its representative or any other authorized federal, state or local law enforcement or regulatory agency.

NRS 631.2568 ~~XXX~~

~~Confidentiality of records.~~

1. A ~~licensed dental practitioner dentist or dental hygienist with a public health endorsement who administers immunizations, or a dental hygienist acting under the direct and immediate supervision of a dentist who administers immunizations, or a dental therapist acting under a written agreement with an authorized dentist to administer immunizations,~~ shall provide adequate security to prevent unauthorized access to confidential records of immunizations. If confidential health information is not transmitted directly between a dental practitioner and a physician, but is transmitted through a data communication device, the confidential health information must not be viewed or used by the operator of the data communication device unless the operator is specifically authorized to obtain confidential information pursuant to this subsection.

2. Except as otherwise provided in NRS 49.245, the confidential records of immunizations are privileged and may be released only to:
 - (a) The patient or the authorized agent of the patient;
 - (b) Physicians, dental practitioner, and pharmacists, when, in the professional judgment of the dental practitioner, such release is necessary to protect the health and well-being of the patient;
 - (c) The Board or other federal, state or local agencies authorized by law to receive such information;
 - (d) A law enforcement agency engaged in the investigation of a suspected violation involving a controlled substance or dangerous drug;
 - (e) A person employed by any state agency that licenses a physician if such a person is engaged in the performance of his or her official duties; or
 - (f) An insurance carrier or other third-party payor authorized by a patient to receive such information.
3. The provisions of this section must not be construed to affect or alter the provisions of NRS 49.215 to 49.245, inclusive, relating to the confidentiality of communications between a doctor and a patient.