

NEVADA STATE BOARD  
of  
DENTAL EXAMINERS



DENTAL HYGIENE & DENTAL  
THERAPY COMMITTEE MEETING

WEDNESDAY, JANUARY 3, 2024

6:00 P.M.

**PUBLIC BOOK**



2651 N. Green Valley Pkwy, Ste. 104 • Henderson, NV 89014 • (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

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## **NOTICE OF AGENDA & TELECONFERENCE MEETING FOR THE DENTAL HYGIENE & DENTAL THERAPY COMMITTEE MEETING**

### **Meeting Date & Time**

WEDNESDAY, JANUARY 3, 2024  
6:00 P.M.

### **Meeting Location:**

Nevada State Board of Dental Examiners  
2651 N. Green Valley Pkwy., Suite 104  
Henderson, NV 89014

### **Video Conferencing / Teleconferencing Available**

**To access by phone**, call Zoom teleconference Phone Number: (669) 900 6833

**To access by video webinar**, visit [www.zoom.com](http://www.zoom.com) or use the Zoom app

Zoom Webinar/Meeting ID#: **875 6054 0107**

Zoom Webinar/Meeting Passcode: **030855**

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### **PUBLIC NOTICE:**

**Public comment by pre-submitted email/written form and live public comment in person by teleconference** is available after roll call (beginning of meeting and prior to adjournment (end of meeting)). Live Public Comment is limited to three (3) minutes for each individual.

Members of the public may submit public comment in written form to: **Nevada State Board of Dental Examiners, 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014; FAX number (702) 486-7046; e-mail address [nsbde@dental.nv.gov](mailto:nsbde@dental.nv.gov)**. Written submissions received by the Board on or before **Tuesday, January 2nd, 2024, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

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.

Persons/facilities who want to be on the mailing list must submit a written request every six (6) months to the Nevada State Board of Dental Examiners at the address listed in the previous paragraph. With regard to any board meeting or telephone conference, it is possible that an amended agenda will be published adding new items to the original agenda. Amended Nevada notices will be posted in compliance with the Open Meeting Law.

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Board, at (702) 486-7044, no later than 48 hours prior to the meeting. Requests for special arrangements made after this time frame cannot be guaranteed.

Pursuant to NRS 241.020(2) you may contact at (702) 486-7044, to request supporting materials for the public body or you may download the supporting materials for the public body from the Board's website at <http://dental.nv.gov> In addition, the supporting materials for the public body are available at the Board's office located at 2651 N. Green Valley Pkwy, Ste. 104, Henderson, NV 89014.

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**Note:** Asterisks (\*) "**For Possible Action**" denotes items on which the Board may take action.

**Note:** Action by the Board on an item may be to approve, deny, amend, or tabled.

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**1. Call to Order**

- Roll call/Quorum

**2. Public Comment (Live public comment in person, by teleconference and pre-submitted email/written form):**

The public comment period is limited to matters specifically noticed on the agenda. No action may be taken upon the matter raised during public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place and manner restriction, but may not be limited based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

Members of the public may submit public comment via email to [nsbde@dental.nv.gov](mailto:nsbde@dental.nv.gov), or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Tuesday, December 19, 2023, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual, the Chair may prohibit comment if the content of that comment is a topic that is not relevant to, or within the authority of, the Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

**\*3. Chairmans' Report:** Dr. Branco, DMD & Ms. Arias, RDH (For Possible Action)

**\*a. Request to remove agenda item(s)** (For Possible Action)

**\*b. Approve Agenda** (For Possible Action)

**\*4. New Business:** (For Possible Action)

**\*a. Discussion, Consideration and Possible Approval/Rejection of Public Health Endorsement Application – NRS 631.287** (For Possible Action)

- (1) Youlanda Bates, RDH – Seal Nevada South Program
- (2) (2) Brittany Halvorson, RDH – Community Health Alliance

**5. Public Comment (Live public comment in person or by teleconference):** This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon the matter raised during public comment unless the matter itself has been specifically included on the agenda as an action item. Comments by the public may be limited to three (3) minutes as a reasonable time, place, and manner restriction, but may not be limited based upon viewpoint. The Chairperson may allow additional time at his/her discretion.

Members of the public may submit public comment via email to [nsbde@dental.nv.gov](mailto:nsbde@dental.nv.gov), or by mailing/faxing messages to the Board office. Written submissions received by the Board on or before **Tuesday, January 2nd, 2024, by 4:00 p.m.** may be entered into the record during the meeting. Any other written public comment submissions received prior to the adjournment of the meeting will be included in the permanent record.

In accordance with Attorney General Opinion No. 00-047, as restated in the Attorney General's Open Meeting Law Manual, the Chair may prohibit comment if the content of that comment is a topic that is not relevant to, or within the authority of, the Nevada State Board of Dental Examiners, or if the content is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, or amounting to personal attacks or interfering with the rights of other speakers.

**6. Announcements****\*7. Adjournment** (For Possible Action)**PUBLIC NOTICE POSTING LOCATIONS**

Office of the N.S.B.D.E. 2651 N. Green Valley Pkwy Ste. 104 Henderson NV 89014

State Board of Dental Examiners website: [www.dental.nv.gov](http://www.dental.nv.gov)

Nevada Public Posting Website: [www.notice.nv.gov](http://www.notice.nv.gov)

**Agenda Item 4(a):**

**Discussion, Consideration and Possible Approval/  
Rejection of Public Health Endorsement Application  
NRS 631.287**

**NRS 631.287** Dental hygienists: Special endorsement of license to practice public health dental hygiene; renewal.

1. The Board shall, upon application by a dental hygienist who is licensed pursuant to this chapter and has such qualifications as the Board specifies by regulation, issue a special endorsement of the license allowing the dental hygienist to practice public health dental hygiene. The special endorsement may be renewed biennially upon the renewal of the license of the dental hygienist.

2. A dental hygienist who holds a special endorsement issued pursuant to subsection 1 may provide services without the authorization or supervision of a dentist only as specified by regulations adopted by the Board.

(Added to NRS by [2001, 2691](#); A [2013, 479](#))

**Agenda Item 4(a)(1):**

**Discussion, Consideration and Possible Approval/  
Rejection of Public Health Endorsement Application  
NRS 631.287**

**Youlanda Bates, RDH - Seal Nevada South Program**



Nevada State Board of Dental Examiners

2651 N. Green Valley Parkway, Suite 104, Henderson, NV 89014
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046
nsbde@dental.nv.gov

APPLICATION FOR PUBLIC HEALTH ENDORSEMENT

Name: Yaslanda Bates License No: 4016
Address: [Redacted]
City, State, Zip Code: [Redacted] Home Phone: [Redacted]
E-mail: [Redacted] Work Phone: [Redacted]
Agency Affiliation for Endorsement: UNLV School of Dental Medicine Agency Phone: 702-774-2400
Agency Address: 1001 Shadow Lane MSC 7422, LV, NV 89104
Dental Hygiene Education Institution: College of Southern Nevada
Year of Graduation: 2001 Degree Received: Assoc. degree of applied science in dental hygiene

Description of Dental Public Health Program and Protocol (population, procedures, timeline, and referral mechanism): Continue on a separate paper if more room is needed.
Providing oral hygiene education and sealants to children in Title I Elem schools in Nevada. Done throughout Clark County School district school academic calendar year. Referrals done through direct contact with schools
Previous Public Health Dental Hygiene Endorsements: Held with NSBDE with UNLV school of Dental medicine in previous years

Please sign and have notarized:

I have read, understand and will comply with NAC 631.210 regarding the duties delegable to a dental hygienist in unsupervised practice, conduct my practice in accordance with OSHA guidelines, and maintain malpractice insurance during my endorsement.

Signature: [Handwritten Signature] Date: 10-9-23
Notary: see loose attachment Date: [Redacted]

Please return this application, a copy of your current CPR card, proof of malpractice insurance, and letter from the program director to:

Received
OCT 13 2023
NSBDE

Nevada State Board of Dental Examiners
2651 N Green Valley Pkwy, Suite 104
Henderson, NV 89014

Received
OCT 13 2023
NSBDE

**Certificate of Acknowledgement**

State of Nevada  
County of Clark

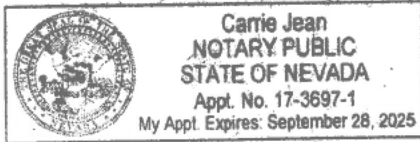
On October 09, 2023, before me, Carrie Jean  
(date) (notary)

personally appeared, Youlanda Bates  
(signers)

personally known to me -- OR --

proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument

WITNESS my hand and official seal



(seal)

Carrie Jean  
(notary signature)

**Received**  
OCT 13 2023  
**NSBDE**



**Agenda Item 4(a)(2):**

**Discussion, Consideration and Possible Approval/  
Rejection of Public Health Endorsement Application  
NRS 631.287**

**Brittany Halverson, RDH - Community Health Alliance**



### Nevada State Board of Dental Examiners

2651 N. Green Valley Parkway, Suite 104, Henderson, NV 89014  
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046  
nsbde@dental.nv.gov

### APPLICATION FOR PUBLIC HEALTH ENDORSEMENT

Name: Brittany Halvorson License No: 102299

Address: [Redacted]

City, State, Zip Code: [Redacted]

Home Phone: [Redacted]

E-mail: [Redacted]

Work Phone: \_\_\_\_\_

Agency Affiliation for Endorsement: Community Health Alliance

Agency Phone: (775) 329-10300

Agency Address: 680 S. Rock Blvd Reno, NV 89502

Dental Hygiene Education Institution: Truckee Meadows Community College

Year of Graduation: 2017

Degree Received: Asso.

Description of Dental Public Health Program and Protocol (population, procedures, timeline, and referral mechanism): Continue on a separate paper if more room is needed.  
See attached paper

Previous Public Health Dental Hygiene Endorsements: None

#### Please sign and have notarized:

I have read, understand and will comply with NAC 631.210 regarding the duties delegable to a dental hygienist in unsupervised practice, conduct my practice in accordance with OSHA guidelines, and maintain malpractice insurance during my endorsement.

Signature: [Signature] Date: 12/14/23

State of Nevada, County of Washoe  
Subscribed and sworn before me  
on this 04<sup>th</sup> day of Dec., 2023  
by Brittany S.G. Halvorson  
[Signature]

Notary: [Signature] Date: 12/04/2023

Please return this application, a copy of your current CPR card, proof of malpractice insurance, and letter from the program director to:

Nevada State Board of Dental Examiners  
2651 N Green Valley Pkwy, Suite 104  
Henderson, NV 89014



Received  
DEC 13 2023  
NSBDE  
REV 12/2021

# COMMUNITY HEALTH ALLIANCE

Community Health Alliance has a robust Dental Outreach program designed to reach underserved populations. Examples of this program are as follows:

**Outreach Events:** Dental hygienists, assistants and staff attend various outreach events including health fairs. Screenings on children are performed and fluoride varnish is placed. Children with dental needs are referred to the CHA children's restorative program, CHA Wells Family Dental, or CHA Sparks Family Dental. Referrals are followed up by administrative staff.

**Children's Mobile Dental:** Mobile dental van travels to areas in need to provide dental services to children. Services include exams, sealants, prophylaxis, and restorative. Referrals are given as needed to local specialists and hospital dental programs. Generally Dental Hygienists work under a Dentist's supervision in this program. There are times when a hygienist is needed to work independently providing prophylaxis, dental sealants, dental screenings, and application of fluoride varnish.

**Pediatric screenings in medical pediatric office:** Our program works in tandem with our medical pediatric office. In this program a hygienist works independently to screen pediatric patients and apply fluoride varnish as needed. Patients with dental needs are referred to the Children's Mobile Dental program, Sparks Family Dental or Wells Family Dental for their treatment needs and regular dental care.

Received  
DEC 13 2023  
NSBDE

# COMMUNITY HEALTH ALLIANCE

December 6, 2023

To Whom It May Concern:

Enclosed you will find an application for Public Health Endorsement for Brittany Halvorson. Please consider this application. Having our complete team able to serve the greater community will be extremely beneficial to the community. This will allow us to be involved in even more outreach than we are currently able. If you have any questions Please let me know.

Sincerely,



Jessica Clausen, DDS  
Dental Director  
Community Health Alliance  
1055 S. Wells Avenue  
Reno, Nevada  
[jclausen@chanevada.org](mailto:jclausen@chanevada.org)  
775-336-3772

Received  
DEC 13 2023  
NSBDE

Received

DEC 26 2023

NSBDE

**BLS**

for Healthcare  
Providers

STUDENT NAME

Brittany Cotton RDH

ISSUE DATE

4/6/23

EXPIRATION DATE

4/6/25

YES

NO

AED

X

Adult CPR

X

Child CPR

X

Infant CPR

X



Emergency Oxygen

**Chelsea N. Lucas**

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**From:** Board of Dental Examiners  
**Sent:** Thursday, December 21, 2023 4:05 PM  
**To:** Chelsea N. Lucas; Mark S. Karris  
**Cc:** Shane Barjon; Parker Arecchi; Christopher B. Bateman  
**Subject:** FW: Brittany Halvorson Public Health Endorsement: Malpractice info  
**Attachments:** FTCA coverage provider list 2024.pdf

**From:** Brittany Halvorson <BHalvorson@chanevada.org>  
**Sent:** Thursday, December 21, 2023 3:04 PM  
**To:** Board of Dental Examiners <nsbde@dental.nv.gov>  
**Subject:** Brittany Halvorson Public Health Endorsement: Malpractice info

**WARNING** - This email originated from outside the State of Nevada. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Please see attached for Brittany Halvorson, Malpractice Information

The information contained in this transmission may contain privileged and confidential information, including patient information protected by federal and state privacy laws. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

Received  
DEC 26 2023  
NSBDE

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DEC 26 2023  
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**COMMUNITY  
HEALTH  
ALLIANCE**

**Community Health Centers**

RE: FTCA Deeming Notice No: 1-F00000648-23-01  
Coverage from 1/1/2024 through 12/31/2024

Please see attached HRSA Federal Tort Claims Act Authorization Deeming Notice  
No: 1-F00000648-23-01 for calendar year 2024 Community Health Alliance.

Community Health Alliance is a Federally Qualified Health Center (FQHC) as designated by the Department of Health and Human Resources and Services Administration (HRSA) and is therefore covered for liability protection under the Federal Tort Claims Act (FTCA) for damages for personal injury, including death, resulting from the performance of medical, surgical, dental or related functions by employees while acting within the scope of such employment.

Coverage extends to deemed entities and their (1) officers; (2) governing board members; (3) full and part-time employees; and (4) contractors who are licensed or certified individual health care practitioners providing full-time services (i.e., on average at least 32-1/2 hours per week for the entity for the period of the contract), or, if providing an average of less than 32-1/2 hours per week of such service, are licensed or certified providers in the fields of family practice, general internal medicine, general pediatrics, or obstetrics/gynecology. Volunteers are neither employees nor contractors and therefore are not eligible for FTCA coverage under FSHCAA (Federally Supported Health Centers Assistance Act).

| <b>Community Health Alliance - PROVIDER ROSTER</b> |                                    |
|--|------------------------------------|
| Agatep, Rey, <b>MD</b>                             | McCarthy, Lauren, <b>LMFT</b>      |
| Avila, Diana, <b>LCSW</b>                          | Montoya, Natalia, <b>DMD</b>       |
| Bal, Dilpreet, <b>PA-C</b>                         | O’Gorman, Katherine, <b>DDS</b>    |
| Bare, Maria, <b>APRN</b>                           | Ozuna Diaz, Esmeralda, <b>LCSW</b> |
| Belton, Elizabeth, <b>APRN</b>                     | Peterson, Elizabeth, <b>PA-C</b>   |
| Clausen, Jessica, <b>DDS</b>                       | Popko, Laura, <b>MD</b>            |
| Collier, Lisa, <b>DDS</b>                          | Reese, Christine, <b>APRN</b>      |
| Cota, Marcos, <b>PA-C</b>                          | Rossback, Lynette, <b>APRN</b>     |
| Christensen, Jenae, <b>APRN</b>                    | Roth, Carly, <b>PA-C</b>           |
| Damian, Roxana, <b>PA-C</b>                        | Ruiz, Malina, <b>APRN</b>          |
| Dawley, Kelly, <b>APRN</b>                         | Sanchez, Lucia, <b>PA-C</b>        |
| Dennis, Shelinda, <b>APRN</b>                      | Sauter, Elizabeth, <b>APRN</b>     |
| Eliopulos, Stacie, <b>LCSW</b>                     | Schumacher, Mikayla, <b>PA-C</b>   |
| Fernandez, Maria, <b>MD</b>                        | Stage, Danielle, <b>MD</b>         |
| Ferro, Renato, <b>PA-C</b>                         | <b>Stewart, Jaime, PA-C</b>        |
| Fillmore, Alec, <b>DDS</b>                         | Sweeney, Nicole, <b>PA-C</b>       |
| Fischer, Aaron, <b>APRN</b>                        | Tordi, Carol, <b>MD</b>            |
| Forman, Jordan, <b>APRN</b>                        | VanDeMaele, Corrine, <b>PA-C</b>   |
| Greenblat, Dylan, <b>MD</b>                        | Victoria, Ana Maria, <b>MD</b>     |
| Halvorson, Brittany, <b>RDH</b>                    | Walker, Brooke, <b>APRN</b>        |
| Ikesakes, Ariel, <b>PA-C</b>                       | <b>Walker, Travis, MD</b>          |
| Kamper, Peggy, <b>APRN</b>                         | Williams, Jordan, <b>PA-C</b>      |
| Kirby, Amanda, <b>APRN</b>                         | Wishart-Ng, Seana, <b>APRN</b>     |
| Lee, James, <b>PA-C</b>                            | Xeras, Julie, <b>MD</b>            |
| Lilla-Keesling, Samantha, <b>PA-C</b>              | Young, Christine, <b>APRN</b>      |
| Lopez, Sarah, <b>MD</b>                            | Zegler, Nina, <b>PA-C</b>          |
| Lozano, Andrea, <b>APRN</b>                        |                                    |

**Received**  
**DEC. 26 2023**  
**NSBDE**